

The Model



Keeping Arts Safe; Health and Safety Policy Statement 2026

The Model believes that the welfare of the child, young person and vulnerable adult is paramount. All children, young people and vulnerable adults, whatever their age, culture, disability, gender, sexual orientation, racial origin and religious beliefs have the right to protection from abuse. We believe that all suspicions and allegations of abuse should be taken seriously and responded to swiftly and appropriately and that staff (paid and unpaid) should be clear on how to respond appropriately.

The Model will take every reasonable step to ensure that children, young people and vulnerable adults are protected where our own staff are directly involved in the delivery of an arts project. If a complaint or criminal proceeding occurs between an artist/ arts facilitator and a third party, as a result of The Model's direct or indirect involvement, The Model will treat the situation with the utmost urgency and confidentiality. We undertake to provide a safe environment and experience during our activities, where the welfare of the child, young person and vulnerable adult is to the fore.

This policy will be reviewed on an annual basis by –

Designated Liaison 1:	Lorna Kavanagh, Learning and Public Engagement Curator.
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Designated Liaison 2:	Christian Reeves General Manager
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The following procedures have been implemented to ensure the protection of children, young people and vulnerable adults:

- Code of behaviour for all staff;
- Reporting of suspected or disclosed abuse;
- Confidentiality;
- Recruitment and selecting staff;
- Managing and supervising staff;
- Involvement of primary carers;
- Allegations of misconduct or abuse by staff;
- Complaints and comments;
- Incidents and accidents;
- Consent forms;
- Definitions of abuse.

Code of behaviour for staff

- Treat all children, young people and vulnerable adults equally;
- Listen to and respect children, young people and vulnerable adults;
- Involve children, young people and vulnerable adults in decision-making, as appropriate;
- Provide encouragement, support and praise (regardless of ability);
- Use appropriate language (physical and verbal);
- Have fun and encourage a positive atmosphere;
- Offer constructive criticism when needed;
- Treat all children, young people and vulnerable adults as individuals and respect their personal space;
- Discuss boundaries on behaviour and related sanctions, as appropriate, with children, young people, vulnerable adults and their primary carers;
- Encourage feedback from group;
- Use appropriate teaching aids and materials, in terms of age and ability;
- Lead by example;
- Be aware of other commitments when scheduling rehearsals or activities, e.g., school, exams, medical appointments;
- Be cognisant of a person or child's limitations, due to a medical condition for example;
- Create an atmosphere of trust;
- Respect differences of ability, culture, religion, race and sexual orientation.

Good Practice

- Register each child/young person or vulnerable adult (name, address, phone, special requirements, attendance, emergency contact);
- Make primary carers, children/young people/vulnerable adults, visitors and facilitators aware of the protection policy and procedures;
- Have emergency procedures in place and make all staff aware of these procedures;
- Be inclusive of children, young people or adults with special needs;
- Plan and be sufficiently prepared, both mentally and physically;
- Report any concerns to the Designated Liaison and follow reporting procedures;
- Organisations should have an anti-bullying policy. Encourage children and young people to report any bullying, concerns or worries and to be aware of anti-bullying policy.
- Evaluate work practices on a regular basis;
- Provide appropriate training for staff and volunteers;
- Report and record any incidents and accidents;
- Update and review policies and procedures regularly;
- Keep primary carers informed of any issues that concern their children;
- Ensure proper supervision based on adequate ratios according to age, abilities and activities involved; observe appropriate gender balance for residential;
- Have a written agreement with any external organisation that an artist is working with;
- Don't be passive in relation to concerns, i.e., don't 'do nothing'; don't let a problem get out of control;
- Avoid taking a session on your own. If this is not possible then it should be

in an open environment with the full knowledge and consent of primary carers and support workers;

- Avoid giving a lift to a child/young person or vulnerable adult and if you do then make sure that primary carers/ support workers are informed;
- Maintain awareness around language and comments made. If you think that something you said may have caused offence or upset, then try to address it in a sensitive manner;
- Observe appropriate dress and behaviour.

Inappropriate Behaviour

- Avoid spending excessive amounts of time alone with children/young people or vulnerable adults;
- Don't use or allow offensive or sexually suggestive physical and/or verbal language;
- Don't single out a particular child/young person or vulnerable person for unfair favouritism, criticism, ridicule, or unwelcome focus or attention;
- Don't allow/engage in inappropriate touching of any form;
- Don't hit or physically chastise children/young people or vulnerable people;
- Don't socialise inappropriately with children/young people or vulnerable people, i.e. outside of structured organisational activities.

Physical contact

- Seek consent of child/young person or vulnerable adult in relation to physical contact (except in an emergency or a dangerous situation);
- Avoid horseplay or inappropriate touch;
- Check with a child/young person or vulnerable adult about their level of comfort when doing touch exercises.

Health and safety

- Don't leave children, young people or vulnerable adults unattended or unsupervised;
- Manage any dangerous materials;
- Provide a safe environment;
- Be aware of accident procedure and follow accordingly.

Reporting procedures

If you have an issue or concern about any aspect of a child, young person or vulnerable adult's safety and welfare, contact:

Designated Liaison Person 1

Lorna Kavanagh – lornakavanagh@themodel.ie – 083 155 0155

Designated Liaison Person 2

Christian Reeves : 085 777 2865

For general queries, phone The Model on **07191 41405**

It is the responsibility of the designated person(s) to support and advise staff about policy and procedures in relation to protection policy and to ensure that

procedures are followed. It is also the responsibility of the designated person(s) to liaise with the Health Service Executive or Gardaí where appropriate. Designated person(s) are regularly updated in terms of training that support their role.

Contacts for local Health Service Executive and Gardaí are:

Contact the Duty Social Work Office at Markievicz House, Barrack Street, Co. Sligo, F91XC84, by phone at 071 915 5133.

Sligo Garda Station.
Pearse Rd, Abbeyquarter South, Sligo.
(071) 915 7000

The following excerpt from Children First: National Guidelines for the Protection and Welfare of Children (4.3.2 - p.38) shows what would constitute reasonable grounds for concern:

- (i) specific indication from the child, young person or vulnerable that s/he has been abused;
- (ii) an account by a person who saw the child/young person or vulnerable adult being abused;
- (iii) evidence, such as an injury or behaviour, which is consistent with abuse and unlikely to be caused another way;
- (iv) an injury or behaviour which is consistent both with abuse and with an innocent explanation but where there are corroborative indicators supporting the concern that it may be a case of abuse - an example of this would be a pattern of injuries, an implausible explanation, other indications of abuse or dysfunctional behaviour;
- (v) consistent indication, over a period of time, that a child, young person or vulnerable adult is suffering from emotional or physical neglect.

The following lists outline circumstances, which may place children, young people and vulnerable adults at greater risk of abuse or neglect.

Parent/ carer factors:

- Drug and alcohol abuse
- Addiction, including gambling
- Mental health issues
- Adolescent parents
- Parental disability issues, including learning or intellectual disability
- Conflictual relationships

Child factors:

- Age
- Gender
- Sexuality
- Disability
- Young Carer
- Previous abuse
- Mental health issues including self-harm/suicide
- Communication difficulties
- Trafficked/Exploited

Community factors:

- Cultural, ethnic, religious or faith-based norms in the family or community, which may not meet the standards of child welfare or protection required in this jurisdiction.
- Cultural specific practices, including: female genital mutilation, forced marriage, honour-based violence and radicalisation.

Environmental factors:

- Housing issues
- Children who are out of home and not living with their parents whether temporarily or permanently
- Poverty
- Bullying
- Internet and social media related concerns

Recording procedures

Staff should record the following information in relation to children, young people or vulnerable adults:

- Concerns;
- Worrying observations;
- Behavioural changes;
- Actions and outcomes.

Dealing with a disclosure:

- Stay calm and listen to allow him or her enough time to say what s/he needs to say;
- Don't use leading questions or prompt details;
- Be re-assuring but do not promise to keep anything secret;
- Don't make the child, young person or vulnerable adult repeat the details unnecessarily;
- Explain to the child, young person or vulnerable adult what will happen next (explanation should be appropriate to the individual).
- Should the disclosure be a retrospective allegation, this information should be reported to Tusla as the alleged may still pose a current risk.

Reporting procedures:

- The reporting procedure should be known and accessible to all staff;
- Actions and outcomes should be noted;
- The person who expresses the concern should be involved and kept informed;
- Record all details, including the date, time and people involved in an incident book.
- Information recorded should be factual. Any opinions should be supported by facts;
- Inform the Designated Person or his or her deputy, if unavailable;
- The most appropriate person should discuss the concern or consult with primary carers. Parents, carers or responsible adults should be made aware of a report to the Health Service Executive unless it is likely to put

- the child, young person or vulnerable adult at further risk;
- The designated person may contact the Health Service Executive Duty Social Work Department for an informal consultation prior to making a report;
- Information will be shared on a strictly 'need to know' basis.
- If there are reasonable grounds for concern as outlined above, the designated person will contact the Duty Social Worker in the Health Service Executive area using the standard reporting form available from the Health Service Executive.
- Reports to the Duty Social Worker can be made verbally initially and then followed by the standard reporting form.
- Reports should be made to the Health Service Executive without delay;
- If neither of The Model's appointed designated persons are available, then contact the local Duty Social Worker of the Health Service Executive directly;
- In case of emergencies outside of Health Service Executive Social Work Department hours, contact the Gardaí. In situations that threaten the immediate safety of a child, young person or vulnerable adult, it may be necessary to contact the Gardaí.
- All information gathered from a disclosure will be stored securely in passworded digital files. Hard copies will be kept in locked drawer.

Confidentiality statement

We in The Model are committed to ensuring people's rights to confidentiality. However, in relation to the welfare and protection of children, young people and vulnerable adults we undertake that:

- Information will only be forwarded on a 'need to know' basis in order to safeguard the child/young person or vulnerable adult;
- Giving such information to others for the protection of a child, young person or vulnerable adult is not a breach of confidentiality;
- We cannot guarantee total confidentiality where the best interests of the child, young person or vulnerable adult is at risk;
- Primary carers, children, young people and vulnerable people have a right to know if personal information is being shared and/or a report is being made to the Health Service Executive, unless doing so could put the child/person or vulnerable at further risk;
- Images of a child, young person or vulnerable adult will not be used for any reason without the consent of the parent/carer (however, we cannot guarantee that cameras/videos will not be used at public performances/events);
- Procedures will also be put in place for the recording and storing of information in line with our confidentiality policy.

Recruiting and selecting staff

We will ensure that staff are carefully selected, trained and supervised to provide a safe environment for all children, young people and vulnerable adults, by observing the following principles:

- Staff and artists working with children, young people and vulnerable adults on an ongoing basis will be vetted.
- Roles and responsibilities will be clearly defined for every job (paid or voluntary);
- We will endeavour to select the most suitable person for the project;
- Candidates will be asked to sign a declaration form;
- Two written references that are recent, relevant, independent and verbally confirmed will be necessary;
- All those working with children will be asked to complete the Tusla eLearning programme.

No person who would be deemed to constitute a 'risk' will be employed; some of the exclusions would include:

- any abuse-related convictions;
- refusal to sign application form and declaration form;
- insufficient documentary evidence of identification;
- concealing information on one's suitability to working with children; young people or vulnerable adults;
- All staff will be required to consent to Garda clearance, and where available, this will be sought.
- There will be a relevant six month probationary period, except in the case of casual staff.

Staff management

To protect both staff (paid and voluntary), children, young people and vulnerable adults, we undertake that:

New staff will:

- Take part in a mandatory induction training session;
- Be made aware of the organisation's code of conduct and protection procedures in relation to children, young people and vulnerable adults;
- Undergo a probationary or trial period.

All staff will:

- Receive an adequate level of supervision and review of their work practices;
- Be expected to have read and signed the Policy Statement for the protection of children, young people and vulnerable adults; and will be provided with appropriate policy training.

Involvement of primary carers/teachers

We are committed to being open with all primary carers and teachers.

We undertake to:

- Advise primary carers and teachers of our protection policy;
- Inform primary carers and schools of all activities and potential activities in relation to the project the group/ school is involved in;
- Issue contact/consent forms where relevant;
- Comply with health and safety practices;
- Operate people-centred policies in accordance with best practice;
- Adhere to our recruitment guidelines;
- Ensure that the activities are appropriate, in terms of age and ability;
- Encourage and facilitate the involvement of parent(s), carer(s) or responsible adult(s), where appropriate.
- Provide meaningful communication with children and families and share information about activities provided, how The Model will engage with groups and gain feedback to plan for future activities.

If we have concerns about the welfare of the child/young person or vulnerable adult, we will:

- Inform the primary carers or teachers unless this action puts the child, young person or vulnerable adult at further risk;
- In the event of a complaint against a member of staff, we will immediately ensure the safety of the child/young person or vulnerable adult and inform carers as appropriate.

As a people-centred organisation, we are committed to putting the interest of the child, young person or vulnerable adult first. To that end we will:

- Contact local Health Service Executive and Gardaí where there is a protection or welfare concern in relation to a child, young person or vulnerable adult;
- Encourage carers to work in partnership with us under the guidelines set out by our organisation to ensure the safety of children, young people or vulnerable adults;
- Have a designated contact person available for consultation with carers in the case of any concern over the welfare of a child, young person or vulnerable adult.

Communicating with children on their rights and safety.

- Have a designated staff member available for consultation with children on their right to take part in the activities, seek their permission, alongside their parent/guardian to take photographic images, ensure they understand group participation and best behavior and make them aware who they can report concerns to, should they have any.

Dealing with allegations against staff

The Model will ensure that no child, young person or vulnerable adult is exposed to unnecessary risk.

Two separate procedures must be followed:

1. In respect of the child/young person or vulnerable adult designated liaison person no. 1 will deal with issues related to the child/young person or vulnerable adult. In her absence, the issues will be dealt with by designated liaison person no. 2.
2. In respect of the staff member/facilitator against whom the allegation is made, The Model will address this in accordance with our Staff Policies and Procedures and the person will be informed as soon as possible of the allegation.
4. If allegations are made against the Designated Liaison Person 1, then the Designated Liaison Person 2 should be contacted.
7. The staff member should be given the opportunity to respond.
8. The Director should be informed as soon as possible.
9. Any action following an allegation of abuse against a member of staff should be taken in consultation with Health Service Executive and Gardaí.
10. After consultation, the Director/or Chair of the Board should advise the person accused and agreed procedures will be followed.

Complaints

In the event of a complaint,

- It will be responded to within one to two weeks;
- In the case of an allegation, the designated liaison person has responsibility for directing complaints or comments to the appropriate person.

Accidents procedure:

- The organisation must maintain an up-to-date register of the contact details of all children/young people or vulnerable adults involved in the organisation;
- External organisations with whom your organisation has dealings must provide proof that they have public liability insurance, in situations where The Model's public liability insurance is not applicable, i.e. overnight trips with schools and community organisations.
- A first-aid box is located at reception. Please ask teacher or parent/carer to apply first aid to child, young person or vulnerable adult. If an allergy occurs The Model is not responsible.
- Availability of first-aid should be in accordance with the organisation's Health and Safety guidelines. The location of accident/incident book for participants on programmes at The Model is at front of house.
- Record details of broken equipment in education room and report to front

- of house immediately.
- In the case of an accident or incident, an accident report form must be completed, signed and dated by the staff member on duty. These forms are located in the Health & Safety folder at Front of House.

Definitions of abuse:

There are four main categories of abuse as outlined in Children First: National Guidelines for the Protection and Welfare of Children. The following is a synopsis of the information contained in the document. For the full definitions please refer to Children First: National Guidelines for the Protection and Welfare of Children 1993 (pp.32-34).

1. Neglect

“Neglect can be defined as being where the child suffers significant harm or impairment of development by being deprived of food, clothing, warmth, hygiene, intellectual stimulation, supervision and safety, attachment to and affection from adults, medical care. The threshold of significant harm is reached when the child’s needs are neglected to the extent that his or her well-being and/or development are severely affected.” (Children First p.31)

2. Emotional abuse

Emotional abuse usually happens where there is a relationship between a carer and a child rather than as a specific incident or incidents:

“Unless other forms of abuse are present, it is rarely manifested in terms of physical signs or symptoms.” (Children First p.31)

Rather, it can manifest in the child’s behaviour or physical functioning. Examples of these include ‘anxious’ attachment, unhappiness, low self-esteem, educational and developmental under-achievement and uncooperative or hostile behaviour.

“The threshold of significant harm is reached when interaction is predominantly abusive and become typical of the relationship between the child and the parent/carers.” (Children First p.32)

Examples of emotional abuse in children include:

- Imposition of negative attributes on children, expressed by persistent criticism, sarcasm, hostility or blaming;
- Emotional unavailability by the child’s parent/carers;
- Unresponsiveness, inconsistent or inappropriate expectations of the child;
- Premature imposition of responsibility on the child.
- Unrealistic or inappropriate expectations of the child’s capacity to understand something or to behave and control him/herself in a certain way;
- Under or over-protection of the child.
- Use of unreasonably harsh discipline;
- Exposure to domestic violence.

3. Physical abuse

Physical abuse is any form of non-accidental injury or injury which results from willful or neglectful failure to protect a child. Examples of physical injury include the following:

- Shaking;
- Use of excessive force in handling;
- Deliberate poisoning.
- Suffocation;
- Allowing or creating a substantial risk of significant physical harm to a child.

4. Sexual abuse

Sexual abuse involves the use of a child for gratification or sexual arousal by a person for themselves or others.

Examples of sexual abuse include:

- Exposure of the sexual organs or any sexual act intentionally performed in the presence of a child;
- Intentional touching or molesting of the body of a child whether by a person or object for the purpose of sexual arousal or gratification;
- Masturbation in the presence of the child or involvement of the child in an act of masturbation;
- Sexual intercourse with a child whether oral, vaginal or anal;
- Sexual exploitation of a child... may also include showing sexually explicit material to children, which is often a feature of the 'grooming' process by perpetrators of abuse;
- Consensual sexual activity involving an adult and an under-age person.

Relevant Legislation

There are a number of key pieces of legislation that relate to child welfare and protection that can be consulted.

- [Child Care Act 1991](#)
- [Protections for Persons Reporting Child Abuse Act 1998](#)
- [Criminal Justice Act 2006](#)
- [Criminal Justice \(Withholding of Information on Offences Against Children and Vulnerable Persons\) Act 2012](#)
- [Children First Act 2015](#)
- [Criminal Law \(Sexual Offences\) Act 2017](#)

The Model Accident/Incident Report Form

Project	
Name of participant	

Date and time of incident/accident	
Location	
Accident/Incident description	
State what exactly you saw happen	
Did the injured person say what caused the accident/incident?	
What happened after the accident/incident?	

Signature of Staff Member_____

Date_____

Contact No._____

Permission for Outings:

I/we give my/our permission for _____(name of participant)
to partake in the following excursion outside The Model:

Signed_____
(parent/ carer or teacher)

Date_____

Permission to be photographed or video recorded by The Model:

I/we give permission for _____(name of participant)
to be photographed or filmed, under the supervision of The Model learning team:

Signed_____ (parent/ carer or teacher)

Date_____

Accident and/or Emergency Consent Form:

I/we give permission for staff at The Model to act on my behalf in case of
emergency or accident and to take such action as may be necessary for the
benefit of the child, young person or vulnerable adult. The decision is to be taken
by the person in charge at time of the emergency.

Signed_____ (primary carer/ carer or teacher)

Date_____

Record details

Participant	Primary Carer/ Carer or Teacher
Full Name	
Date of Birth	

Address	
Contact No.	
Start date of project.	
Name of designated person to collect participant.	
Contact No./ Mobile	
Does participant suffer from any medical conditions or allergies that we should know about?	
If so, please outline specific details and special requirements, if any	
Does participant suffer from any hearing and/or speech difficulties? Please give details	
Additional Information that might help us get to know participant better	