

Coombe Women & Infants University Hospital Child Safeguarding Statement

The Coombe Women & Infants University Hospital (CWIUH) was established in 1826 and is approaching nearly 200 years of caring for women and newborn babies. The hospital is now one of the largest providers of women and infant health care in the Republic of Ireland. We care for up to 10,000 pregnant women every year. In addition over 1,000 infants are admitted to the Neonatal Centre and over 8,000 gynaecological operations are performed. The hospital provides comprehensive care for women and infants at local, regional and national levels.

The CWIUH is a voluntary, non-denominational institution. It is governed by a Board of Guardians and Directors who appoint a Master as Chief Executive for a period of 7 years. The Master is also a Consultant Obstetrician/Gynaecologist in the hospital.

The Mission Statement of the hospital is *“Excellence in the Care of Women and Babies”*

Nature of the Services and Principles to Safeguard Children from Harm

The hospital operates a modern Multi-disciplinary Management Divisional System. There are seven major management divisions: Obstetrics, Gynaecology, Paediatrics and Newborn Medicine, Peri-operative Medicine (Anaesthesia), Laboratory Medicine, Allied Health Professionals and General Administration. These divisions report to the Master, who is directly responsible to the Hospital Board.

The CWIUH has 204 beds (maternity and gynaecology) and 40 cots in the Neonatal Centre.

The CWIUH is situated on Dolphin's Barn Street, Dublin 8. Hospital staff including Obstetricians & Gynaecologists, Midwives and Administrative staff also run satellite antenatal clinics in the Dublin, Kildare and Meath areas. These include;

- Tallaght Hospital
- The Russell Building Health Centre, Tallaght
- Rosse Court Health Centre, Lucan
- Deansrath Health Centre, Clondalkin
- Neilstown Health Centre, Clondalkin
- Naas General Hospital, County Kildare
- Trim Primary Care Centre, Co. Meath

Antenatal education is provided to patients at;

- Naas General Hospital, County Kildare
- Cherry Orchard Hospital, Dublin 10
- Russell Building Health Centre, Tallaght
- The Wisdom Centre, Dublin 8

There is an Early Transfer Home Service (ETHS) which as well as providing a midwifery service at antenatal clinics both in the CWIUH and in the outlying clinics, provides a postnatal midwifery service to mothers and babies discharged under the ETHS. This involves a mother and baby being visited in their home by a midwife between discharge from the hospital and the transfer of mother and baby to the care of the Public Health Nursing Service of the HSE - approximately Day 5 postnatally.

There is also a Domino Service which provides antenatal care in the community to normal risk women, care in the delivery suite by the same group of midwives, with discharge home on the day after delivery and care at home until Day 5 postnatally.

The Board of Guardians and Directors and the Staff of the hospital are committed to the principle that the safety and best interests of children directly availing of our services are paramount. These children include:

- Babies born in the CWIUH or transferred to the hospital having been born in another maternity unit/hospital.
- Maternity patients who are less than 18 years
- Gynaecology patients who are less than 18 years

This principle also applies to children who are indirectly involved with the hospital. These children include:

- Siblings (aged less than 18 years) of patients of the hospital
- Visitors (aged less than 18 years) to the hospital whether visiting an inpatient or accompanying a patient attending an outpatient appointment.
- Students (aged less than 18 years) on placement.

The principle that the safety and best interests of children are paramount is underpinned by a number of pieces of legislation and by the guidance documents of the Department of Children and Youth Affairs and TUSLA, The Child and Family Agency. These include the:

- Children First Act 2015
- National Vetting Bureau Act 2012
- Child Care Act 1991
- Protection for Persons Reporting Child Abuse Act 1998

Child Protection and Welfare issues are not static. New issues arise periodically which require procedures to be put in place. In the CWIUH we are committed to the reviewing of our child safeguarding procedures every 2 years or sooner if this should prove necessary due to changes in legislation, changes in the guidance issued by the HSE or TUSLA, or identification of new areas of concern.

Risk Assessment

The Children First Act 2015 defines harm in relation to a child as; *“Assault, ill treatment or neglect of the child in a manner that seriously affects or is likely to seriously affect the child’s health, development or welfare, or sexual abuse of the child.”*

Risk identified	Procedure in place to manage the identified risk
Risk of harm to a child from a staff member, student, researchers, contractors or those employed by others and working on this site	<ul style="list-style-type: none">• Safe recruitment procedures and protocols• Garda Vetting Policy• Trust in Care Policy• Corporate Induction• Clinical Induction• Health Care Records Policy• Data Protection Policy• Complaints Policy• Disciplinary Policy• HSE National Consent Policy• Completion of Children First E-Learning Module• The layout of the Neonatal Units enables observation of babies at all times• Babies on the postnatal ward are in the full-time care of their mother

<p>Risk of harm to a child from a patient, visitor, member of the public, whether these are adults or children</p>	<ul style="list-style-type: none"> • Baby Tagging System • Visiting Policy • Security Policy • Signage re zero tolerance of violence (verbal or physical) • Signage re children requiring supervision • The layout of the Neonatal Units enables observation of the babies at all times • Babies on the postnatal ward are in the full-time care of their mother • Underage inpatients are cared for in an open ward setting with a designated midwife assigned to the room • Confidential Patient system • Focus on anticipation and prevention of risk situations – Multi-disciplinary team agree an individual plan for any patient identifying a particular risk or identified as being a risk.
<p>The risk of harm or concern not being recognised or reported</p>	<ul style="list-style-type: none"> • All new staff receive information on the E-Learning Children First module on HSELAND in their pre-employment package • Clinical Induction/Corporate Induction – Principal Medical Social Worker or Senior Medical Social Worker present to new staff and include information on child protection and welfare issues and the Children First Act 2015 • Hospital Broadcasts from the Master regarding the Children First Act 2015, the E-Learning Module and the document <i>“Children First: National Guidance of the Protection and Welfare of Children”</i>

- Hospital wide Children First briefing sessions
- Children First banners/posters on display
- Children First and Child Protection and Welfare issues raised regularly at meetings within the hospital e.g. the obstetric division/ weekly multi-disciplinary perinatal review/ weekly multi-disciplinary clinical handover meetings
- Forms for reporting Child Protection and Welfare Concerns available on the hospital intranet
- Pathway for an identified Child Protection and Welfare Concern available on the hospital intranet
- Custom and practice for all patients to complete their booking history for antenatal care alone with a midwife, other than a professional interpreter if required
- Custom and practice for all patients less than 18 years attending for obstetric care to be referred to the Medical Social Work Department
 - Custom and practice for a Medical Social Worker to meet with patient under 18 years alone and then to meet with a guardian of the patient
 - Medical Social Work Department formally notified on a monthly basis of all patients who book for obstetric care under 18 years
- Screening question for domestic/sexual/gender based violence asked at booking history of antenatal care
 - Custom and practice for patients who answer yes to the screening question to be referred to the Medical Social Work Department

	<ul style="list-style-type: none"> ○ Medical Social Work Department formally notified on a monthly basis of all patients who answer yes to the screening question
<p>Risk of non-compliance with Children First Legislation and Guidance</p>	<ul style="list-style-type: none"> ● Coombe Women and Infants University Hospital (CWIUH) Children First Implementation Committee in place ● Dublin Midland Hospital Group Children First Steering Committee in place. The CWIUH is represented on this group by the Principal Medical Social Worker ● The Children First Act 2015 and its implications are recognised by the CWIUH Senior Management Team as a priority Issue for the Hospital ● The E-Learning Children First module is mandatory for all staff ● Briefings for staff on the Children First Act 2015 have taken place in the hospital and will continue to do so ● Ongoing support from the HSE Children First National Office ● Extra resources to enable ongoing compliance with the Children First Act 2015 to be pursued

Procedures

The Coombe Women & Infants University Hospital (CWIUH) Child Safeguarding Statement has been developed in line with the requirement under Children First Act 2015. In addition to the procedures listed in the CWIUH Risk Assessment the following procedures support our intention to safeguard children availing of our services;

- The development of a hospital specific Child Protection and Welfare Policy to include;
 - A procedure for the recognition and management of allegations of abuse or misconduct by staff members, contractors or students in relation to a child availing of the services of the CWIUH.
 - A procedure for ongoing Child Protection and Welfare training of staff
 - A procedure for the recording and reporting of Child Protection and Welfare Concerns to TUSLA.
 - A procedure for maintaining a list of mandated persons within the CWIUH
 - A procedure for the appointing of a Relevant Person

Implementation

We recognise that implementation is an ongoing process. The CWIUH is committed to the implementation of the Child Safeguarding Statement and the procedures that support our intention to keep children safe from harm while availing of our services. The Child Safeguarding Statement will be reviewed on a two yearly basis or as soon as is practicable after there has been a material change in any matter to which the statement refers.



Signed:

Dr. Sharon Sheehan

Master/CEO

Date: 08th March 2018

For Queries please contact Ms. Rosemary Grant, Principal Medical Social Worker, Relevant Person under the Children First Act 2015 at rgrant@coombe.ie or 01 4085617 (confidential voicemail).