



Love and Care for People

Youth work policies and procedures

A controlled manual covering safeguarding, safe delivery, inclusion, data protection, people and governance. Use with the accompanying Forms and implementation workbook.

Board approval date recorded 14.12.2025

Current reference review 11.10.2026

Person in charge Iniobong Usanga

Deputy Ado Mazombe

CHY 20204558

58 Main Street, Mallow, Co. Cork, P51V50F

Tel +3532250375

WhatsApp and Telegram 0873873256 or 0877106715

Email info@loveandcareforpeople.eu

www.loveandcareforpeople.eu

Version 2026.1 | Republic of Ireland youth work

Document control and implementation

We use this manual to give workers clear duties and consistent procedures for delivering safe youth work. It applies to LCP activities in the Republic of Ireland. The separate forms workbook contains editable internal templates F01 to F32 and links to official reporting forms. The templates are designed for completion in Word or on paper; internal records do not replace submissions to public authorities.

Control	Record
Organisation	Love and Care for People
Policies covered	P01 to P19
Original board approval date	14.12.2025 as supplied by the organisation
Reference review	11.10.2026
Current edition	2026.1
Policy owner	Iniobong Usanga
Deputy	Ado Mazombe
Next routine review	By 14.12.2026 and sooner on material change
Current revision ratification	Actual date and minute reference to be entered in F32

The original approval date remains on every policy. References and revised wording in this edition reflect the current review date; the approval date does not certify that this later wording was before the board in December 2025. Record ratification of material revisions on its actual date, retain the earlier approved version and never backdate signatures or completed assessments.

Actions before operational use

- Complete the actual service and venue schedule, safeguarding harm assessment F01, Safety Statement assessments F12 and emergency plan F15. These cannot be replaced by an untested generic risk list.
- Record role acceptance, training, mandated status, direct duty contacts and an unconflicted trustee contact in F02. Do not leave a reporting route dependent on the availability of one person.
- Confirm the charity identifier type, insurance scope, bank and purchasing authorities, secure storage and record retention decisions in F17, F28 and F32.
- Arrange staff and volunteer induction, accessible youth and parent information, publication of the signed CSS and documented board oversight.

Unless legislation or a contract sets a different rule, times stated as LCP targets or defaults are internal operating standards. Working days mean Monday to Friday excluding Irish public holidays. Urgent safeguarding, emergency and statutory reporting deadlines take priority. The board provides an unconflicted decision maker or external reviewer where a small team cannot separate roles.

Policy and form index

Policy	Subject	Related forms
P01	Child Safeguarding Statement and risk assessment	F01, F02, F32
P02	Child protection and reporting	F02, F03, F32
P03	Safe recruitment and Garda vetting	F04, F05, F30
P04	Allegations against workers and volunteers	F03, F06, F29
P05	Safeguarding training supervision and support	F05, F07, F08, F32
P06	Code of behaviour and professional boundaries	F09, F10, F03
P07	Anti bullying and peer safety	F11, F21, F18
P08	Online safety social media photography and AI	F13, F14, F03, F17
P09	Health and safety and Safety Statement	F12, F15, F16, F32
P10	Equality diversity accessibility and inclusion	F18, F19, F21
P11	Data protection confidentiality and records	F17, F20, F14
P12	Complaints feedback and appeals	F21, F02, F32
P13	Participation consent registration and attendance	F22, F23, F24, F19
P14	Trips transport and residential activities	F23, F12, F25, F30, F16
P15	Behaviour support and proportionate restrictions	F26, F16, F18, F21
P16	Drugs alcohol smoking and vaping	F16, F26, F27
P17	Medical needs medication and emergency wellbeing	F25, F27, F16
P18	Staff volunteer management dignity and protected disclosures	F05, F08, F09, F29, F02
P19	Governance finance conflicts of interest and accountability	F28, F30, F31, F32

How to use references

Each policy links its applicable Irish and EU sources. The reference register identifies whether a source is binding law, national policy, EU policy, regulator guidance or sector practice. A strategy or recommendation does not by itself impose the same duties as an Act or directly applicable regulation. Use legislation as amended and commenced, not an enacted text in isolation. The board checks live official pages during reviews, particularly commencement orders, reporting routes, platform rules and new programmes.

Responsibilities and urgent action

Role	Accountability
Board	Purpose, resources, legal compliance, independent escalation and ratification.
Iniobong Usanga	Overall lead; nominated DLP and Relevant Person; nominated data contact; implementation and reporting coordination.
Ado Mazombe	Deputy lead and deputy DLP; cover and escalation where the lead is unavailable or implicated.
Mandated person	Personal statutory reporting and assistance obligations based on actual Schedule 2 status.
Session or activity lead	Safe supervision, attendance, briefing, local emergency action and incident records.
Every worker and volunteer	Follow policy, protect participants and report concerns without delay.

Emergency: call 112 or 999 for immediate serious danger or urgent medical need. Concern about a child: contact the DLP or deputy without delay and use P02. A person may report directly to Tusla. A mandated person cannot transfer their statutory duty to a manager. Concern about the lead or deputy: use the alternate route and unconflicted trustee in F02. Concerns about both: contact Tusla or Gardaí directly as appropriate and the independent board route.

R05 [Tusla contact a social worker](#)

R06 [Tusla secure reporting portal](#)

R03 [Tusla safeguarding publications and official forms](#)

R35 [HSE urgent mental health support](#)

Organisation channels

[Website](#)

[Facebook](#)

[YouTube](#)

[Twitter and X](#)

[Instagram](#)

[Blog](#)

Public social channels are for information and authorised engagement. Confidential child protection or medical reports must use secure authorised routes. General contact numbers are not described as a 24 hour emergency service.



**LOVE AND CARE
FOR PEOPLE**

YOUTH WORK / POLICY COLLECTION

01

Child Safeguarding Statement and risk assessment

IN THIS POLICY

Nature of service and scope

Principles

Written assessment of risk of harm

BOARD APPROVAL 14.12.2025

Reference review 11.10.2026 | Edition 2026.1

Person in charge: Iniobong Usanga

Deputy: Ado Mazombe

58 Main Street, Mallow, Co. Cork, P51V50F

CHY: 20204558 | Tel: +3532250375

WhatsApp / Telegram: 0873873256 or 0877106715

info@loveandcareforpeople.eu

www.loveandcareforpeople.eu

P01 Child Safeguarding Statement and risk assessment

Board approval 14.12.2025 | Reference review 11.10.2026

Owner Iniobong Usanga | Deputy Ado Mazombe | Version 2026.1

Love and Care for People places the welfare and best interests of children at the centre of its youth work. We will take reasonable and practicable steps to keep children safe from harm while using our services, including online activities.

Nature of service and scope

This statement applies to LCP youth work in the Republic of Ireland, delivered by employees, volunteers, trustees, students, contractors and partner providers acting for LCP. It covers group sessions, individual support, outreach, digital engagement, trips and residential activities where offered. The live service schedule in F01 records the actual programmes, locations, age ranges and delivery arrangements. We protect every participant under 18 through these procedures. Adults aged 18 and over retain their own decision making rights; any adult safeguarding concern requires an appropriate adult pathway alongside action to protect children.

Principles

Young people must be treated with dignity, listened to and supported to participate voluntarily. We prohibit abuse, exploitation, discrimination, corporal punishment and degrading treatment. Safeguarding concerns take priority over organisational reputation. Young people receive an accessible explanation of who can help, how to complain and when information must be shared.

Written assessment of risk of harm

F01 is the written assessment of harm within the meaning of Children First: assault, ill treatment, neglect or sexual abuse, including acts or omissions seriously affecting or likely seriously to affect a child, and sexual abuse. It is distinct from the general accident risk assessment in F12. Assess possible harm by adults and peers, online and offline, in each actual service and venue. Record controls, responsible people, gaps, action deadlines and residual risk. Stop or change any service where effective controls cannot be provided. The accompanying risk schedule must be completed and attached to the displayed statement.

Required safeguarding procedures

Managing identified risks: P01, P06 to P09, P14 and P15. Responding to allegations against workers or volunteers: P04. Safe recruitment and selection: P03. Safeguarding information and training, including recognising harm: P05. Reporting child protection and welfare concerns to Tusla: P02. Maintaining a current list of mandated persons: P02 and F02. Appointing a relevant person: this statement and F02. These are supporting procedures under section 11 of the Children First Act 2015 and must be accessible to everyone delivering the service.

Relevant person and reporting contacts

Iniobong Usanga is the person in charge and the nominated Relevant Person for this Child Safeguarding Statement, with Ado Mazombe as deputy. Iniobong Usanga is also the nominated Designated Liaison Person, with Ado Mazombe as deputy DLP. F02 records role acceptance, training,

direct contact arrangements and board oversight. Contact through 58 Main Street, Mallow, Co. Cork, P51V50F; +3532250375; info@loveandcareforpeople.eu. General mobile contacts are 0873873256 and 0877106715. The duty arrangement must identify which contact reaches the available lead; neither mobile is assigned to a named individual in this statement. For immediate danger call 112 or 999. Staff can report directly to Tusla or Gardaí without waiting for a manager.

Implementation publication and review

Iniobong Usanga keeps the signed statement and risk schedule available, gives them to staff and volunteers and arranges display at service locations. Parents, guardians, Tusla and the public can request a copy. Publish a public copy without confidential child or staff case details. Review annually under LCP policy, sooner after material changes, and in any event within the statutory maximum interval of 24 months. Record the actual review date in F32; the next routine review is due by 14.12.2026 under the original annual cycle. The board supplies resources and monitors outstanding actions.

Signature and approval record

Board approval date recorded: 14.12.2025. Current reference review: 11.10.2026. Provider representative name and capacity: _____. Signature: _____.
Actual signing date: _____. Current revision ratification minute and date: _____. Attach F01 and the completed role record F02 before display.

Forms and linked references

Use F01, F02, F32 in the Forms and implementation workbook. All forms carry the same policy ownership and control dates. Review annually and after material changes, using F32.

R01 [Children First Act 2015](#)

R02 [Children First guidance legislation and addenda](#)

R03 [Tusla safeguarding publications and official forms](#)

R32 [EU Strategy on the Rights of the Child](#)

R33 [EU Recommendation on integrated child protection systems](#)

R40 [Adult retrospective disclosures addendum April 2025](#)



**LOVE AND CARE
FOR PEOPLE**

YOUTH WORK / POLICY COLLECTION

02

Child protection and reporting

IN THIS POLICY

Recognising and receiving a concern

Immediate safety and internal routing

External reporting

BOARD APPROVAL 14.12.2025

Reference review 11.10.2026 | Edition 2026.1

Person in charge: Iniobong Usanga

Deputy: Ado Mazombe

58 Main Street, Mallow, Co. Cork, P51V50F

CHY: 20204558 | Tel: +3532250375

WhatsApp / Telegram: 0873873256 or 0877106715

info@loveandcareforpeople.eu

www.loveandcareforpeople.eu

P02 Child protection and reporting

Board approval 14.12.2025 | Reference review 11.10.2026

Owner Iniobong Usanga | Deputy Ado Mazombe | Version 2026.1

Every worker and volunteer must act promptly on a concern about a child. A referral to a manager is an internal step and must never prevent a direct report or delay a mandated report.

Recognising and receiving a concern

Concerns may involve neglect, emotional abuse, physical abuse, sexual abuse, grooming, exploitation or harm by peers. Record observed facts and the source of information. Listen calmly to a disclosure, let the child use their own words, ask only questions needed to clarify immediate safety, and do not investigate or confront the alleged person. Explain that information will be shared with people who can help. Never promise secrecy. Make a dated record promptly using F03, including the child's words, actions taken and people notified.

Immediate safety and internal routing

Call 112 or 999 where there is immediate and serious danger, injury or urgent medical need. Notify Iniobong Usanga as DLP without delay, or Ado Mazombe when the DLP is absent or implicated. If both are unavailable or implicated, contact Tusla directly and notify an unconflicted trustee. Keep the child supported and avoid repeated questioning. Report a concern about a worker under P04 as well as this procedure.

External reporting

Where there are reasonable grounds for a child protection or welfare concern, report to Tusla promptly. Proof is not required. Use the duty social work team for the area where the child lives, through the live Tusla directory R05. Use the secure portal R06 or the official Child Protection and Welfare Report Form available at R03. Urgent telephone contact must be followed by the required written report. Do not use ordinary email to send report forms to Tusla. Keep submission evidence and follow up unacknowledged reports. If Tusla cannot be reached during an emergency, contact Gardaí. Consider separate obligations under the Withholding of Information Act; reporting to Tusla alone does not discharge every Garda reporting duty.

Mandated persons and thresholds

The lead maintains F02 against Schedule 2 of the Act, including the care or management of a youth work service and qualifying employed youth workers. Check each person's actual role and legal category; DLP status alone does not establish or remove mandated status. A mandated person who receives relevant information in their professional role must personally ensure a report is made as soon as practicable where the statutory harm threshold is met. They may report jointly with the DLP. Below that threshold, report reasonable welfare or protection concerns under the Guidance. Mandated persons also provide mandated assistance when lawfully requested by Tusla. In an urgent case, follow the Act's emergency reporting provision and submit the mandated report within three days. Do not apply the narrow section 14 consensual adolescent sexual activity exception without checking every statutory condition and consulting Tusla where uncertain.

Informing families and differences of judgement

Normally tell parents or guardians about the report and reasons. Do not do so where it could put the child at additional risk, undermine Tusla's assessment, or place the reporter at risk; record the reason and consult Tusla. A person who disagrees with a DLP decision can report directly. If the DLP decides not to report, record reasons, communicate the decision to the person raising the concern and explain their right to report. Never treat that decision as overriding a mandated person's duty.

Adults disclosing childhood abuse

Apply the April 2025 addendum. Consider whether any person who is currently a child, identifiable or not, has been harmed or is at risk, including the alleged person's access to children. A mandated report is required when the applicable current child threshold is met. Adult retrospective disclosure alone, with no identified or suspected harm or risk to a current child, does not create that Children First mandated duty. Where unsure, discuss with Tusla. Explain confidentiality limits, offer support and consider separate legal duties. Use the official Retrospective Abuse Report Form where appropriate.

Records and follow up

Store F03 and official reports in restricted safeguarding files, separate from routine attendance and complaints records. Share only necessary information with authorised recipients, record the basis for sharing, and follow P11. Continue agreed support without conducting a parallel child abuse investigation. Review practice through anonymised learning; do not identify children in board minutes.

Forms and linked references

Use F02, F03, F32 in the Forms and implementation workbook. All forms carry the same policy ownership and control dates. Review annually and after material changes, using F32.

R01 [Children First Act 2015](#)

R04 [Tusla mandated reporting](#)

R05 [Tusla contact a social worker](#)

R06 [Tusla secure reporting portal](#)

R40 [Adult retrospective disclosures addendum April 2025](#)

R42 [Criminal Justice withholding information Act 2012](#)

R43 [Protection for Persons Reporting Child Abuse Act 1998](#)



**LOVE AND CARE
FOR PEOPLE**

YOUTH WORK / POLICY COLLECTION

03

Safe recruitment and Garda vetting

IN THIS POLICY

Recruitment planning

Selection and references

Vetting before relevant work

BOARD APPROVAL 14.12.2025

Reference review 11.10.2026 | Edition 2026.1

Person in charge: Iniobong Usanga

Deputy: Ado Mazombe

58 Main Street, Mallow, Co. Cork, P51V50F

CHY: 20204558 | Tel: +3532250375

WhatsApp / Telegram: 0873873256 or 0877106715

info@loveandcareforpeople.eu

www.loveandcareforpeople.eu

P03 Safe recruitment and Garda vetting

Board approval 14.12.2025 | Reference review 11.10.2026

Owner Iniobong Usanga | Deputy Ado Mazombe | Version 2026.1

We recruit adults who are suitable for the work and verify suitability before access to children. Garda vetting is one element of recruitment and does not replace references, supervision or safe practice.

Recruitment planning

Iniobong Usanga approves a written role description, safeguarding responsibilities, required competence, reporting line and objective selection criteria. Ado Mazombe provides a second check. Identify whether the role involves relevant work or activities under the National Vetting Bureau Acts. Use an application and declaration of relevant suitability, seek proportionate employment or volunteering history, and clarify unexplained gaps without discriminatory assumptions. Apply equivalent checks to trustees, students and contractors where their actual roles require them.

Selection and references

At least two suitably briefed selectors assess candidates against the same criteria and record reasons. Ask safeguarding scenario questions and discuss boundaries, equality and reporting. Verify identity and relevant qualifications. Obtain two references independently, ordinarily including a recent employer or supervisor where available; confirm authenticity and ask about suitability for the role. Where an alternative referee is needed, record why and what additional checks support the decision. Do not use friends or relatives as the sole evidence of suitability.

Vetting before relevant work

Use LCP's registered relevant organisation or an authorised umbrella arrangement to obtain the appropriate vetting disclosure. No person begins relevant work or activities until a disclosure has been received and an authorised suitability decision recorded. Supervision is not a workaround for a legal pre vetting duty. Do not assume a disclosure obtained for another organisation is transferable; use only a lawful verified arrangement. For applicants aged 16 or 17 follow National Vetting Bureau parental consent requirements. Young helpers must not carry adult supervision responsibilities.

Assessing disclosures fairly

Iniobong Usanga and an unconflicted authorised reviewer consider the nature and relevance of disclosed information, role risks, time elapsed, context and the applicant's explanation. Assess each case individually and record a proportionate decision. Avoid automatic exclusion unless legally required or an evidenced safeguarding reason makes the person unsuitable. Seek specialist advice for difficult cases. Notify the applicant of the decision and a review route to an unconflicted trustee; keep criminal record information highly restricted.

Appointment and ongoing suitability

Use F04 to confirm every recruitment step. Give a conditional offer until checks are complete. Issue written terms, the code of behaviour, privacy information and induction requirements. Confirm a supervision and probation or volunteer review plan. Review suitability whenever the role changes or a new concern arises. Maintain a re vetting schedule based on current legal, funder and umbrella

requirements; no universal statutory three year cycle is asserted in this policy. Require prompt notification of relevant new matters, while respecting lawful spent conviction rules.

Partner checks and records

Before assigning external staff, obtain written assurance of lawful vetting, safeguarding training, qualifications, insurance and responsibility for concerns. Record what was verified rather than accepting verbal assurance. Keep decision records in a restricted personnel file; minimise retained disclosure copies and use the lawful retention schedule in P11. The board receives completion statistics, not routine disclosure details.

Forms and linked references

Use F04, F05, F30 in the Forms and implementation workbook. All forms carry the same policy ownership and control dates. Review annually and after material changes, using F32.

R07 [National Vetting Bureau information](#)

R08 [National Vetting Bureau Acts and prior vetting duty](#)

R23 [IHREC employment equality guide](#)

R18 [General Data Protection Regulation](#)



**LOVE AND CARE
FOR PEOPLE**

YOUTH WORK / POLICY COLLECTION

04

Allegations against workers and volunteers

IN THIS POLICY

Receiving and routing allegations
Safety measures and external referrals
Coordination with statutory agencies

BOARD APPROVAL 14.12.2025

Reference review 11.10.2026 | Edition 2026.1

Person in charge: Iniobong Usanga

Deputy: Ado Mazombe

58 Main Street, Mallow, Co. Cork, P51V50F

CHY: 20204558 | Tel: +3532250375

WhatsApp / Telegram: 0873873256 or 0877106715

info@loveandcareforpeople.eu

www.loveandcareforpeople.eu

P04 Allegations against workers and volunteers

Board approval 14.12.2025 | Reference review 11.10.2026

Owner Iniobong Usanga | Deputy Ado Mazombe | Version 2026.1

We protect young people immediately and provide fair procedures to anyone against whom an allegation is made. Child protection reporting and employment or volunteer management are separate responsibilities.

Receiving and routing allegations

Record the allegation, source, date and exact words where possible in F03 and F06. Do not promise confidentiality or dismiss a concern because the person is trusted. Notify the DLP immediately. If the allegation concerns Iniobong Usanga, route it to Ado Mazombe and an unconflicted trustee. If it concerns Ado Mazombe, route it to Iniobong Usanga and an unconflicted trustee. If both are implicated, report directly to Tusla or Gardaí as appropriate and an unconflicted board member. The board must name a confidential independent recipient in F02.

Safety measures and external referrals

Apply P02 without waiting for an internal inquiry. Assess access to children, contact arrangements, evidence preservation and potential retaliation. A different unconflicted manager or trustee manages the personnel process. Use proportionate interim measures, such as reassignment, restricted contact or precautionary suspension. For employees, any suspension pending investigation is normally on full pay and is kept under review; take employment advice before deciding. Explain that an interim restriction is protective and is not a finding of guilt.

Coordination with statutory agencies

Consult Tusla or Gardaí about steps that could interfere with assessment or investigation before interviewing witnesses or approaching the alleged person. Preserve relevant messages and records lawfully. Do not seize private devices, search personal accounts or circulate allegations. Share factual information through secure authorised channels. Record agency advice, referral dates and review points in F06.

Fair personnel procedure

Give the person sufficient detail of the allegation and evidence to respond at the appropriate time, subject to lawful restrictions agreed with agencies. Use an impartial investigator and a separate decision maker where practicable. Allow an employee a colleague or trade union representative, and consider other representation where legally required by the circumstances. Provide accessible meetings and a reasonable opportunity to respond. Keep accurate notes and disclose relevant findings. Apply P18 disciplinary stages, a reasoned written outcome and an independent appeal. Volunteers receive equivalent fairness adapted to their role.

Support and communications

Arrange support for the young person and family, the reporting person and the person accused without creating a conflict of roles. Protect reporters from retaliation. Tell parents and participants only what they need for safety and support, consistent with statutory advice. An appointed

spokesperson handles external enquiries; no speculative public statements or names are published. Confidentiality is limited by protection, fair procedures and legal duties.

Closure and learning

A criminal decision or an unsubstantiated allegation does not automatically determine an employment or safeguarding suitability outcome. Record the evidence and standard used for each distinct decision. Review return to duties, restrictions, training or termination with appropriate advice. Keep safeguarding and personnel records separate with authorised links. The board reviews anonymised causes and completion of improvements without prejudging unresolved cases.

Forms and linked references

Use F03, F06, F29 in the Forms and implementation workbook. All forms carry the same policy ownership and control dates. Review annually and after material changes, using F32.

R01 [Children First Act 2015](#)

R04 [Tusla mandated reporting](#)

R24 [WRC grievance and disciplinary code](#)

R26 [Protected Disclosures Amendment Act 2022](#)

R18 [General Data Protection Regulation](#)

R33 [EU Recommendation on integrated child protection systems](#)



**LOVE AND CARE
FOR PEOPLE**

YOUTH WORK / POLICY COLLECTION

05

Safeguarding training supervision and support

IN THIS POLICY

Training responsibility

Induction and role specific learning

Needs analysis and refreshers

BOARD APPROVAL 14.12.2025

Reference review 11.10.2026 | Edition 2026.1

Person in charge: Iniobong Usanga

Deputy: Ado Mazombe

58 Main Street, Mallow, Co. Cork, P51V50F

CHY: 20204558 | Tel: +3532250375

WhatsApp / Telegram: 0873873256 or 0877106715

info@loveandcareforpeople.eu

www.loveandcareforpeople.eu

P05 Safeguarding training supervision and support

Board approval 14.12.2025 | Reference review 11.10.2026

Owner Iniobong Usanga | Deputy Ado Mazombe | Version 2026.1

Everyone working for LCP must understand their own safeguarding duties before taking responsibility for young people. Training is matched to the role and reinforced through supervision and practice.

Training responsibility

Iniobong Usanga maintains the training plan and register F07; Ado Mazombe checks overdue actions. The board budgets for training and monitors completion. The plan uses current Tusla information and training guidance, which replaces the older Appendix 9 training resource in the 2024 safeguarding guide. Training attendance does not itself establish competence.

Induction and role specific learning

Before direct work, explain P01 to P08, reporting routes, emergency action, confidentiality, boundaries, complaints, accessibility and safe use of the actual venue. Require the current Tusla Introduction to Children First eLearning, or verified suitable equivalent learning, with a check of understanding. Mandated persons complete learning on their statutory role. The DLP and deputy complete DLP learning and any relevant available workshop. Managers and trustees receive governance and safeguarding oversight instruction. Medical, trip, digital and specialist activity leads need additional competence before those duties.

Needs analysis and refreshers

At appointment and annually, assess contact with children, prior training, role risks, confidence and learning needs. Record planned courses, responsible provider, completion evidence and refresher due date. LCP sets an annual safeguarding briefing and a full refresher at least every three years as internal standards, with earlier learning after legal changes, incidents or gaps. These are organisational standards, not a claim of a universal statutory expiry. People with overdue essential training must not undertake duties for which they are unprepared.

Supervision and learning in practice

Agree a supervisor and meeting schedule at induction. For staff delivering youth work, hold documented supervision at least monthly and more often for new staff or complex cases; volunteers receive a check in each delivery cycle and a structured review at least quarterly. These are LCP service standards. Cover workload, boundaries, welfare concerns, inclusion, record quality and support. Use F08 without copying unnecessary child case details. Discuss uncertainty early and practise referral scenarios and emergency arrangements.

Support and escalation

Offer debriefing after difficult incidents, avoid repeated retelling of traumatic information, and refer for appropriate professional support where needed. A supervisor must act immediately on any concern raised, even if the meeting is scheduled for later. Staff can bypass a conflicted supervisor, contact the DLP or deputy, report directly to authorities and use protected disclosure routes. Supervision is not a confidential substitute for reporting.

Evaluation and records

Check competence through discussion, observed safe practice and completion of actions rather than certificates alone. Retain training evidence and role suitability records securely. Include contractors and partner assurances in F30. Report anonymised completion rates, gaps and remedial actions to the board each quarter. Review the programme when Tusla guidance or the service changes.

Forms and linked references

Use F05, F07, F08, F32 in the Forms and implementation workbook. All forms carry the same policy ownership and control dates. Review annually and after material changes, using F32.

R03 [Tusla safeguarding publications and official forms](#)

R41 [Tusla safeguarding information and training](#)

R12 [National Quality Standards Framework for Youth Work](#)

R31 [EU Youth Strategy 2019 to 2027](#)



**LOVE AND CARE
FOR PEOPLE**

YOUTH WORK / POLICY COLLECTION

06

Code of behaviour and professional boundaries

IN THIS POLICY

Expected conduct

Prohibited conduct

Physical contact and personal care

BOARD APPROVAL 14.12.2025

Reference review 11.10.2026 | Edition 2026.1

Person in charge: Iniobong Usanga

Deputy: Ado Mazombe

58 Main Street, Mallow, Co. Cork, P51V50F

CHY: 20204558 | Tel: +3532250375

WhatsApp / Telegram: 0873873256 or 0877106715

info@loveandcareforpeople.eu

www.loveandcareforpeople.eu

P06 Code of behaviour and professional boundaries

Board approval 14.12.2025 | Reference review 11.10.2026

Owner Iniobong Usanga | Deputy Ado Mazombe | Version 2026.1

Adults must build respectful professional relationships that support young people without creating dependency, secrecy or opportunities for abuse. This code applies during sessions, online, on trips and outside scheduled work where a relationship arose through LCP.

Expected conduct

Treat young people fairly, listen to them, explain decisions and use language suitable for age and understanding. Follow agreed activity plans, consent, supervision and accessibility arrangements. Keep your role clear and disclose a family, friendship or other relationship that could affect boundaries. Staff and volunteers sign F09 and managers model the same standards.

Prohibited conduct

Do not use corporal punishment, humiliation, threats, discriminatory language, sexual jokes directed at young people, or abusive behaviour. Do not engage in sexual or romantic contact, grooming, sexualised communication or exploitation with a child participating in LCP services. Do not create a sexual or romantic relationship with an adult participant while responsible for supporting them; disclose and manage any pre existing relationship through an unconflicted manager. Do not provide alcohol, drugs, vaping products, personal loans or secret gifts. Do not ask a child to keep contact or an incident secret.

Physical contact and personal care

Use contact only for a clear, appropriate purpose, considering the young person's wishes, dignity and communication needs. Ask permission when feasible, avoid unnecessary contact, and stop if it causes discomfort. First aid or urgent protection may require contact; explain and record it. Plan any personal care separately with the young person and appropriate carers, competent staff, privacy and safeguarding controls. Never improvise intimate care, punitive restraint or secluded treatment.

One to one and outreach work

Plan and approve individual work using F10. Record purpose, location, timing and how another authorised adult knows the arrangement. Use observable settings with privacy for conversation, maintain check in and check out arrangements, and let the young person know how to leave or complain. Do not meet alone in bedrooms, private homes or isolated locations without a documented service specific safeguarding plan. Home visits and lone work require P09 controls; no home based arrangement starts simply on personal initiative. Record any emergency departure from the plan and notify the lead promptly.

Communications transport and gifts

Use approved organisational accounts and agreed hours. Do not add participants to private social accounts or use disappearing messages for service contact. Avoid private transport of one child; where an emergency makes it unavoidable, prioritise safety, notify the lead and guardian where safe, record reasons and destination, and review. Any gift must be modest, transparent and authorised,

with no favouritism or obligation. Do not photograph or record a young person on a personal device without a specific authorised secure arrangement under P08.

Concern and breach response

Report boundary concerns promptly to the DLP or deputy, including behaviour by colleagues, peers or visiting adults. Immediate danger goes to emergency services. Managers record and review breaches under P04 or P18 as appropriate. A young person's apparent agreement does not make unsafe adult conduct acceptable. The board monitors patterns and safe practice through anonymised reports.

Forms and linked references

Use F09, F10, F03 in the Forms and implementation workbook. All forms carry the same policy ownership and control dates. Review annually and after material changes, using F32.

R01 [Children First Act 2015](#)

R03 [Tusla safeguarding publications and official forms](#)

R32 [EU Strategy on the Rights of the Child](#)

R34 [EU Charter of Fundamental Rights](#)



**LOVE AND CARE
FOR PEOPLE**

YOUTH WORK / POLICY COLLECTION

07

Anti bullying and peer safety

IN THIS POLICY

Scope and prevention

Receiving a report

Immediate response and fact finding

BOARD APPROVAL 14.12.2025

Reference review 11.10.2026 | Edition 2026.1

Person in charge: Iniobong Usanga

Deputy: Ado Mazombe

58 Main Street, Mallow, Co. Cork, P51V50F

CHY: 20204558 | Tel: +3532250375

WhatsApp / Telegram: 0873873256 or 0877106715

info@loveandcareforpeople.eu

www.loveandcareforpeople.eu

P07 Anti bullying and peer safety

Board approval 14.12.2025 | Reference review 11.10.2026

Owner Iniobong Usanga | Deputy Ado Mazombe | Version 2026.1

Young people have the right to take part without intimidation, harassment or bullying. We prevent bullying and respond to reports while supporting every young person involved.

Scope and prevention

This policy covers in person and online behaviour connected with LCP, including exclusion, threats, rumours, identity based abuse, sexual harassment and coercion. Bullying often involves repetition and an imbalance of power; a single serious harmful incident still requires action. Peer sexual abuse, exploitation and serious violence must be routed to P02 rather than treated only as conflict. At the start of each programme, agree accessible group rules with participants, explain how to seek help, and identify predictable risks in activities, changing spaces and digital groups.

Receiving a report

A young person, parent, witness or worker may speak to any trusted adult or use F11. Listen without blaming, thank them for raising it and record the facts. Do not require a written form before helping. Ask what will help the young person feel safe and what they want to happen. Keep information on a need to know basis, explain confidentiality limits, and protect against retaliation. The worker informs the session lead and DLP when safeguarding risk is possible.

Immediate response and fact finding

Stop harmful behaviour safely, separate participants where needed and arrange support without isolating or penalising the person affected. Preserve relevant digital evidence safely. Do not download or forward suspected child sexual abuse material. For non safeguarding matters, the lead speaks separately to the young people and witnesses, distinguishing observed facts from interpretation. Avoid forced face to face meetings, public accusations or promises of an outcome before hearing accounts. Refer risk of abuse under P02 immediately.

Resolution and support

Prepare a written safety and behaviour plan with proportionate consequences, communication expectations and a named support adult. Explain decisions in language each young person understands. Work with guardians where safe and appropriate. Restorative discussion or mediation is voluntary and suitable only where participants can take part safely; it is not used to resolve allegations of abuse or coercion. Support the young person who caused harm to understand and change behaviour, without excusing the harm.

Follow up and appeal

Acknowledge a report within two working days as an LCP target and provide a plan within five working days where practicable. Check safety within one week and again within four weeks, recording recurrence or retaliation. Escalate unmet risks to Iniobong Usanga or Ado Mazombe. A complainant can seek review under P12; any service restriction uses P15 review procedures. Delays are explained and safety action continues.

Monitoring

Keep F11 restricted and report anonymised patterns by setting and type to the board quarterly. Invite accessible youth feedback on whether reporting feels safe. Revise supervision, digital rules, training or inclusion measures when patterns emerge. Workplace bullying between employees is handled under P18 and the joint HSA and WRC code.

Forms and linked references

Use F11, F21, F18 in the Forms and implementation workbook. All forms carry the same policy ownership and control dates. Review annually and after material changes, using F32.

R03 [Tusla safeguarding publications and official forms](#)

R14 [NYCI inclusive youth work toolkit](#)

R20 [DPC children and data processing fundamentals](#)

R30 [EU Digital Services Act guidance on protection of minors](#)

R33 [EU Recommendation on integrated child protection systems](#)



LOVE AND CARE FOR PEOPLE

YOUTH WORK / POLICY COLLECTION

08

Online safety social media photography and AI

IN THIS POLICY

Approved platforms and accounts

Worker contact and online sessions

Images and publication

BOARD APPROVAL 14.12.2025

Reference review 11.10.2026 | Edition 2026.1

Person in charge: Iniobong Usanga

Deputy: Ado Mazombe

58 Main Street, Mallow, Co. Cork, P51V50F

CHY: 20204558 | Tel: +3532250375

WhatsApp / Telegram: 0873873256 or 0877106715

info@loveandcareforpeople.eu

www.loveandcareforpeople.eu

P08 Online safety social media photography and AI

Board approval 14.12.2025 | Reference review 11.10.2026

Owner Iniobong Usanga | Deputy Ado Mazombe | Version 2026.1

Digital activities must meet the same safeguarding and privacy standards as face to face youth work. Participation in LCP does not depend on agreeing to publicity or having a personal social media account.

Approved platforms and accounts

Iniobong Usanga approves platforms using F13, checking age terms, privacy, moderation, reporting, accessibility and data processing arrangements. Apply the GDPR age 16 rule only where Article 8 concerns consent for an information society service offered directly to a child; it is not a universal consent rule for youth work. Do not encourage children to evade platform age limits. Use organisational accounts, controlled administrator access, strong passwords and multifactor authentication. Maintain an alternative for people who cannot or choose not to use a platform.

Worker contact and online sessions

Use agreed organisational channels and contact times. Private or disappearing messages, private social friendships and personal livestream contact with participants are prohibited. Document exceptional urgent safeguarding communication and transfer necessary records securely. For planned sessions, control invitations, verify participants proportionately, use appropriate hosts and moderation, prevent unauthorised recording and provide a way to report privately. Camera use is optional unless essential and explained. Do not show home addresses or sensitive personal surroundings. Use a second authorised adult where needed by the risk assessment.

Images and publication

Use separate choices in F14 for internal records, print, website and each social channel. Explain purpose, audience, public sharing risks, retention and withdrawal limits. Obtain the young person's agreement and appropriate guardian permission; assess lawful consent and capacity rather than assuming parental permission overrides a refusal. Never use images of distress, personal care, undress or a safeguarding disclosure for publicity. Avoid names combined with locations, live geotags and identifying travel schedules. Store images securely, transfer from authorised devices promptly, and remove unwanted images within LCP's control when consent is withdrawn. Explain that independent third party copies may not be recoverable.

Harmful contact and content

Follow P02 for grooming, threats, exploitation or sexual abuse concerns. Record dates, URLs, usernames and relevant non illegal evidence. Do not copy, download or circulate suspected child sexual abuse images; seek Garda guidance on preservation and reporting. Use platform reporting and blocking without delaying statutory referrals. Contact Gardaí for immediate threats; the lead may use Coimisiún na Meán complaint guidance for platform obligations. The Online Safety Code and DSA primarily regulate platforms; this policy does not claim every LCP page is a regulated platform.

AI and automated tools

No worker may upload identifiable youth, safeguarding, health or personnel records to an unapproved AI service. The lead checks privacy, processor terms, international transfers, safeguarding risks and applicable AI Act duties before approval. Require appropriate staff competence, human review and transparency where AI is used. LCP prohibits automated eligibility, disciplinary or safeguarding decisions about young people and the generation of sexualised or exploitative child imagery. Do not use biometric profiling, emotion inference or surveillance to manage participation. Recheck current AI legislation and staged application before deploying a new tool.

Moderation and review

Keep an administrator register, image consent register and log of moderation or incidents. Review platform safety at least annually and after significant changes. No advertising profile or publicity consent is required for access to support. The lead removes access promptly when a worker leaves and checks current Irish and EU online safety developments.

Forms and linked references

Use F13, F14, F03, F17 in the Forms and implementation workbook. All forms carry the same policy ownership and control dates. Review annually and after material changes, using F32.

R18 [General Data Protection Regulation](#)

R19 [Data Protection Act 2018](#)

R20 [DPC children and data processing fundamentals](#)

R29 [Coimisiún na Meán Online Safety Code](#)

R30 [EU Digital Services Act guidance on protection of minors](#)

R39 [EU AI Act current implementation guidance](#)



**LOVE AND CARE
FOR PEOPLE**

YOUTH WORK / POLICY COLLECTION

09

Health and safety and Safety Statement

IN THIS POLICY

Risk assessment and responsibilities

Routine controls

Supervision and competent delivery

BOARD APPROVAL 14.12.2025

Reference review 11.10.2026 | Edition 2026.1

Person in charge: Iniobong Usanga

Deputy: Ado Mazombe

58 Main Street, Mallow, Co. Cork, P51V50F

CHY: 20204558 | Tel: +3532250375

WhatsApp / Telegram: 0873873256 or 0877106715

info@loveandcareforpeople.eu

www.loveandcareforpeople.eu

P09 Health and safety and Safety Statement

Board approval 14.12.2025 | Reference review 11.10.2026

Owner Iniobong Usanga | Deputy Ado Mazombe | Version 2026.1

LCP will protect employees and others affected by its work so far as reasonably practicable. The board retains employer accountability, while Iniobong Usanga manages implementation and Ado Mazombe provides cover.

Risk assessment and responsibilities

This policy is the management section of LCP's Safety Statement. Attach completed site and activity assessments F12, emergency arrangements F15, equipment checks and the action register. Assess the office at 58 Main Street, every delivery venue, travel, outreach and online work. A competent person identifies hazards, people at risk, existing controls, likelihood and severity, further actions, owners and deadlines. Eliminate hazards where possible before relying on instructions or protective equipment. Do not claim that a generic policy alone satisfies the site specific statutory duty.

Routine controls

The session lead checks exits, access, occupancy, lighting, ventilation, equipment condition, safe storage and housekeeping before use. Maintain fire detection, extinguishers, electrical equipment and other safety systems through competent providers at appropriate intervals. Separate cleaning chemicals and sharps from youth access. Plan safe manual handling, food hygiene and allergy controls where relevant. Confirm accessible evacuation, toilet arrangements and safe arrival and departure. Include psychosocial risks, violence, lone working and communicable illness in the assessment. Cancel or modify an activity where controls are absent.

Supervision and competent delivery

Set group size and adult staffing through the actual age, needs, activity, venue and emergency requirements in F12. There is no universal youth work statutory ratio claimed here. LCP's default for planned group work is at least two authorised adults present, with additional staffing where risk or needs demand it. A documented one to one service arrangement under P06 may use different controls. Young helpers are not counted as supervising adults. Check specialist activity instructors, qualification scope, equipment and insurance before use.

Emergency action

F15 names the duty lead, trained first aider, assembly point, evacuation assistance, emergency access and communication responsibilities for each venue. Raise the alarm, call 112 or 999 when required, evacuate by the safe route and account for everyone using attendance records. Do not re enter until authorised. Give first aid only within competence and follow emergency instructions. Keep a competent adult with affected young people and notify guardians where appropriate. Practise drills and brief visiting staff and participants; record improvements.

Accidents near misses and reportable events

Record accidents and near misses in F16, notify the lead the same day and review causes without blame. Preserve evidence and tell insurers where required. The lead checks HSA reportability,

including employee incapacity for more than three consecutive days excluding the day of the accident, qualifying non employee accidents and dangerous occurrences. Fatal events require immediate notification and a formal report within five working days; other reportable accidents and dangerous occurrences normally require reporting within ten working days under HSA guidance. Use official IR1 or IR3 routes, not the internal form alone.

Consultation records and review

Consult workers on risks and controls, support selection of safety representatives where applicable, communicate the Safety Statement and provide instruction in understandable formats. Workers cooperate, use equipment safely and raise defects promptly. The board reviews open high risks, incidents and resource needs quarterly. Review assessments before new activities and after incidents or material change; conduct a full annual review. A signed employer declaration and actual site assessments are required in F32 and F12.

Forms and linked references

Use F12, F15, F16, F32 in the Forms and implementation workbook. All forms carry the same policy ownership and control dates. Review annually and after material changes, using F32.

- R15 [HSA Safety Statement and risk assessment](#)
- R16 [Safety Health and Welfare at Work Act 2005](#)
- R17 [HSA accident and dangerous occurrence reporting](#)
- R38 [Road Safety Authority](#)
- R34 [EU Charter of Fundamental Rights](#)



**LOVE AND CARE
FOR PEOPLE**

YOUTH WORK / POLICY COLLECTION

10

Equality diversity accessibility and inclusion

IN THIS POLICY

Scope and equality standard

Access and individual accommodation

Inclusive programme delivery

BOARD APPROVAL 14.12.2025

Reference review 11.10.2026 | Edition 2026.1

Person in charge: Iniobong Usanga

Deputy: Ado Mazombe

58 Main Street, Mallow, Co. Cork, P51V50F

CHY: 20204558 | Tel: +3532250375

WhatsApp / Telegram: 0873873256 or 0877106715

info@loveandcareforpeople.eu

www.loveandcareforpeople.eu

P10 Equality diversity accessibility and inclusion

Board approval 14.12.2025 | Reference review 11.10.2026

Owner Iniobong Usanga | Deputy Ado Mazombe | Version 2026.1

We provide youth work that welcomes young people and removes avoidable barriers to participation. Fair access includes listening to the individual, arranging reasonable accommodation and challenging discriminatory behaviour.

Scope and equality standard

This policy covers recruitment, programme design, access, language, activities, facilities, communication, complaints and partnerships. Apply Irish service and employment equality law, including the nine grounds of gender, civil status, family status, sexual orientation, religion, age, disability, race and membership of the Traveller community, subject to the law's scope and exceptions. Age focused youth work eligibility must be objectively stated and lawful. We also respond to disadvantage related to poverty, care experience, housing, migration and other barriers, even where a category is not itself a separate statutory ground.

Access and individual accommodation

Give clear programme information, costs, eligibility and contact options. Ask what would help participation without requiring unnecessary diagnosis or immigration information. Agree accommodations using F18, such as physical access, communication supports, interpreters, sensory adjustments, dietary needs, personal care planning or modified activity. Consult the young person and appropriate carers, assess risks individually and explore alternatives before refusal. The lead records what is reasonable, resources required, timescale and review. No blanket exclusion based on disability or an assumed risk is permitted.

Inclusive programme delivery

Use accessible formats and plain language, and offer help completing forms. Check representation in materials and avoid stereotypes. Respect names, identity, faith and cultural practices within safe and lawful service arrangements. Assess clothing, changing and accommodation needs sensitively and privately, considering the individual and the whole group's safety. Do not disclose a young person's identity, health information or personal history without a lawful need. Plan affordable participation and alternatives where cost creates a barrier.

Discrimination and harassment response

Challenge harmful behaviour safely and support the person affected. Use P07 for peer incidents, P18 for workplace issues and P02 where harm may amount to abuse. Record facts, decisions and improvements; do not compel the affected person to mediate. Complaints can be made accessibly under P12 and external legal rights remain available. Managers must not retaliate against people requesting accommodation or raising discrimination concerns.

Participation and monitoring

Use varied ways to gather youth views, including private feedback and supported participation; avoid relying only on the most confident speakers. Record what changed as a result in F19. Monitor access,

dropout reasons and barriers with minimal proportionate data and lawful conditions for sensitive information. Equality monitoring is voluntary where consent is the basis and is separated from eligibility decisions. Report patterns rather than identifiable data.

Governance and review

Iniobong Usanga assigns accessibility actions and Ado Mazombe checks completion. The board reviews inclusion and accommodation outcomes annually using the NYCI toolkit and current youth participation frameworks. Train workers, audit partner arrangements and publish improvements in accessible terms. EU child rights and youth strategies guide practice; Irish equality law determines applicable domestic duties.

Forms and linked references

Use F18, F19, F21 in the Forms and implementation workbook. All forms carry the same policy ownership and control dates. Review annually and after material changes, using F32.

R22 [IHREC equal status rights explained](#)

R23 [IHREC employment equality guide](#)

R14 [NYCI inclusive youth work toolkit](#)

R11 [Young Ireland policy framework 2023 to 2028](#)

R13 [Participation Action Plan 2024 to 2028](#)

R31 [EU Youth Strategy 2019 to 2027](#)

R34 [EU Charter of Fundamental Rights](#)



LOVE AND CARE FOR PEOPLE

YOUTH WORK / POLICY COLLECTION

11

Data protection confidentiality and records

IN THIS POLICY

Responsibility and lawful processing

Privacy and consent

Security access and sharing

BOARD APPROVAL 14.12.2025

Reference review 11.10.2026 | Edition 2026.1

Person in charge: Iniobong Usanga

Deputy: Ado Mazombe

58 Main Street, Mallow, Co. Cork, P51V50F

CHY: 20204558 | Tel: +3532250375

WhatsApp / Telegram: 0873873256 or 0877106715

info@loveandcareforpeople.eu

www.loveandcareforpeople.eu

P11 Data protection confidentiality and records

Board approval 14.12.2025 | Reference review 11.10.2026

Owner Iniobong Usanga | Deputy Ado Mazombe | Version 2026.1

Love and Care for People is responsible for the personal data it controls. We collect only what is necessary, explain its use and keep it secure. Confidentiality does not prevent lawful safeguarding reports.

Responsibility and lawful processing

Iniobong Usanga is the nominated data protection contact and Ado Mazombe is deputy. This designation does not assert that LCP is legally required to appoint a Data Protection Officer; assess GDPR Article 37 separately and record the decision. Maintain a record of processing F17 for participants, families, staff, donors, volunteers and website users. Identify an Article 6 lawful basis for each purpose, and an Article 9 condition for health or other special category data. Criminal record data requires Article 10 compliance and applicable Irish law. Do not invent a public task or use blanket consent as the basis for every activity.

Privacy and consent

Give the privacy notice F20 when collecting information, with a child friendly explanation and accessible formats. State purposes, basis, recipients, retention, transfers, rights and contact details. Separate essential service administration from optional publicity and marketing consent. Use freely given, informed and specific consent where chosen, and record withdrawal. Parents are not automatically entitled to every record about a child; assess the child's rights, capacity, safety and lawful representation. Avoid promising absolute secrecy.

Security access and sharing

Restrict access by role, lock paper records, use encrypted managed storage, multifactor authentication, backups and secure deletion. Keep safeguarding, health and personnel information out of public email groups and ordinary messaging chats. Do not store confidential youth records on personal devices or unapproved cloud or AI tools. For necessary sharing, record recipient, purpose, minimum data and legal basis. Sign processor agreements, assess subprocessors and security, and check adequacy or lawful transfer safeguards for destinations outside the EEA. Complete a DPIA where processing is likely to create high risk, particularly monitoring, sensitive data or new technology affecting children.

Rights and requests

Log requests in F17 and forward them promptly to the data contact. Normally respond to GDPR rights requests within one month; where legally permitted, extend by up to two further months for complexity or volume and explain within the initial month. Verify identity proportionately and assess third party rights and lawful exemptions. Provide reasons and DPC complaint information where a request is restricted. Do not impose a general fee or require a parent to make every child's request.

Personal data breaches

Contain the breach, preserve evidence and inform the data contact immediately. Record when LCP became aware, affected people, data types, likely harm and mitigation. Notify the DPC without undue delay and where feasible within 72 hours of awareness unless the breach is unlikely to create a risk to rights and freedoms. Where likely high risk exists, notify affected individuals without undue delay subject to applicable exceptions. Use phased reporting if necessary and explain delay. Document every breach and a justified non notification decision; the board cannot postpone a statutory deadline.

Retention and disposal

F17 includes a purpose specific retention schedule. LCP's starting operational limits are routine attendance and expired administration records for two years after last participation, unsuccessful recruitment records for twelve months after decision, and ordinary complaints for three years after closure, subject to justified need. Finance and tax records follow applicable legal requirements, ordinarily at least six years. These are LCP defaults, not universal legal periods. Safeguarding, serious injury, employment and insurance records need a documented case specific schedule reflecting limitation issues involving minors, legal advice, agency needs and litigation holds; do not automatically delete them at the routine limit. Review these categories annually, authorise disposal and record destruction.

Accountability

Check storage, processors, privacy notices and retention annually. Train staff, remove leavers' access immediately and report anonymised incidents to the board. Confirm cookie and marketing compliance before optional tracking or campaigns; do not pre enable non essential cookies. The data contact keeps assessment records and refers unresolved legal issues for qualified advice.

Forms and linked references

Use F17, F20, F14 in the Forms and implementation workbook. All forms carry the same policy ownership and control dates. Review annually and after material changes, using F32.

R18 [General Data Protection Regulation](#)

R19 [Data Protection Act 2018](#)

R20 [DPC children and data processing fundamentals](#)

R21 [DPC personal data breach guidance and notification](#)

R40 [Adult retrospective disclosures addendum April 2025](#)



**LOVE AND CARE
FOR PEOPLE**

YOUTH WORK / POLICY COLLECTION

12

Complaints feedback and appeals

IN THIS POLICY

Making a complaint

Triage and responsibility

Acknowledgement and response

BOARD APPROVAL 14.12.2025

Reference review 11.10.2026 | Edition 2026.1

Person in charge: Iniobong Usanga

Deputy: Ado Mazombe

58 Main Street, Mallow, Co. Cork, P51V50F

CHY: 20204558 | Tel: +3532250375

WhatsApp / Telegram: 0873873256 or 0877106715

info@loveandcareforpeople.eu

www.loveandcareforpeople.eu

P12 Complaints feedback and appeals

Board approval 14.12.2025 | Reference review 11.10.2026

Owner Iniobong Usanga | Deputy Ado Mazombe | Version 2026.1

Young people, parents, workers and members of the public can raise concerns without fear of retaliation. We make complaints easy to submit and provide a reasoned response from someone who is not involved in the matter.

Making a complaint

Tell any LCP worker, telephone the office, write to 58 Main Street, Mallow, Co. Cork, P51V50F, or email info@loveandcareforpeople.eu. A form is optional; F21 helps record the complaint. Offer oral, supported, translated and accessible routes. Listen to anonymous concerns and assess what can be acted on, explaining any limits. Young people can have a trusted support person. Do not require them to confront the person complained about.

Triage and responsibility

The recipient checks immediate safety before processing the complaint. Allegations of abuse go straight to P02 and P04; urgent medical or serious danger goes to emergency services. Data rights complaints follow P11; employment grievances follow P18; protected disclosures receive their appropriate legal handling. Iniobong Usanga assigns an unconflicted handler. Ado Mazombe handles complaints about the lead, with board oversight. An unconflicted trustee handles complaints concerning both, and the board records this contact in F02.

Acknowledgement and response

Acknowledge within five working days and identify the handler, issues, process, target date and support available. LCP aims for a written or accessible outcome within twenty working days. These are service targets, not statutory limitation periods. Where more time is needed, explain reasons, give a new date and update at least every ten working days. Safety action is immediate and never waits for these targets.

Fair review

Agree the concern and desired resolution, gather proportionate evidence, hear relevant accounts and keep a secure chronology. Share sufficient detail for fair response while protecting third party privacy. Separate facts, disputed matters and conclusions. Do not make findings on child abuse that belong to statutory agencies. Provide the outcome, reasons, remedies, action owner and review arrangements in accessible language. Do not disclose unrelated personnel sanctions.

Appeal and external rights

A complainant may request an internal review within twenty working days of the outcome, explaining disagreement or new evidence; allow reasonable flexibility for age, disability or other barriers. An unconflicted trustee or independent reviewer acknowledges within five working days and aims to decide within twenty working days. Explain further delay. Internal processes never remove access to Tusla, Gardaí, DPC, WRC, IHREC assistance, courts, the Charities Regulator or a relevant funder within their respective remits. External time limits continue while a complaint is considered internally.

Learning and records

Keep the complaint file restricted and distinct from child protection records. Monitor retaliation and check that agreed remedies occurred. Report anonymised numbers, themes, overdue cases and actions to the board quarterly. Ask young people whether the process felt accessible and safe. Retain and dispose under P11, preserving records needed for ongoing proceedings.

Forms and linked references

Use F21, F02, F32 in the Forms and implementation workbook. All forms carry the same policy ownership and control dates. Review annually and after material changes, using F32.

R03 [Tusla safeguarding publications and official forms](#)

R18 [General Data Protection Regulation](#)

R24 [WRC grievance and disciplinary code](#)

R27 [Charities Governance Code](#)

R33 [EU Recommendation on integrated child protection systems](#)



**LOVE AND CARE
FOR PEOPLE**

YOUTH WORK / POLICY COLLECTION

13

Participation consent registration and attendance

IN THIS POLICY

Registration and informed choices

Separate permissions

Attendance and arrival

BOARD APPROVAL 14.12.2025

Reference review 11.10.2026 | Edition 2026.1

Person in charge: Iniobong Usanga

Deputy: Ado Mazombe

58 Main Street, Mallow, Co. Cork, P51V50F

CHY: 20204558 | Tel: +3532250375

WhatsApp / Telegram: 0873873256 or 0877106715

info@loveandcareforpeople.eu

www.loveandcareforpeople.eu

P13 Participation consent registration and attendance

Board approval 14.12.2025 | Reference review 11.10.2026

Owner Iniobong Usanga | Deputy Ado Mazombe | Version 2026.1

Youth work participation is voluntary. We explain activities and support young people to choose, influence and leave activities safely, while maintaining reliable contact and attendance arrangements.

Registration and informed choices

Use F22 to record only necessary identity, age, contact, emergency, support and collection information. Give the privacy notice and accessible programme information, including costs and eligibility. Obtain appropriate parent or guardian permission for under 18 participation and the young person's own agreement. A child's refusal or distress must be taken seriously. Where involving a guardian may create risk or prevent access to essential support, the lead must arrange an individual lawful safeguarding plan, consult appropriate advice and record the decision rather than automatically excluding or disclosing.

Separate permissions

Do not combine participation, medical support, transport, publicity and marketing into one compulsory signature. Use activity specific consent F23 for trips and significant changes. Image choices use F14 and medication arrangements use F25. Guardians confirm their authority; record any relevant collection restrictions securely. For participants aged 18 and over, obtain their own consent and instructions for emergency contact and information sharing. Consent is reviewed if circumstances or the activity changes.

Attendance and arrival

The session lead records arrival, departure and supervising adults in F24. Explain whether the programme is drop in or has fixed attendance and communicate the limits of supervision. Maintain an accurate headcount during transitions and emergencies. Only share attendance with authorised people for a justified purpose. Investigate unexplained absence where an individual care or attendance plan requires it; ordinary voluntary non attendance is not itself proof of harm.

Collection and safe departure

Follow the recorded independent travel or authorised collection arrangement. Verify unfamiliar collectors through a safe agreed method and do not release a child to someone unauthorised or apparently unable to keep them safe. For late collection, keep appropriate adults with the child, contact guardians and the lead, and use the emergency plan if safe handover cannot be arranged. Never leave a child alone or routinely take them home privately. Record deviations and review repeat difficulties.

Missing participant

Immediately establish the last known location and alert the session lead. Secure supervision of the remaining group, check the agreed area safely and contact the lead and guardian where safe. Do not wait for a fixed period before calling Gardaí where risk, age or circumstances require urgent assistance. Give accurate description, last sighting, risks and actions taken; call 112 or 999 for

immediate danger. Record the incident in F16, assess any P02 referral and agree support and prevention after safe return.

Youth voice and review

Use F19 to record decisions young people can influence, accessible ways to contribute, who listens, what changed and feedback to participants. Offer opt out and private feedback without penalty. Review barriers, consent clarity and safe departure with participants each programme cycle. Do not publish attendance or identifiable youth feedback without the appropriate basis.

Forms and linked references

Use F22, F23, F24, F19 in the Forms and implementation workbook. All forms carry the same policy ownership and control dates. Review annually and after material changes, using F32.

R09 [Youth Work Act 2001](#)

R10 [Opportunities for Youth national strategy 2024 to 2028](#)

R13 [Participation Action Plan 2024 to 2028](#)

R18 [General Data Protection Regulation](#)

R31 [EU Youth Strategy 2019 to 2027](#)

R32 [EU Strategy on the Rights of the Child](#)



LOVE AND CARE FOR PEOPLE

YOUTH WORK / POLICY COLLECTION

14

Trips transport and residential activities

IN THIS POLICY

Planning and authorisation

Information and consent

Transport

BOARD APPROVAL 14.12.2025

Reference review 11.10.2026 | Edition 2026.1

Person in charge: Iniobong Usanga

Deputy: Ado Mazombe

58 Main Street, Mallow, Co. Cork, P51V50F

CHY: 20204558 | Tel: +3532250375

WhatsApp / Telegram: 0873873256 or 0877106715

info@loveandcareforpeople.eu

www.loveandcareforpeople.eu

P14 Trips transport and residential activities

Board approval 14.12.2025 | Reference review 11.10.2026

Owner Iniobong Usanga | Deputy Ado Mazombe | Version 2026.1

A trip may proceed only when the lead has verified a written plan, suitable staffing, meaningful consent and emergency arrangements. Responsibility remains with LCP even when external providers deliver part of an activity.

Planning and authorisation

Complete F23 and F12 with purpose, itinerary, group needs, costs, venue, transport, activity providers and emergency contacts. Iniobong Usanga authorises and Ado Mazombe provides cover. Assess weather, water, outdoor hazards, accessibility, accommodation, supervision and safeguarding harm. Verify insurance scope, provider competence and any relevant licences. Staff ratios depend on actual risk and must allow one adult to support an injured young person while the group remains safely supervised. Do not proceed with unresolved high risk.

Information and consent

Give participants and guardians the itinerary, contacts, expected conduct, costs, accessibility, medical arrangements and foreseeable risks. Obtain activity specific permissions and youth agreement; explain material changes and renew consent where needed. Make an equitable alternative available where feasible. Record allergies, medication and support plans securely. Travel outside Ireland requires passport, entry and parental travel requirements, adequate insurance, consular and local emergency arrangements, and data safeguards; Irish procedures alone do not establish compliance with the destination's law.

Transport

Verify driver licence entitlement, roadworthiness, appropriate insurance for the use and passenger capacity. Use required seat belts and suitable child restraints under current RSA guidance. Record drivers, vehicles, passenger lists and pickup points. Use vetted and suitable drivers where relevant work rules apply. Avoid a lone adult transporting one child; document an exceptional emergency arrangement under P06. Never overload a vehicle, allow an impaired driver or leave a child unattended. Communicate delay and arrival safely.

Residential safeguards

Inspect or verify accommodation before booking. Plan room allocations with age, privacy, dignity, individual needs and safeguarding in mind. Adults do not share a bedroom with children except a documented and appropriate parent or individually assessed care arrangement approved in advance. Set rules for bathrooms, access, night supervision, check ins, visitors and emergencies. Do not enter a child's room alone in routine circumstances; where urgent safety requires entry, summon another authorised adult when practicable and record action. Adults and participants must know how to raise a concern privately.

During the activity and emergencies

Brief the group, count participants at every transition, keep appropriate supervision and record changes. Use trained competent instructors for specialist activities and allow participants to stop if distressed. Carry secure emergency and medical information with an authorised adult. In an incident, obtain emergency assistance, support the remaining group, notify the organisational lead and guardians where safe, and record details. Apply P02 for harm concerns. Do not post live locations or identifiable travel schedules publicly.

Return and review

Account for every participant at handover, record late collection or deviations and return unused medication or property through documented arrangements. Debrief with young people and staff, check welfare after serious incidents and record provider or plan improvements. Retain consent, risk and incident records under P11 and funder or insurer requirements. F30 records partner responsibilities and escalation routes.

Forms and linked references

Use F23, F12, F25, F30, F16 in the Forms and implementation workbook. All forms carry the same policy ownership and control dates. Review annually and after material changes, using F32.

R03 [Tusla safeguarding publications and official forms](#)

R15 [HSA Safety Statement and risk assessment](#)

R38 [Road Safety Authority](#)

R18 [General Data Protection Regulation](#)

R31 [EU Youth Strategy 2019 to 2027](#)



**LOVE AND CARE
FOR PEOPLE**

YOUTH WORK / POLICY COLLECTION

15

Behaviour support and proportionate restrictions

IN THIS POLICY

Agreed expectations

Response during an incident

After the incident

BOARD APPROVAL 14.12.2025

Reference review 11.10.2026 | Edition 2026.1

Person in charge: Iniobong Usanga

Deputy: Ado Mazombe

58 Main Street, Mallow, Co. Cork, P51V50F

CHY: 20204558 | Tel: +3532250375

WhatsApp / Telegram: 0873873256 or 0877106715

info@loveandcareforpeople.eu

www.loveandcareforpeople.eu

P15 Behaviour support and proportionate restrictions

Board approval 14.12.2025 | Reference review 11.10.2026

Owner Iniobong Usanga | Deputy Ado Mazombe | Version 2026.1

We respond to behaviour in ways that preserve dignity, protect safety and help young people remain involved. Staff must consider communication, disability, trauma, unmet needs and environmental triggers before imposing consequences.

Agreed expectations

Co create clear group rules, explain them in accessible language and rehearse how to ask for help or a break. Identify individual support needs with consent and use F26 when behaviour repeatedly affects safety. Set realistic expectations based on age and understanding. The session lead makes reasonable adjustments and plans staffing, calm spaces and safe transitions rather than relying on punishment.

Response during an incident

Use calm language, reduce stimulation, allow space and choices, and call support early. Keep other participants safe and avoid an audience. Do not use humiliation, threats, corporal punishment, collective punishment, deprivation of food or toilets, or locked seclusion. Do not use restraint as routine behaviour management. Staff without authorised specialist arrangements must prioritise distance, evacuation, support and emergency services. Any unavoidable emergency physical intervention to avert immediate injury must be necessary, proportionate, as brief as possible, within competence and law, and fully recorded and reviewed.

After the incident

Check injuries and emotional welfare, seek medical help where needed and listen to each account separately. Record facts, triggers, actions, contact and outcome in F16 and F26. Notify guardians where appropriate and safe, and the lead the same day. Assess whether harm, peer abuse, adult conduct or unsafe systems require P02 or P04. A behaviour label must not conceal a child protection concern or discrimination.

Support plan and consequences

Agree a plan with the young person and appropriate carers: early warning signs, preferred calming support, adjustments, boundaries, named workers and review dates. Use restorative discussion only when safe and voluntary. Consequences must relate to the behaviour, be explained and take account of disability and fairness. Return after a break should be planned; repeated exclusion without assessing accommodation is prohibited.

Temporary restriction or exclusion

A session lead may pause an activity immediately for safety, but Iniobong Usanga or the deputy must review any continued restriction promptly. Give written reasons, evidence, duration, support and return conditions, and hear the young person's account. Consider less restrictive options and available alternative support before exclusion. Review a temporary restriction within five working days as an LCP target. An unconflicted trustee hears an appeal under P12. No permanent restriction is made without a fair documented board review and appropriate advice.

Learning and accountability

The lead checks that physical interventions, restrictive practices and repeated incidents receive individual review and board oversight. Analyse patterns in triggers, environments and staff responses, not only participant behaviour. Train staff in de escalation within their roles. Store support plans securely, share relevant instructions with authorised workers and review at least each programme cycle.

Forms and linked references

Use F26, F16, F18, F21 in the Forms and implementation workbook. All forms carry the same policy ownership and control dates. Review annually and after material changes, using F32.

R22 [IHREC equal status rights explained](#)

R03 [Tusla safeguarding publications and official forms](#)

R32 [EU Strategy on the Rights of the Child](#)

R33 [EU Recommendation on integrated child protection systems](#)

R34 [EU Charter of Fundamental Rights](#)



LOVE AND CARE FOR PEOPLE

YOUTH WORK / POLICY COLLECTION

16

Drugs alcohol smoking and vaping

IN THIS POLICY

Prevention and staff standards
Suspected intoxication or overdose
Possession and unsafe items

BOARD APPROVAL 14.12.2025

Reference review 11.10.2026 | Edition 2026.1

Person in charge: Iniobong Usanga

Deputy: Ado Mazombe

58 Main Street, Mallow, Co. Cork, P51V50F

CHY: 20204558 | Tel: +3532250375

WhatsApp / Telegram: 0873873256 or 0877106715

info@loveandcareforpeople.eu

www.loveandcareforpeople.eu

P16 Drugs alcohol smoking and vaping

Board approval 14.12.2025 | Reference review 11.10.2026

Owner Iniobong Usanga | Deputy Ado Mazombe | Version 2026.1

LCP youth activities are free from illicit drugs, alcohol consumption, smoking and vaping by participants and staff during delivery. We respond to substance use through immediate safety, proportionate boundaries and access to health support.

Prevention and staff standards

Explain rules before activities and trips. Adults must be fit for duty and must not work impaired or supply alcohol, illegal drugs, tobacco or vaping products to participants. Keep youth spaces and vehicles smoke and vape free. Prescription medication is managed under P17. Use age appropriate, evidence informed education, avoiding shaming or sensational accounts. Provide information on help and take account of drug related intimidation or family harm.

Suspected intoxication or overdose

Check safety and symptoms without accusing or conducting a clinical diagnosis. If a person is unconscious, breathing abnormally, seriously unwell or suspected of overdose, call 112 or 999 immediately and follow emergency instructions; do not wait for a guardian. Give first aid within competence, never leave the person alone, and do not induce vomiting or give remedies. Keep the rest of the group safely supervised. Inform the organisational lead and guardian where appropriate and safe, and record facts in F16.

Possession and unsafe items

Staff do not conduct coercive body searches, detain a young person or improvise disposal of unknown substances. Move others away from immediate hazards, request assistance and contact Gardaí where criminal or serious safety concerns warrant it. Use a safe voluntary handover only within a documented procedure and competence. Do not taste, handle unprotected, transport or retain an unknown substance without appropriate Garda or safety guidance. Record the circumstances, agency advice and action taken.

Welfare support and referral

Speak privately when the person is safe and able to engage. Listen for exploitation, debt, threats, family difficulties, self harm or abuse and follow P02 where required. Agree a support and return plan under P15 rather than automatic permanent exclusion. Offer HSE or other verified local health referrals and involve guardians where safe. Adults aged 18 and over decide their own health support unless another lawful basis applies. Explain confidentiality limits and do not make access conditional on unnecessary disclosure.

Policy and evidence base

Use current HSE drugs information and alerts. The 2017 to 2025 national drugs strategy is historical. The published 2026 to 2029 successor located in this review is expressly a draft, so it informs awareness without being described as adopted policy. Iniobong Usanga must verify final publication

before replacing this reference. Irish criminal, tobacco and alcohol rules continue to apply independently of strategy documents.

Monitoring

Iniobong Usanga oversees incidents and referrals; Ado Mazombe provides cover. Check recurring risks, staff fitness, supervision and communications after each incident. Keep medical and safeguarding details restricted. Report anonymised trends and improvements to the board and update education from verified health sources.

Forms and linked references

Use F16, F26, F27 in the Forms and implementation workbook. All forms carry the same policy ownership and control dates. Review annually and after material changes, using F32.

R36 [HSE drugs information and support](#)

R37 [Draft National Drugs Strategy 2026 to 2029](#)

R35 [HSE urgent mental health support](#)

R01 [Children First Act 2015](#)

R32 [EU Strategy on the Rights of the Child](#)



**LOVE AND CARE
FOR PEOPLE**

YOUTH WORK / POLICY COLLECTION

17

Medical needs medication and emergency wellbeing

IN THIS POLICY

Individual planning

Medication receipt and storage

Administration and self administration

BOARD APPROVAL 14.12.2025

Reference review 11.10.2026 | Edition 2026.1

Person in charge: Iniobong Usanga

Deputy: Ado Mazombe

58 Main Street, Mallow, Co. Cork, P51V50F

CHY: 20204558 | Tel: +3532250375

WhatsApp / Telegram: 0873873256 or 0877106715

info@loveandcareforpeople.eu

www.loveandcareforpeople.eu

P17 Medical needs medication and emergency wellbeing

Board approval 14.12.2025 | Reference review 11.10.2026

Owner Iniobong Usanga | Deputy Ado Mazombe | Version 2026.1

We plan support so that medical needs do not unnecessarily prevent participation. Youth workers do not diagnose, prescribe or provide care outside their training and authority.

Individual planning

Before participation requiring medical support, use F25 with the young person, guardian where appropriate, and relevant clinical advice. Record only necessary conditions, allergies, triggers, emergency signs, medicine instructions, self administration arrangements, authorised helpers, storage and contact details. Obtain a current written plan for complex or emergency medication. Confirm consent and authority appropriate to age, capacity and the intervention; activity permission is not blanket consent to treatment. Clinicians determine clinical consent within applicable law.

Medication receipt and storage

Accept medicine in the original labelled container with clear current instructions and expiry date. Check participant identity, medicine, dose, route, timing, contraindications known in the plan and consent. Never alter a prescribed dose or use another person's medicine. Record receipt and quantity, secure storage and return. Keep emergency medication accessible according to the clinical plan; locking it away must not prevent urgent access. Record refrigeration or other special storage requirements and restrict access to authorised competent people.

Administration and self administration

Only an authorised trained person may assist or administer within the individual plan. Document each dose immediately in F25, including time, amount, person assisting and any independent check required by the plan. A capable young person may self administer under an agreed risk assessed arrangement that preserves dignity and safe access. If instructions are unclear, consent is absent, a dose is missed or an error occurs, obtain clinical advice; do not guess or double a dose. Escalate urgent effects to emergency services and record the incident.

Emergency and allergy response

Call 112 or 999 for serious illness, severe allergic reaction, suspected overdose or immediate danger. Follow the dispatcher and individual emergency plan and give first aid or prescribed emergency medicine only within training and authority. Do not delay urgent help to obtain a signature. Provide responders with relevant medical details and medication information. Notify the lead and guardian where appropriate and safe. Keep other participants supervised, record the incident and replace used supplies.

Mental health and self harm

Listen without judgement, ask about immediate safety and obtain qualified support. Where there is immediate danger of suicide, serious self harm or acute crisis, call 112 or 999 or arrange emergency assessment as advised. Do not leave the young person unsupported while urgent help is arranged. Do not promise secrecy or rely solely on a promise to stay safe. Share necessary information with

appropriate helpers, involve guardians where safe, and consider P02. For non emergency needs, agree a referral and follow up plan using F27; youth work support does not substitute for clinical care.

Review and records

Review plans when a medicine or need changes, before trips and at least each programme cycle. Check staff competence and cover so care does not depend on one absent person. Give accessible information about limitations of the service and arrange alternatives where required. Keep health information in restricted files under P11 and provide only necessary instructions to the delivery team. The lead reviews medication errors and wellbeing incidents and reports anonymised improvements to the board.

Forms and linked references

Use F25, F27, F16 in the Forms and implementation workbook. All forms carry the same policy ownership and control dates. Review annually and after material changes, using F32.

R35 [HSE urgent mental health support](#)

R18 [General Data Protection Regulation](#)

R20 [DPC children and data processing fundamentals](#)

R22 [IHREC equal status rights explained](#)

R32 [EU Strategy on the Rights of the Child](#)



**LOVE AND CARE
FOR PEOPLE**

YOUTH WORK / POLICY COLLECTION

18

Staff volunteer management dignity and protected disclosures

IN THIS POLICY

Terms induction and supervision

Dignity at work

Grievance procedure

BOARD APPROVAL 14.12.2025

Reference review 11.10.2026 | Edition 2026.1

Person in charge: Iniobong Usanga

Deputy: Ado Mazombe

58 Main Street, Mallow, Co. Cork, P51V50F

CHY: 20204558 | Tel: +3532250375

WhatsApp / Telegram: 0873873256 or 0877106715

info@loveandcareforpeople.eu

www.loveandcareforpeople.eu

P18 Staff volunteer management dignity and protected disclosures

Board approval 14.12.2025 | Reference review 11.10.2026

Owner Iniobong Usanga | Deputy Ado Mazombe | Version 2026.1

LCP provides clear roles, support and fair procedures for workers and volunteers. Managers must address poor practice and complaints without retaliation or conflicts of interest.

Terms induction and supervision

Issue written employment terms within applicable legal deadlines and a volunteer role agreement for volunteers; determine actual status lawfully rather than using the label to avoid employment rights. Set hours, duties, expenses, line management, induction and review arrangements. Apply P03 checks before relevant work, P05 training and supervision, and P06 boundaries. Assess workload, wellbeing and reasonable accommodation. Record individual responsibilities and review dates using F05 and F08. Maintain current employment compliance information through WRC guidance rather than hard coding changing pay or leave rates.

Dignity at work

Bullying, harassment, sexual harassment and discriminatory treatment are prohibited at the workplace, work related digital contact, trips and events. Use the joint 2020 HSA and WRC bullying code and current equality requirements. A person can raise a concern to the lead, deputy or an unconflicted trustee, with a support person or representative. Offer a suitable informal route only where voluntary and safe. Serious allegations, power imbalance or failed informal action require formal assessment. Do not use mediation to displace statutory safeguarding reports.

Grievance procedure

Record the concern in F29, acknowledge within five working days and appoint an unconflicted reviewer. Meet the worker, allow representation by a colleague or registered trade union representative, gather relevant evidence and hear responses. LCP aims to issue a reasoned outcome within twenty working days, explaining delays. Appeal to an uninvolved trustee within ten working days, with flexibility where justified. The appeal reviewer ordinarily responds within twenty working days. Internal targets do not suspend external legal deadlines or access to the WRC or courts.

Disciplinary procedure

Tell the worker the alleged breach and relevant evidence in advance, give reasonable time to respond, allow representation and use impartial assessment. Separate investigation and decision roles where practicable. State findings, reasons, sanction, duration and appeal route in writing. Ordinary progression is an oral warning active for six months, written warning for twelve months, final written warning for twelve months and dismissal, subject to circumstances and contracts. Serious misconduct may justify an earlier stage after fair procedures. Expired warnings are no longer relied on as live sanctions; underlying lawful records follow P11. Employees may appeal within ten working days to an uninvolved trustee or independent reviewer. Volunteer restrictions follow equivalent fairness adapted to the relationship.

Protected disclosures

Protect anyone who raises a qualifying work related wrongdoing from penalisation. Preserve identity confidentiality subject to law. General personal grievances normally use the grievance route; wrongdoing affecting others may require protected disclosure handling. The board designates an impartial recipient in F02 and checks whether statutory internal channel duties apply, including headcount and relevant sector rules. Where those duties apply, acknowledge within seven days and give required feedback within three months, with competent follow up and records. External prescribed person and Protected Disclosures Commissioner routes remain available as applicable; no policy requires internal exhaustion. Seek specialist handling where needed.

Leaving and oversight

Recover keys and equipment, remove digital access promptly, transfer duties securely and maintain continuity of safeguarding and care. Do not restrict lawful reporting through confidentiality clauses. The board reviews anonymised issues and compliance, manages conflicts and appoints independent reviewers where the small organisation cannot provide separation internally. Allegations involving children follow P04 immediately alongside these procedures.

Forms and linked references

Use F05, F08, F09, F29, F02 in the Forms and implementation workbook. All forms carry the same policy ownership and control dates. Review annually and after material changes, using F32.

R24 [WRC grievance and disciplinary code](#)

R25 [Joint HSA and WRC workplace bullying code](#)

R23 [IHREC employment equality guide](#)

R26 [Protected Disclosures Amendment Act 2022](#)

R18 [General Data Protection Regulation](#)



**LOVE AND CARE
FOR PEOPLE**

YOUTH WORK / POLICY COLLECTION

19

Governance finance conflicts of interest and accountability

IN THIS POLICY

Board responsibilities and identity

Delegation and separation

Budget expenditure and procurement

BOARD APPROVAL 14.12.2025

Reference review 11.10.2026 | Edition 2026.1

Person in charge: Iniobong Usanga

Deputy: Ado Mazombe

58 Main Street, Mallow, Co. Cork, P51V50F

CHY: 20204558 | Tel: +3532250375

WhatsApp / Telegram: 0873873256 or 0877106715

info@loveandcareforpeople.eu

www.loveandcareforpeople.eu

P19 Governance finance conflicts of interest and accountability

Board approval 14.12.2025 | Reference review 11.10.2026

Owner Iniobong Usanga | Deputy Ado Mazombe | Version 2026.1

The board is accountable for LCP's charitable purpose, resources and safe delivery. Delegation to Iniobong Usanga and Ado Mazombe does not transfer trustees' responsibility for oversight.

Board responsibilities and identity

Maintain the governing document, lawful appointments, quorum, minutes, statutory filings, annual reporting and an evidence record against the Charities Governance Code. Confirm registered charity details and any separate Revenue CHY exemption reference in F32 before using them in legal filings. The supplied identifier is recorded as CHY 20204558 pending confirmation of its type. Check which Charities Amendment Act 2024 provisions have commenced before relying on new requirements. Approve the annual budget, risk register, policies and delegation schedule; review safeguarding, finance and service quality quarterly.

Delegation and separation

Iniobong Usanga manages day to day delivery and Ado Mazombe provides cover. The board records monetary limits and authorised signatories in F28. No one approves their own payment, expenses or contract. Use two independent approvals for bank payments, with access controls separating preparation, approval and reconciliation where practicable. Where limited staffing prevents full separation, an unconflicted trustee checks original records and documents the compensating control. Emergency spending is documented and promptly reviewed.

Budget expenditure and procurement

Spend only within charitable purposes, approved budgets and restrictions attached to funds. Keep invoices, receipts, contract approvals and allocation to funding sources. Obtain proportionate quotations and record value, suitability and safeguarding checks; the board sets thresholds in F28 before commitments. Monitor budget variance monthly and report material issues promptly. Never split purchases to evade limits. Related party transactions require declared interests, independent consideration and legal authority; trustee remuneration cannot be authorised merely by a conflicted vote.

Cash donations and fundraising

Use numbered receipts or a reliable digital record, two people for cash counts, prompt banking and secure temporary storage. Record restricted donations separately and honour stated purposes. Reconcile events, donations and cash records; avoid personal bank accounts. Fundraising must be accurate, respectful and free from coercion. Do not publish young people's distress or stories for fundraising without appropriate lawful, specific permission and safeguarding assessment. Follow current fundraising, tax, data and regulator requirements; check any permit required for the activity.

Conflicts fraud and risk

Trustees and decision makers complete F28 on appointment, annually and when a new interest arises. Declare conflicts before an item, withdraw where appropriate and record how quorum and

independent decision making were maintained. Report suspected fraud, misuse, bribery or wrongdoing promptly to an unconflicted trustee and use lawful external reporting where needed. Preserve evidence, protect reporters and seek appropriate advice on regulator, Garda, funder or insurer notification. Do not promise immunity or conceal loss to protect reputation.

Partnership quality and review

Use F30 for contracts and shared facilities, clarifying safeguarding, reporting, supervision, privacy, insurance and complaints responsibilities. Track actual outcomes and youth feedback against relevant NQSF and funding requirements; do not claim an accreditation LCP has not obtained. F31 and F32 record action owners, evidence, deadlines and review. The board ratifies material revisions on their actual date and retains prior versions. Provide accessible public information on purpose, contacts, complaints and the safeguarding statement.

Forms and linked references

Use F28, F30, F31, F32 in the Forms and implementation workbook. All forms carry the same policy ownership and control dates. Review annually and after material changes, using F32.

R27 [Charities Governance Code](#)

R28 [Charities Amendment Act 2024 implementation](#)

R12 [National Quality Standards Framework for Youth Work](#)

R10 [Opportunities for Youth national strategy 2024 to 2028](#)

R18 [General Data Protection Regulation](#)

R31 [EU Youth Strategy 2019 to 2027](#)

Irish and EU reference register

References checked for this edition on 11.10.2026. These official routes support review and access to current guidance. Documents explicitly described as drafts have not been treated as adopted national policy. LCP operational choices in this manual are distinguished from statutory requirements.

R01 Children First Act 2015

Irish law. Use with subsequent amendments and commencement information.

[Open official reference](#)

R02 Children First guidance legislation and addenda

National Guidance 2017 with online safety addendum 2019 and adult retrospective disclosures addendum April 2025.

[Open official reference](#)

R03 Tusla safeguarding publications and official forms

Current access point for the 2024 second edition safeguarding guide, updated training guidance, CSS sample, CPWRF and RARF. Use live official reporting forms.

[Open official reference](#)

R04 Tusla mandated reporting

Reporting guidance. Personal statutory duties cannot be delegated to the DLP.

[Open official reference](#)

R05 Tusla contact a social worker

Choose the duty service for the area where the child lives. Verify the live directory before use.

[Open official reference](#)

R06 Tusla secure reporting portal

Official submission route. Internal LCP forms do not replace statutory reports.

[Open official reference](#)

R07 National Vetting Bureau information

Official scope and procedure for vetting.

[Open official reference](#)

R08 National Vetting Bureau Acts and prior vetting duty

Irish law. Apply the Acts as amended, including 2016 amendments, to relevant work and activities.

[Open official reference](#)

R09 Youth Work Act 2001

Irish law and youth work definition.

[Open official reference](#)

R10 Opportunities for Youth national strategy 2024 to 2028

National policy direction, not a standalone legal obligation for every charity.

[Open official reference](#)

R11 Young Ireland policy framework 2023 to 2028

Current national framework for children and young people.

[Open official reference](#)

R12 National Quality Standards Framework for Youth Work

Youth work quality framework. Apply funding and ETB requirements relevant to LCP.

[Open official reference](#)

R13 Participation Action Plan 2024 to 2028

Current national participation policy.

[Open official reference](#)

R14 NYCI inclusive youth work toolkit

Sector practice resource.

[Open official reference](#)

R15 HSA Safety Statement and risk assessment

Official guidance on workplace safety duties and site specific assessment.

[Open official reference](#)

R16 Safety Health and Welfare at Work Act 2005

Irish law, particularly sections 8, 19, 20 and consultation provisions.

[Open official reference](#)

R17 HSA accident and dangerous occurrence reporting

Official reporting thresholds, time limits and IR1 and IR3 routes.

[Open official reference](#)

R18 General Data Protection Regulation

Binding EU regulation. Use current consolidated text through EUR Lex.

[Open official reference](#)

R19 Data Protection Act 2018

Irish law supplementing GDPR. Section 31 sets age 16 for Article 8 online consent in Ireland.

[Open official reference](#)

R20 DPC children and data processing fundamentals

Regulator guidance for online and offline processing involving children.

[Open official reference](#)

R21 DPC personal data breach guidance and notification

Risk based notification duties. Every breach must be documented.

[Open official reference](#)

R22 IHREC equal status rights explained

Official guide to Irish service equality law. Apply current Equal Status Acts and lawful exceptions.

[Open official reference](#)

R23 IHREC employment equality guide

Official guide to employment equality law.

[Open official reference](#)

R24 WRC grievance and disciplinary code

S I 146 of 2000. Fair procedures, representation and appeal.

[Open official reference](#)

R25 Joint HSA and WRC workplace bullying code

S I 674 of 2020, replacing older workplace bullying codes.

[Open official reference](#)

R26 Protected Disclosures Amendment Act 2022

Apply the Protected Disclosures Act 2014 as amended. Internal channel duties depend on organisation size and sector; protections are wider.

[Open official reference](#)

R27 Charities Governance Code

Governance standards and evidence of implementation.

[Open official reference](#)

R28 Charities Amendment Act 2024 implementation

Sections take effect through commencement orders. Do not assume all enacted provisions are in force.

[Open official reference](#)

R29 Coimisiún na Meán Online Safety Code

Regulates video sharing platform providers. Informs LCP platform selection and reporting; an ordinary charity social account is not itself a regulated platform.

[Open official reference](#)

R30 EU Digital Services Act guidance on protection of minors

Guidelines published 14 July 2025 for online platforms under Regulation EU 2022/2065. Relevant safety benchmark for LCP digital activities.

[Open official reference](#)

R31 EU Youth Strategy 2019 to 2027

Current EU youth cooperation framework, with Work Plan 2025 to 2027. Post 2027 proposals are not treated as adopted policy.

[Open official reference](#)

R32 EU Strategy on the Rights of the Child

EU policy framework adopted 2021.

[Open official reference](#)

R33 EU Recommendation on integrated child protection systems

Recommendation EU 2024/1238 of 23 April 2024. Non binding policy, not a substitute for Irish reporting law.

[Open official reference](#)

R34 EU Charter of Fundamental Rights

Articles 7, 8, 21, 24 and 26 inform privacy, equality, children and disability. Charter scope is governed by Article 51.

[Open official reference](#)

R35 HSE urgent mental health support

Emergency and referral guidance.

[Open official reference](#)

R36 HSE drugs information and support

Current health and harm reduction advice.

[Open official reference](#)

R37 Draft National Drugs Strategy 2026 to 2029

Published as a draft. A final adopted successor was not verified in this review. The 2017 to 2025 strategy is historical, not presented as current.

[Open official reference](#)

R38 Road Safety Authority

Current driver, vehicle, seat belt and child restraint guidance.

[Open official reference](#)

R39 EU AI Act current implementation guidance

Regulation EU 2024/1689 and current amendments and staged application. Recheck tool specific duties before introducing AI.

[Open official reference](#)

R40 Adult retrospective disclosures addendum April 2025

Current clarification of mandated reporting where a person who is currently a child is harmed or at risk.

[Open official reference](#)

R41 Tusla safeguarding information and training

Current training resource replacing Appendix 9 of the 2024 second edition safeguarding guide.

[Open official reference](#)

R42 Criminal Justice withholding information Act 2012

Separate Garda reporting obligations may apply. Tusla reporting does not replace these duties.

[Open official reference](#)

R43 Protection for Persons Reporting Child Abuse Act 1998

Protection for qualifying good faith reports to appropriate authorities.

[Open official reference](#)