

Policy Title	CHILD PROTECTION POLICY		
Policy Number	CC04	Version	1
Date Approved	7/8/2018	Review Date	August 2021

# **Policy Statement**

The Kensington Neighbourhood House (KNH) has a moral and legal responsibility to do all it can to ensure the health and safety of all children who attend its various programs. KNH will provide training, resources, information and guidance to support this aim.

#### KNH is committed to:

- doing all it can to ensure the health, safety and wellbeing of children at KNH are protected at all times;
- fulfilling its duty of care and legal obligations to protect children from any reasonable, foreseeable risk of injury or harm;
- ensuring that people caring for children at KNH act in the best interests of the child, and take all reasonable steps to ensure the child's safety and wellbeing at all times;
- supporting the rights of all children to feel safe, and be safe, at all times;
- developing and maintaining a culture in which children feel valued, respected and cared for;
- promoting children's development and wellbeing; and
- encouraging active participation from parents/guardians and families at KNH, and promoting a
  partnership approach and shared responsibility for children's health, safety, wellbeing and
  development.

#### This policy provides a clear set of guidelines and procedures to ensure, as far as possible:

- all children attending KNH are provided with a safe environment;
- all reasonable steps are taken by staff and volunteers to ensure the health, safety and wellbeing
  of children attending KNH;
- everyone is able to identify the indicators of a child who may need protection, and provide timely and effective intervention for children who may be at risk of abuse or neglect; and
- everyone understands and complies with their reporting obligations under the law.

This policy is divided into **six** sections, which set out the responsibilities of:

- 1. The Board and Head of KNH;
- 2. The Manager of KNH;
- 3. Staff members and volunteers; and
- 4. Everyone (including the Board, staff, students on placement, volunteers, parents/guardians, visitors, and program/activity participants).

<u>Please refer to the correct section, and the definitions in section 6, to understand your responsibilities.</u>

In addition, everyone must read and comply with the reporting requirements set out in section 5.

Note: words that are in bold italics are defined in section 6.

# 1. Responsibilities of the Board and Head of KNH

The **Board of KNH** has ultimate responsibility for ensuring that appropriate and effective internal control systems are in place so that, as much as possible, child abuse is detected and prevented. The Board must identify the potential for child abuse at KNH, and implement effective prevention strategies. The Board is also responsible for ensuring that appropriate policies and procedures and a *Code of Conduct for Employees and Volunteers Working with Children and Young People* are in place.

The Board must ensure that KNH complies with the Victorian Government's Child Safe Standards. The seven standards include:

- 1. Embedding a culture of child safety through effective leadership.
- 2. Making a commitment to child safety with a policy or statement.
- 3. Having a clear code of conduct that establishes appropriate behaviour with children.
- 4. Screening, supervision and training for staff, to reduce the risk of child abuse.
- 5. Clear processes for responding to and reporting suspected child abuse.
- 6. Identifying child abuse risks and ways to reduce them.
- 7. Empowering children to share their feedback and experiences about feeling safe.

More information about the Child Safe Standards can be found on the Department of Health and Human Services website.

The Board must comply with the reporting obligations set out in section 5.

From 1 January 2019, The *Head of KNH* must ensure that KNH has in place a system that:

- prevents the commission of *reportable conduct* by staff;
- investigates and responds to staff conduct;
- enables any person to notify the Head of KNH or the Commission for Children and Young People (the Commission) of any reportable conduct.

As soon as practicable after the Head of KNH becomes aware of a *reportable allegation* against a staff member, they must notify the Commission in writing within 3 business days.<sup>1</sup>

<sup>&</sup>lt;sup>1</sup> In accordance with the requirements in section 16M of the *Child Wellbeing and Safety Act 2005* (Vic).

# 2. The Manager of KNH

The Manager of KNH has ultimate responsibility for ensuring that:

#### **Education**

- all staff and volunteers who work with children are advised of their responsibilities under child protection legislation, and undertake appropriate training to recognise and respond to the signs of child abuse;
- clear procedures are in place for reporting suspected child abuse or neglect (refer to the reporting obligations set out in section 5);

#### **Protection of children**

- children are adequately supervised at all times, and every reasonable precaution is taken to protect children from harm, including unreasonable discipline (including corporal punishment);
- support is offered to the child and their family, and to staff in response to concerns or reports relating to the health, safety and wellbeing of a child at KNH;
- a medication record is kept for each child,<sup>2</sup> and that medication is only administered to a child with proper authorisation;
- a record of any accidents, injury, trauma or illness are recorded,<sup>3</sup> and that the parent/guardian of the child is notified as soon as practicable;
- a record of volunteer and staff Working With Children checks and the expiry dates of these Working With Children checks is maintained;
- children are only taken out of KNH's premises by parents, guardians, by persons with lawful authority, or by persons with written authorisation of a parent/guardian;

#### Safe environment

- a suitably equipped first aid kit is available and first aid is administered appropriately, and an anaphylaxis management policy is in place;
- facilities are safe, clean, in hygienic condition and in good repair;
- the occurrence of any infectious disease is disclosed to all parents/guardians as soon as practicable;<sup>4</sup>
- the personal hygiene needs of children are attended to, children have access to safe water and food, and KNH is a smoke-free environment;

#### Reporting

the Department of Education and Early Childhood Development is notified within 24 hours of a
 serious incident occurring at KNH, and the parents or guardian of the child are notified as soon as
 practicable; and

the reporting obligations set out in section 5 are complied with.

<sup>&</sup>lt;sup>2</sup> In accordance with the requirements in regulation 36(3) of the *Children's Services Regulations 2009* (Vic).

<sup>&</sup>lt;sup>3</sup> In accordance with the requirements in regulation 37(3) of the *Children's Services Regulations 2009* (Vic).

<sup>&</sup>lt;sup>4</sup> "Infectious disease" is defined in Schedule 7 to the *Public Health and Wellbeing Regulations* (Vic).

# 3. Staff Members and Volunteers

#### **Staff** are responsible for:

- ensuring that children are adequately supervised at all times, and every reasonable precaution
  is taken to protect children from harm, including unreasonable discipline (including corporal
  punishment);
- ensuring that appropriate first aid is provided to children;
- ensuring volunteers under 18 are not left alone with children;
- implementing appropriate programs and practices to support the principles of a child safe organisation in consultation with the Manager;
- protecting the rights of children and families and encouraging their participation in decisionmaking; and

#### **Both volunteers and staff** are responsible for:

- ensuring that no child is left alone at KNH (or is out of sight) with a contractor, visitor, student, parent/guardian or any other person that is not an *approved person*;
- ensuring that where KNH has been notified of a court order prohibiting an adult from contacting an enrolled child, such contact does not occur while the child is in the care of KNH;
- maintaining confidentiality of a child's personal and health information at all times;
- obtaining and maintaining a valid Working With Children check (Note: It is an offence not to have a valid Working With Children check);
- if requested, undertaking appropriate training and education on child protection, including recognising the signs and symptoms of child abuse, knowing how to respond, and understanding responsibilities and processes for reporting;
- complying with the reporting obligations set out in section 5.

#### The *Morning Childcare Team Leader* and *Children's Program Co-ordinators* are responsible for:

- working with the Manager to arrange appropriate training and education for staff, volunteers and students on child protection, including recognising the signs and symptoms of child abuse, knowing how to respond, and understanding responsibilities and processes for reporting;
- informing families of support services available to them, and of the assistance these services can provide;
- offering support to the child and their family, and to staff and volunteers, in response to concerns or reports relating to the health, safety and wellbeing of a child at KNH; and
- complying with the reporting obligations set out in section 5.

# 4. Everyone

Everyone who attends KNH, including the board, staff, students on placement, volunteers, parents/guardians, visitors, and program/activity participants, must:

- notify the Manager, supervisor or Chairperson of the Board <u>immediately</u> on becoming aware of a concern, complaint or allegation regarding the health, safety and welfare of a child at KNH, and follow the reporting requirements set out on in section 5;
- facilitate an environment wherein children feel empowered to talk about events and situations that may make them feel uncomfortable.

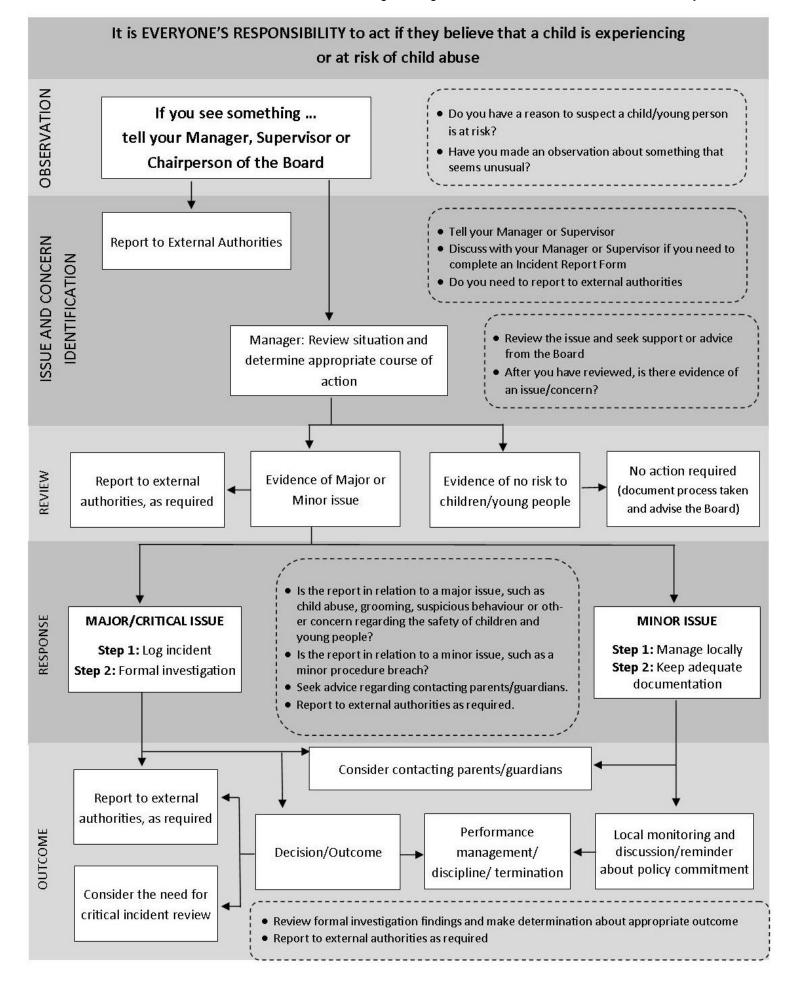
# 5. Reporting Requirements

Individuals interacting with children or young people have a duty of care to support and protect them. When there is a belief, on *reasonable grounds*, that a child/young person has been harmed or is at risk of harm, adults in contact with that child/young person are ethically bound to act to maintain their safety and wellbeing. Sometimes, there is also a legal obligation to report the concern to the appropriate authorities.

You must report any suspicions or beliefs you have that a child is at risk to the Manager, Supervisor, Chairperson of the Board, or appropriate authority.

#### **General guidelines**

- The best interests of the child should always be the primary consideration, with due regard to confidentiality and fairness to the person against whom the allegation is made.
- Children should be encouraged to approach any person at KNH to express concerns about their treatment, and should be made to feel confident that they will be taken seriously.
- Staff and volunteers must be clear about who they are expected/permitted to approach when expressing concerns.
- Records must be kept about any child safety concern or complaint, and stored and retained in
  accordance with KNH's *Privacy Policy* and *Records Management Procedure*. These records must
  contain information about the action taken, including any internal investigation and any reports
  made to statutory authorities or professional bodies.
- Everyone at KNH must be made aware of the need to report serious matters involving child protection to external authorities.
- Privacy must be maintained, and information must only be disclosed on a need-to-know basis.
- Instances of child abuse are crimes and must be reported to the police. If a child discloses any such abuse, the service must listen, respond and report to both the police and child protection authorities.
- A report to the appropriate authorities can be made even if staff and others working with children at the service do not have all the necessary information.
- Permission is not required from parents/guardians of a child where abuse is suspected, and parents/guardians do not need to be notified that a report has been made.



### 5.1 Gathering information

It is important to appropriately document your concerns about a child's wellbeing, and act sensitively when gathering information.

Action	Details
Make notes	Record your observations and the information listed below, and date and sign entries
Continue to observe	Record your observations and the information listed below, and date and sign the entries
Consult colleagues	Access support and advice from your colleagues, compare notes and brainstorm possible strategies to address areas of concern
Develop action plans based on service procedures	Understand and consult the policies and procedures of KNH when determining what action to take
Talk to other agencies about helping the family	Collaborate with or engage community health services, local government services, Child FIRST, regional DHHS/Child Protection officers and disability services. You may wish to instigate a case meeting
Talk to the child	Do this with sensitivity to the trauma and emotional difficulty experienced in admitting an abusive situation and respect for the child or young person's need for privacy and confidentiality
Talk to the parents/guardians	Only do this when it will not jeopardise the safety of the child or young person

#### 5.2 Signs or indicators of harm

Child abuse refers to an act or omission by an adult that endangers or impairs a child's physical and/or emotional health or development. Child abuse includes any and all of the following:

- **Physical abuse:** when a child suffers or is likely to suffer significant harm from any injury inflicted by an adult.
- **Sexual abuse:** is any act which exposes a child to, or involves a child in, sexual processes beyond his or her understanding or contrary to accepted community standards.
- **Emotional and psychological abuse**: is any act including confinement, isolation, verbal assault, humiliation, intimidation, infantilisation, or any other treatment which may diminish the sense of identity, dignity and self-worth.
- Neglect: the failure to provide a child with the basic necessities of life, such as food, clothing, shelter, medical attention or supervision, to the extent that the child's health and development is, or is likely to be, significantly harmed.
- **Exposure to domestic/family violence:** when children and young people witness or experience the chronic, repeated domination, coercion, intimidation and victimisation of one person by another through physical, sexual and/or emotional means within intimate relationships.

In addition to disclosure by the child concerned, or by other parties, the following are common physical and behavioural signs of abuse.

Physical Signs of abuse or neglect	bruises, burns, sprains, bites, cuts, fractures, frequent hunger, malnutrition, poor hygiene, inappropriate clothing, poisoning, internal injuries, shaking injuries or strangulation.
Behavioural signs of abuse	<ul> <li>wariness or distrust of adults</li> <li>fear of parents/guardians and of going home</li> <li>fear when other children cry/shout</li> <li>excessive friendliness to strangers</li> <li>being very passive and/or compliant</li> <li>having/claiming to have headaches and/or stomach pains</li> <li>displaying sexual behaviour that is unusual for the child's age</li> <li>frequent rocking, sucking and biting</li> <li>difficulty sleeping</li> <li>being withdrawn, aggressive and/or demanding;</li> <li>being highly anxious</li> <li>having delayed speech</li> <li>acting like a much younger child</li> <li>being tired and falling asleep.</li> </ul>

#### 5.3 How to Report

#### Who should I report to?

If you have concerns about a child, you should report these concerns to the relevant agency as soon as possible.

<b>Life threatening concerns</b> about a child	Report directly to Victoria Police on 000.
Allegations of abuse by a staff member or visitor at KNH	Report directly to Victoria Police on 000.
Reasonable belief that a child has been sexually abused	Report directly to Victoria Police on 000.  IMPORTANT: It is a criminal offence not to inform a police officer as soon as it is practicable to do so if you have information that leads you to form a reasonable belief that a sexual offence has been committed against a child under 16 by another person of or over the age of 18. <sup>5</sup>
Concerns about the safety or wellbeing of a child, where their immediate safety is compromised	Call your nearest Child Protection Service (see further details on page 11). For KNH, the West Division Intake covers the City of Melbourne, and is available on 1300 664 977 on Monday – Friday (8:45am – 5:00pm).  To report concerns <b>after hours or on weekends</b> , call the Child Protection Crisis Line on 13 12 78 (24 hours, 7 days a week and toll free within Victoria). Note: this is an emergency service for weekends and after hours only.
Concerns about the safety or wellbeing of a child, where their immediate safety is not compromised	Make a referral to Child FIRST (see further details on page 11) if, after taking into account the available information, your form a view that the concerns will have a <b>low-to-moderate impact</b> on the child, and that the immediate safety of the child will not be compromised.

The Manager of KNH must also notify the Department of Education and Early Childhood Development of a **serious incident** (see definition section 6).

#### When can I report?

- when you report, it is not necessary to prove that abuse has taken place, only to provide reasonable grounds for the belief;
- permission from parents/guardians or caregivers is not required to make a notification, nor do they need to be informed that a notification is being or has been made;
- if a notification is made in good faith, the notifier cannot be held legally liable for any consequences, regardless of the outcome of the notification;
- the identity of the notifier will remain confidential unless the notifier chooses to inform the child and/or family, or if the notifier consents in writing to the disclosure of their identity, or if the court decides that this information must be disclosed; and
- the notifier may have an ongoing role in the investigation, if required.

#### Information to include in your report

- the child's name, age and address
- the reason for believing that the injury or behaviour is the result of abuse or neglect
- the reason why the call is being made at this point in time

<sup>&</sup>lt;sup>5</sup> Crimes Act 1958 (Vic) s 327(2) (penalty is 3 years imprisonment).

- an assessment of immediate danger to the child/ren (the person making the report may be questioned regarding knowledge of the current location of the alleged abuser/s)
- a description of the injury or behaviour observed
- the current location of the child
- knowledge of other services that support or are involved with the family
- any other information about the family
- any specific details that will help the child, such as cultural background, need for an interpreter or disability support requirements.

A notification should still be made, even if the notifier does not have all the necessary information.

#### **Making a report to Child Protection**

A report to **Child Protection** should be considered if, after taking into account all of the available information, the individual forms a view that the child is in need of protection because:

- the harm or risk of harm has a serious impact on the child's immediate safety, stability and/or development;
- the harm or risk of harm is persistent and entrenched, and is likely to have a serious impact on the child's safety, stability and/or development; and/or
- the child's parents/guardians are unwilling or unable to protect the child or young person from harm.

In most circumstances, Child Protection will inform the notifier of the outcome of investigations.

#### Making a referral to Child FIRST

<u>Child FIRST</u> is a Victorian community-based intake and referral service linked with Family Services. Child FIRST ensures that vulnerable children, young people and their families are effectively linked to relevant services, including Child Protection.

A referral to Child FIRST should be considered if, after taking into account the available information, the individual forms a view that the concerns will have a **low-to-moderate impact** on the child, and that the immediate safety of the child will not be compromised. This may include circumstances when there are:

- significant parenting problems that may be affecting the child's development;
- family conflict, including family breakdown;
- families under pressure, due to a family member's physical or mental illness, substance misuse, disability or bereavement;
- young, isolated and/or unsupported families; and/or
- families experiencing significant social or economic disadvantage that may adversely impact on a child's care or development.

#### Mandatory reporting

Certain professionals and community members have a legal obligation to report to Child Protection when they believe, on *reasonable grounds*, that a child is in need or protection from harm. This includes primary and secondary school teachers and principals, medical practitioners, nurses and police (mandatory reporters). KNH does not currently employ professionals or community members who are mandated to report.

For mandatory reports, it is an offence **not** to report.

### 6. Definitions

**Approved person:** A staff member or volunteer that has been assessed by the Manager or Children's Program Co-ordinator and deemed as a suitable person to work with children (Refer to the Staff Recruitment Policy and Volunteers Policy).

**Children's Program Co-ordinators** are staff that co-ordinate programs that target children. This includes (but is not limited to) the Morning Childcare Service, Family Literacy Program, Code Club and Creative Art for Kids.

**Head of KNH:** a person prescribed by the *Child Wellbeing and Safety Regulations 2017* (Vic), or in any other case:

- the chief executive officer of KNH; or
- if there is no chief executive officer, the principal officer of KNH; or
- if there is no chief executive officer, a person, or the holder of a position, in KNH nominated and approved by the Commission for Children and Young People.

**Reasonable grounds:** A person may form a belief on reasonable grounds that a child or young person is in need of protection after becoming aware that the child or young person's health, safety or wellbeing is at risk and the child's parents/guardians are unwilling or unable to protect them. There may be reasonable grounds for forming such a belief if:

- a child or young person states that they have been abused;
- a child or young person states that they know someone who has been abused (sometimes the child may be referring to themselves);
- someone who knows the child or young person states that the child or young person has been abused;
- a child shows signs of being abused;
- a person is aware of persistent family violence or parental substance misuse, psychiatric illness
  or intellectual disability that is impacting on the child or young person's safety, stability or
  development;
- the person observes signs or indicators of abuse, including non-accidental or unexplained injury, persistent neglect, poor care or lack of appropriate supervision; or
- a child's/young person's actions or behaviour may place them at risk or significant harm and the parents/guardians are unwilling or unable to protect the child.

**Reportable Allegation:** means any information that leads a person to form a reasonable belief that a staff member has committed *reportable conduct*, or misconduct that may involve *reportable conduct*, whether or not the conduct or misconduct is alleged to have occurred within the course of the person's employment.

#### **Reportable Conduct:** means

- a sexual offence, sexual misconduct or physical violence committed against, with, or in the presence of a child;
- any behaviour that causes significant emotional or psychological harm to a child; or
- the significant neglect of a child.

Serious incident (see section 29C of the Children's Services Act 1996 (Vic)):

- the death of a child while being cared for or educated by the service;
- any incident involving injury or trauma to a child while being cared for or educated by the service requiring the attention of a registered medical practitioner or admission to a hospital; or

- if a child being cared for or educated by the service appears to be missing or otherwise cannot be accounted for or appears to have been taken or removed from the service contrary to the regulations; or
- if an incident of a kind that is prescribed as a serious incident occurs in relation to the children's service.

#### **Related Documents**

- Code of Conduct for Employees and Volunteers Working with Children and Young People
- Staff Recruitment Policy
- Risk Management Register
- Child Behaviour Guidance Policy
- Privacy Policy
- Whistle Blowers Policy
- Legislation Compliance Policy
- Volunteers Policy
- Participant Service Charter

#### **Legislation and Standards**

- Victorian Child Safe Standards
- Working with Children Act 2005 (Vic)
- Working with Children Regulations 2006 (Vic)
- Children's Services Act 1996 (Vic)
- Children's Services Regulations 2009 (Vic)
- Children, Youth and Families Act 2005 (Vic)
- Child Wellbeing and Safety Act 2005 (Vic)
- Crimes Act 1958 (Vic)
- <u>Protecting the safety and wellbeing of children and young people</u> A Joint protocol of the
  Department of Human Services Child Protection, Department of Education and training, Licensed
  Children's Services and Victorian Schools
- Education and Training Reform Act 2006