

Policy Title	CHILD PROTECTION POLICY		
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This Policy is applicable to:

- All KNH staff and volunteers, regardless of whether they work with children or not.
- All activities and programs run by KNH

Introduction

This policy sets out when and how to report and respond to incidents, suspicions, disclosures or allegations of child abuse and harm.

This policy applies to **all** disclosures of child abuse. It is not restricted to incidents within KNH programs. (For example, a child may disclose abuse occurring at home or at school to a KNH volunteer and that volunteer has a duty to act).

This policy should be used alongside the KNH Child Wellbeing and Safety Policy. It complies with the requirements of the 2022 Victorian Child Safe Standards as at date of policy approval.

<u>Purpose</u>

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

- KNH is a safe environment for all children
- Staff and volunteers take all reasonable steps to ensure the health, safety and wellbeing of children attending KNH
- Staff and volunteers are able to identify children who may need protection, and can provide timely and effective intervention for children who may be at risk of abuse or neglect.
- Staff and volunteers understand and comply with their reporting requirements under the law.

Refer to page 8 for avenues to seek child protection.

Failure to Disclose Child Sexual Abuse Offence

It is an offence to fail to disclose child sexual abuse. The offence applies to **all adults** in Victoria, not just professionals who work with children.

The <u>criminal offence for failure to disclose child sexual abuse</u> came into effect on 27 October 2014. Any adult who forms a reasonable belief that a sexual offence has been committed in Victoria by an adult against a child under 16 years of age must report that information to police unless they have a reasonable excuse. A reasonable excuse may include fear for safety or where the information has already been reported.

Policy Statement

Kensington Neighbourhood House has a zero-tolerance approach to child abuse and harm and supports the UN Convention on the Rights of the Child. All allegations, disclosures, or suspicions of harm will be dealt with promptly and consistently using the procedures detailed below.

We recognise that it is the shared responsibility of all adults to prevent harm to children. It is the responsibility of all KNH staff and volunteers to create a safe environment for children, and report all allegations immediately.

KNH will provide training, resources, information and guidance to support this aim.

Statement of Commitment to Child Safety

- Kensington Neighbourhood House is committed to child safety.
- We want children to be safe, happy and empowered.
- We support and respect all children, as well as our staff and volunteers.
- We are committed to the safety, participation and empowerment of all children.
- We have zero tolerance of child abuse, and all allegations and safety concerns will be treated very seriously and consistently with our robust policies and procedures.
- We have legal and moral obligations to contact authorities when we are worried about a child's safety, which we follow rigorously.
- Kensington Neighbourhood House is committed to preventing child abuse and identifying risks early, and removing and reducing these risks.
- We have robust human resources and recruitment practices to reduce the risk of child abuse by new and existing board members, staff and volunteers.
- We are committed to regularly training and educating our board members, staff and volunteers on child abuse risks.
- We are committed to the cultural safety of Aboriginal children, the cultural safety of children from culturally and/or linguistically diverse backgrounds, and to providing a safe environment for children with a disability.
- We have specific policies and procedures in place that support our board members, staff and volunteers to achieve these commitments.

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).

Child/Children means a person who is under the age of 18 years.

Child abuse is an act or omission by an adult that endangers or impairs a child's physical and/or emotional health or development (refer page 6 for signs and indicators of harm)

- **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.

Children's Program Co-ordinators are staff that co-ordinate programs that cater to children. This includes (but is not limited to) the Study Support Program, Code Club and Creative Art for Kids.

Grooming is predatory conduct by an adult to prepare a child, under the age of 16, to engage in sexual activity at a later time. Grooming can include communicating (including electronic communications) and/or attempts to establish a relationship or other emotional connection with the child or their parent/carer. Grooming is a criminal offence under the *Crimes Act 1958 (Vic)*.

Head of KNH a person prescribed by the Child Wellbeing and Safety Act 2005, or in any other case:

- the chief executive officer (however described) of KNH (ie. KNH Manager); 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. 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 means

- the death of a child while participating at KNH;
- any incident involving injury or trauma to a child while participating at KNH requiring the attention of a registered medical practitioner or admission to a hospital; or
- if a child participating at KNH appears to be missing or otherwise cannot be accounted for or appears to have been taken or removed from site contrary to procedures.

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.

Policy

The following sections set out the responsibilities of:

- 1. The Board and Head of KNH;
- 2. The Manager of KNH;
- 3. All staff members, volunteers, contractors and other adults attending KNH

All of the people listed above must comply with the reporting obligations on page 8

Everyone who attends KNH, including the board, staff, students on placement, volunteers, parents/guardians, visitors, and program/activity participants, must facilitate an environment wherein children feel empowered to talk about events and situations that may make them feel uncomfortable.

1. <u>Responsibilities of the Board and the Head of KNH</u>

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 2022 Victorian Child Safe Standards. The eleven standards are listed in Appendix 1.

The *Head of KNH* must ensure that KNH has in place a system that:

- takes all reasonable endeavours to prevent 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.¹

2. <u>Responsibilities of the Manager of KNH</u>

The Manager of KNH has ultimate responsibility for ensuring that:

- 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 on page 8);
- children are adequately supervised at all times, and every reasonable precaution is taken to protect children from harm, including unreasonable discipline (including corporal punishment);

¹ In accordance with the requirements in section 16M of the *Child Wellbeing and Safety Act 2005* (Vic).

- 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;
- records of all accidents, injury, trauma or illness are recorded, 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;
- Appropriate steps are taken to ensure all volunteer and staff Working With Children checks are renewed as required;
- 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;
- a suitably equipped first aid kit is available and first aid is administered appropriately;
- facilities are safe, clean, in hygienic condition and in good repair;
- Upon identification, the occurrence of any reportable infectious disease is disclosed to all parents/guardians as soon as practicable;²
- the personal hygiene needs of children are attended to, children have access to safe water and food, and KNH is a smoke-free environment;

3. <u>Responsibilities of Staff Members and Volunteers</u>

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 when working with children);
- 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;

² "Infectious disease" is defined in Schedule 7 to the *Public Health and Wellbeing Regulations* (Vic).

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 should 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. See Appendix 2 Incident Report
- Staff and volunteers 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, staff and volunteers must listen, respond and report to the police and child protection authorities as appropriate.
- 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.

Signs or indicators of harm

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	 wariness or distrust of adults fear of parents/guardians and of going home fear when other children cry/shout excessive friendliness to strangers being very passive and/or compliant

•	having/claiming to have headaches and/or stomach pains
•	displaying sexual behaviour that is unusual for the child's age
•	frequent rocking, sucking and biting
•	difficulty sleeping
•	being withdrawn, aggressive and/or demanding;
•	being highly anxious
•	having delayed speech
•	acting like a much younger child
•	being tired and falling asleep.

When to report

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

- 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
- 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.

Even if you do not have all of this information, they should still make a report.

Child's life is threatened	Report directly to Victoria Police on	
Allegation of abuse by staff, volunteer or visitor at KNH	OOO <i>Remember</i> : it is a criminal offence not to inform police as soon as possible if you have a reasonable belief that a sexual offence has been committed against a child by another person over the age of 18.	
Reasonable belief that a child has been sexually abused		
Concerns about the safety or wellbeing of a child where their	Weekdays: Call Child Protection Services West Division intake: 1300 664 977	
immediate safety IS compromised	After hours or weekends: Call the Child Protection Crisis Line: 13 12 78	
Concerns about the safety or wellbeing of a child where their immediate safety is NOT compromised	Make a referral to The Orange Door: 1800 271 046 https://services.dffh.vic.gov.au/referral-and-support-teams	
	KNH Staff and Volunteers:	
•	lent, allegation or suspicion is of concern, always err rt your concern to the Manager.	

If the concern is about the Manager, report to the Chairperson or Deputy Chairperson of the KNH Board (contact details on Wisenet)

Additional 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 The Orange Door

The Orange Door is a Victorian community-based intake and referral service linked with the Family Services. (It has replaced Child FIRST in our area). The Orange Door ensures that vulnerable children, young people and their families are effectively linked to relevant services, including Child Protection.

A referral to The Orange Door 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.

Related Documents

- Child Safety & Wellbeing Policy
- Code of Conduct for Employees and Volunteers Working with Children and Young People
- Staff Recruitment Policy
- Risk Management Register
- 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, Youth and Families Act 2005 (Vic)
- <u>Child Wellbeing and Safety Act 2005 (Vic)</u>
- Crimes Act 1958 (Vic)

APPENDIX 1: THE CHILD SAFE STANDARDS

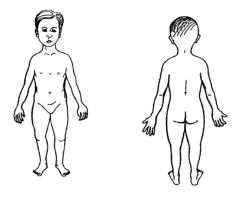
- 1. Organisations establish a culturally safe environment in which the diverse and unique identities and experiences of Aboriginal children and young people are respected and valued.
- 2. Child safety and wellbeing is embedded in organisational leadership, governance and culture.
- 3. Children and young people are empowered about their rights, participate in decisions affecting them and are taken seriously.
- 4. Families and communities are informed and involved in promoting child safety and wellbeing.
- 5. Equity is upheld and diverse needs respected in policy and practice.
- 6. People working with children and young people are suitable and supported to reflect child safety and wellbeing values in practice.
- 7. Processes for complaints and concerns are child-focused.
- 8. Staff and volunteers are equipped with the knowledge, skills and awareness to keep children and young people safe through ongoing education and training.
- 9. Physical and online environments promote safety and wellbeing while minimising the opportunity for children and young people to be harmed.
- 10. Implementation of the Child Safe Standards is regularly reviewed and improved.
- 11. Policies and procedures document how the organisation is safe for children and young people.

APPENDIX 2. INCIDENT REPORT

ACCIDENT, INJURY, INCIDENT AND ILLNESS REPORT

Child's Name:	Date of Birth:		
Date of Incident:	Time of Incident:		
Circumstances leading to accident, injury, incident or illness			
Details of accident, injury, incident or illness			
Details of accident, injury, incident or illness			

Description of injury/illness sustained (use diagram below if needed)



Treatment and/or action undertaken by staff/volunteer		
Name of Person making this report:		
Signature	Date/Time:	
Name(s) of other adults present who witnessed the incident:		
Name of Parent/Guardian notified of the incident:		
Date and time of notification:		
Parent/Guardian signature		
Post Incident Review		
Document procedures/strategies that can be put in place to minimise the risk of this type of incident recurring		
Person responsible for implementing the above:		
Date of implementation		
Management sign-off		
Signature	Date	
Name		