

# Our Lady of Hope Greenwith Campus Outside School Hours Care



---

---

## POLICY DOCUMENT

---

---

<h2>CHILD PROTECTION</h2>
---------------------------

# CHILD PROTECTION

## POLICY STATEMENT

Our service is committed to the safety, wellbeing and support of all children and young people within our Service. Management, employees and volunteers will treat all children with the utmost respect and understanding.

Our Service believes that:

- Children are capable of the same range of emotions as adults
- Children's emotions are real and need to be accepted by adults
- A reaction given to a child from an adult in a child's early stages of emotional development can be positive or detrimental depending on the adult's behaviour
- Children, who preserve, enhance and better understand their body's responses to an emotion are more able to predict the outcome from a situation and evade them or ask for help.

## PURPOSE

To identify potential risks of harm to children and young people at the Service and to implement strategies to prevent and minimise those risks. In order to ensure children's safety, our Service will perform proficiently and act in the best interest of the child. We aim to ensure that all educators at the Service are aware of the current child protection law in the provider's jurisdiction and understand their obligations under that law. We believe it is our responsibility as educators to ensure the safety welfare and wellbeing of all children. We aim to provide the children at our service with the opportunity to develop to their full potential free from harm and abuse.

## NATIONAL QUALITY STANDARDS

<b>Quality Area 2: Children's Health and Safety</b>	
<b>2.2</b>	Each child is protected
<b>2.2.1</b>	Every reasonable precaution is taken to protect Children from harm and any hazard likely to cause injury
<b>2.2.3</b>	Management, educators and Employees are aware of their roles and responsibilities to respond to every child at risk of abuse or neglect.
<b>Quality Area 7: Governance</b>	
<b>7.1</b>	Governance supports the operation of a quality service
<b>7.1.2</b>	Systems are in place to manage risk and enable the effective management and operation of a quality Service

## EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

<b>Children (Education and Care Services) National Law SA</b>	
<b>84</b>	Awareness of child protection law
<b>273</b>	Course in child protection

## RELATIONSHIP WITH OTHER POLICIES

Child Safe Environment Policy	Interactions with Children Policy
Staffing Policy	Excursion Policy
Confidentiality Policy	Philosophy Policy

## SCOPE

This policy applies to children, families, employees, management, and visitors of the service.

Under the Children and Young People (Safety) Act 2017 harm to a child includes physical and psychological harm caused by sexual, physical, mental or emotional abuse and neglect. A child is at risk of harm if the child:

- has or is likely to suffer harm
- is likely to be removed from the State by their parent/ guardian or another person for a medical or other procedure that is illegal in this State (includes female genital mutilation), or to take part in an illegal marriage ceremony or illegal criminal activity
- has been abandoned by their parents/guardians, or they're unable or unwilling to care for the child, cannot be found or are dead
- has been persistently absent from school without satisfactory explanation
- is homeless.

### **INDICATORS OF HARM**

There are many indicators of harm to children. Behavioural or physical signs which assist in recognising harm to children are known as indicators. The following is a guide only. One indicator on its own may not imply abuse or neglect. However, a single indicator can be as important as the presence of several indicators. Each indicator needs to be considered in the context of other indicators and the child's circumstances. A child's behaviour is likely to be affected if he/she is under stress. There can be many causes of stress and it is important to find out specifically what is causing the stress. Abuse and neglect can be single incidents or ongoing and may be intentional or unintentional.

#### **General indicators of abuse and neglect**

- marked delay between injury and seeking medical assistance
- history of injury
- the child gives some indication that the injury did not occur as stated
- the child tells you someone has hurt him/her
- the child tells you about someone he/she knows who has been hurt
- someone (relative, friend, acquaintance, sibling) tells you that the child may have been abused

### **NEGLECT**

Child neglect is the continuous failure by a parent or caregiver to provide a child with the basic things needed for their growth and development, such as food, clothing, shelter, medical and dental care and adequate supervision. Some examples are:

- Inability to respond emotionally to the child
- Child abandonment
- Depriving or withholding physical contact
- Failure to provide psychological nurturing
- Treating one child differently to the others

### **COMMITMENT STATEMENT**

Commitment Statement Catholic Archdiocese of Adelaide

<http://thesoutherncross.org.au/wp-content/uploads/2018/12/Catholic-Archdiocese-of-Adelaide-Commitment-Statement.pdf>

### **Indicators of neglect in children**

- poor standard of hygiene leading to social isolation
- scavenging or stealing food
- extreme longing for adult affection
- lacking a sense of genuine interaction with others
- acute separation anxiety
- self-comforting behaviours, e.g. rocking, sucking
- delay in development milestones
- untreated physical problems
- failure to thrive
- prone to illness
- unsuitable or inadequate clothing

### **PHYSICAL ABUSE**

Physical abuse is when a child has suffered, or is at risk of suffering, non-accidental trauma or injury, caused by a parent, caregiver or other person. Educators will be particularly aware of looking for possible physical abuse if parents or caregivers:

- Make direct admissions from parents about fear of hurting their children
- Have a family history of violence
- Have a history of their own maltreatment as a child
- Make repeated visits for medical assistance

### **Indicators of Physical Abuse**

- Facial, head and neck bruising
- Lacerations and welts
- Explanations are not consistent with injury
- Bruising or marks that may show the shape of an object
- Bite marks or scratches
- Multiple injuries or bruises
- Ingestion of poisonous substances, alcohol or drugs
- Sprains, twists, dislocations
- Bone fractures
- Burns and scalds

## EMOTIONAL ABUSE

Emotional abuse occurs when an adult harms a child's development by repetitively treating and speaking to a child in ways that damage the child's ability to feel and express their feelings. This may include:

- Constant criticism, condescending, teasing of a child or ignoring or withholding admiration and affection
- Excessive or unreasonable demands
- Persistent hostility, severe verbal abuse, and rejection
- Belief that a specific child is bad or "evil"
- Using inappropriate physical or social isolation as punishment
- Exposure to domestic violence

### Indicators of emotional abuse

- Feeling of worthlessness about them
- Inability to value others
- Lack of trust in people and expectations
- Extreme attention seeking behaviours
- Other behavioural disorders (disruptiveness, aggressiveness, bullying)

## SEXUAL ABUSE

Sexual abuse is when someone involves a child in a sexual activity by using their authority over them or taking advantage of their trust. Children are often bribed or threatened physically and psychologically to make them partake in the activity. Educators will be predominantly conscious of looking for potential sexual abuse if parents or caregivers are suspected of or charged with child sexual abuse or display inappropriate jealousy regarding age-appropriate development of independence from the family. Sexual abuse may include:

- Exposing the child to sexual behaviours of others
- Coercing the child to engage in sexual behaviour with other children
- Verbal threats of sexual abuse
- Exposing the child to pornography.

### Indicators of Sexual Abuse

- They describe sexual acts
- Direct or indirect disclosures
- Age-inappropriate behaviour and/or persistent sexual behaviour
- Self-destructive behaviour
- Regression in development achievements
- Child being in contact with a suspected or know perpetrator of sexual assault
- Bleeding from the vagina or anus
- Injuries such as tears to the genitalia

## **PSYCHOLOGICAL ABUSE**

Psychological harm occurs where the behaviour of the parent or caregiver damages the confidence and self-esteem of the child, resulting in serious emotional deficiency or trauma. In general, it is the frequency and duration of this behaviour that causes harm. Some examples are:

- Excessive criticism
- Withholding affection
- Exposure to domestic violence
- Intimidation or threatening behaviour.

### **Indicators of psychological abuse**

- Constant feelings of worthlessness
- Unable to value others
- Lack of trust in people
- Lack of people skills necessary for daily functioning
- Extreme attention seeking behaviour
- Extremely eager to please or obey adults
- Takes extreme risks, is markedly disruptive, bullying or aggressive
- Suicide threats
- Running away from home.

## **DOMESTIC VIOLENCE**

Domestic violence, or intimate partner violence, is a violation of human rights. It involves violent, abusive or intimidating behaviour carried out by an adult against a partner or former partner to control and dominate that person. Domestic violence causes fear, physical and/or psychological harm. It is most often violent, abusive or intimidating behaviour by a man against a woman. Living with domestic violence has a profound effect upon children and young people and may constitute a form of child abuse.

### **Indicators of Domestic Violence**

- Show aggressive behaviour
- Develop phobias & insomnia
- Experience anxiety
- Show symptoms of depression
- Have diminished self esteem
- Demonstrate poor academic performance and problem-solving skills
- Have reduced social competence skills including low levels of empathy
- Show emotional distress
- Have physical complaints.

## **SIGNIFICANT RISK OF HARM**

Significant risk of harm is where the circumstances that are causing concern are present to a significant state and warrant a response by a statutory authority, such as the SA Police Force or Community Services, regardless of a family's consent. According to Keep them Safe, Significant is not minor or trivial and may reasonably be expected to produce substantial and adverse impacts on the child's safety, welfare or wellbeing. The significance can be a result of a single act or omission or an accumulation of acts and omissions.

## **REASONABLE GROUNDS**

Reasonable grounds refer to the need to have an objective basis for suspecting that a child may be at risk of abuse and neglect based on:

- Firsthand observation of the child or family
- What the child, parent or other person has disclosed
- What can reasonably be indirect based on observation, professional training and/ or experience.

## **CHILD PROTECTION RISK MANAGEMENT STRATEGY**

The Approved Provider, Nominated Supervisor, employees and volunteers will implement a Child Protection Risk Management Strategy to ensure the health, wellbeing and safety of all children at the service, protect children from harm and protect the integrity of employees and volunteers. The Strategy includes the following components:

- Purpose (page 2)
- Code of Conduct
- Recruitment, Selection and Training Procedures for employees and volunteers which include child protection principles
- Supervision
- Relationships with children
- Procedures for managing disclosures and suspicions of harm - Reporting and Documenting Abuse or Neglect
- Procedures for Managing Breaches
- Risk Management for High Risk Activities and Special Events
- Strategies for Communication and Support

## **Code of Conduct**

All employees and volunteers are mandatory reporters and must report abuse and neglect as soon as possible if they suspect on reasonable grounds that a child is, or maybe at risk of harm. The reporter is not required to prove that abuse has occurred.

Employees and volunteers are expected to relate respectfully with all members of the education and care community. Employees and volunteers have a responsibility to report and intervene against behaviours that compromise the safety or wellbeing of children and young people. All Employees and volunteers will follow approved protective practice guidelines in their physical and social interactions with children and young people.

## Recruitment, Selection and Training Procedures

The Nominated Supervisor in conjunction with the Director will implement recruitment, professional development and training procedures for employees and where relevant volunteers to ensure no-one at the service poses a risk to children and everyone understands how to manage disclosures or suspicions of harm. Requirements include:

- job advertisements which include qualifications and skills required, and culture of child safety and protection
- job descriptions which outline level of professional skills and responsibilities
- processes (including job advertisements) which ensure employees and volunteers have clear Working With Children Checks (WWCC)
- documented induction/orientation checklists which reference child safety and protection, supervision, compliance with National Law and Regulations, NQS, Code of Conduct, policies and procedures
- annual training and development to ensure individuals are clear about their roles and responsibilities to protect children from harm, are aware of their reporting obligations, can confidently recognise the indicators of harm and understand documenting and reporting procedures.
- annual performance appraisals for employees
- regular inclusion of child protection and risk management strategy at least every 6 months in Staff meetings and annual review of written training plans which must include Child Protection matters (eg disclosures and suspicions of harm)
- providing access to relevant legislation and other resources to help employees and volunteers meet their obligations Additional.

## Supervision

Staff always need to be aware of the children and the environment. Actively supervising children in areas that they can access plays an important part in providing a safe and protective environment. Volunteers and visitors to the service should be closely monitored and not be left alone to supervise individual or groups of children.

## Relationships with children

Employees will take the time to observe individual children and to actively listen to their comments about their day and the events occurring in their lives. Attention will also be paid to children's non-verbal communication, their body language, facial expressions, creative expressions and play behaviour with other children.

## Procedures for managing disclosures and suspicions of harm

### **What is a disclosure of harm?**

A disclosure of harm occurs when someone, including a child, tells you about harm that has happened, is happening, or is likely to happen to a child.

Disclosures of harm may start with:

- I think I saw...
- Somebody told me that...
- Just think you should know...
- I'm not sure what I want you to do, but...



### **What is a suspicion of harm?**

A suspicion of harm is when someone has a reasonable suspicion that a child has suffered, is suffering, or is at an unacceptable risk of suffering significant harm. Note there may be circumstances where there is concern for a child's welfare but it does not reach the threshold to be considered a disclosure or suspicion of harm. In this case educators will connect families with Family and Child Connect with the family's consent.

The Approved Provider, Nominated Supervisor, employees and volunteers may suspect harm if:

- a child says they have been harmed
- someone else, for example another child, a parent, or an employee, says harm has occurred or is likely to occur
- a child tells them they know someone who has been harmed (it is possible that they may be referring to themselves)
- they are concerned at significant changes in the behaviour of a child, or the presence of new unexplained and suspicious injuries
- they see the harm happening.

### **Managing and recording a disclosure of harm**

If the Approved Provider, Nominated Supervisor, educators have concerns about the safety of a child they will:

- find a private place to talk
- remain calm and listen in an attentive, active and non-judgemental way
- encourage the person (including a child) to talk in their own words
- take anything a child says seriously
- allow children to be part of decision-making processes where appropriate
- ask just enough open-ended questions to act protectively without asking any leading questions which suggest an answer and could compromise later investigations
- tell the person they have done the right thing in revealing the information and they'll need to tell someone who can help keep them safe
- not try to investigate or mediate the matter themselves
- record their own observations as well as accurate details of any conversation with a parent (who may for example explain a noticeable mark on a child)
- document as soon as possible so the details are accurately captured including:
  - time, date, location and who was present
  - full details of the (suspected) abuse
  - exactly what the person said using "I said", "they said," statements
  - the questions educators asked
  - any comments educators made
  - educators' actions following the disclosure
- ensure the managements and storage of records complies with our Privacy and Confidentiality Policy
- follow our reporting procedures.

## **Managing and recording a suspicion of harm**

The Approved Provider, Nominated Supervisor, employees and volunteers will:

- remain alert to any warning signs or indicators
- pay close attention to changes in the child's behaviour, ideas, feelings and the words they use
- make written notes of observations in a non-judgemental and accurate manner, and manage in line with our Privacy and Confidentiality Policy
- assure a child that they can come to talk when they need to, and listen to them and believe them when they do
- follow our reporting procedures

## **Making a Report**

A report will be made using the following procedure preferably on the same day there is a disclosure or suspicion of significant harm, and no later than 24 hours after the disclosure or suspicion.

**The Approved Provider, Nominated Supervisor, employees and volunteers will:**

### **1. Consider whether disclosure or suspicion needs to be reported to Police**

- contact the police on 000 if there is an immediate danger to a child and intervene immediately if it is safe to do so
- contact the police where the child has been or may be the victim of a criminal offence (including where a child is at risk of significant harm outside the family)
- get clear guidance from Police about who will tell child's parents about the disclosure and who can give ongoing support

### **2. Consider whether the disclosure or suspicion must be reported to Department for Child Protection**

- make a report by phone to the Department for Child Protection on **131 478** (available 24 hours/7 days). If unsure about reporting ring the hotline for advice. Non-serious cases can be reported online. See guidelines on Department for Child Protection
- make the report with the assistance or support of the Nominated Supervisor. If the Nominated Supervisor does not follow through and make the report, employees and volunteers will make the report
- get clear guidance from the person answering about who will tell child's parents of the disclosure and who can give ongoing support

### **3. Consider whether referral is needed to family services**

- connect families with referral agencies where concerns of abuse or neglect do not require reports to Department for Child Protection or the Police. Under the legislation, supporting a family where children are at risk is important. See Department for Child Protection for details about family support services. Family consent will be sought before making referrals.

### **4. Consider whether you must notify ECEC Regulatory Authority**

- notify the Regulator about any incident, including any suspected or alleged incident, of child abuse that has occurred at the service. This includes any physical or sexual abuse that has occurred or is occurring while the child is at the service.

### **Allegations against Service Personnel**

The reporting procedure above will also be followed where there are allegations of harm against the Approved Provider, Nominated Supervisor, employees or volunteers.

The Nominated Supervisor will:

- complete an Incident, Injury, Trauma and Illness Record and notify the Regulatory Authority within 24 hours of making the report
- provide appropriate support for any employee/volunteer who has an allegation made against them
- protect the identity of employees/volunteers in relation to unsubstantiated complaints
- review the person's duties, and if they continue to interact with children, ensure they are appropriately supervised at all times
- seek legal advice about restricting that person's work activities if relevant.

### **Confidentiality**

It is important that individuals keep a Report confidential while the matter is investigated. Employees or volunteers will not discuss the Report with people who are not involved or inform the person they have made the complaint about, to ensure the matter can be investigated without prior knowledge and contamination of evidence.

### **Safeguards for reporters**

Reports made to the Department of Child Protection or Police are kept confidential.

Under the Children and Young People (Safety) Act 2017 if the report is made in good faith:

- the report will not breach confidence or standards of professional conduct
- the report can't incur civil or criminal liability
- the identity of the person making the report is protected. (However, the Court may grant leave to reveal the person's identity if the evidence is critically important.)

A report is also an exempt document under the Freedom of Information Act 1991.

### **Support after disclosure**

The Nominated Supervisor will provide assistance to access appropriate support and counselling services for all parties affected by a disclosure of harm.

### **Procedures for Managing Breaches**

All employees and volunteers working with children have a duty of care to support and protect children which is breached if a person:

- does something that a reasonable person wouldn't do in a particular situation
- fails to do something that a reasonable person would do in the circumstances
- acts or fails to act in a way that causes harm to someone owed a duty of care.

In relation to our Child Protection Risk Management Strategy, a breach of that duty of care includes any action or inaction by an employee, volunteer or child that fails to comply with any of the eight components of the Strategy.

Employees, volunteers or families should report the breaches to the Nominated Supervisor who will manage an investigation into the breach in a fair, unbiased and supportive manner in line with our Grievance Policy and Procedure.

For example:

- those involved in the breach will be able to provide their version of events
- matters discussed in relation to the breach will be kept confidential
- an appropriate outcome will be decided
- everyone affected will receive a clear written statement (letter, email or SMS) of the outcome
- records will be kept about the details of the breach, including the versions of all parties and the outcome of the breach.

Depending on the nature of the breach outcomes may include:

- emphasising the relevant component of the Child Protection Risk Management Strategy, for example, the Code of Conduct
- providing closer supervision
- professional development and training
- mediating between those involved in the incident (where appropriate)
- disciplinary procedures if necessary
- reviewing current policies and procedures and developing new policies and procedures if necessary
- termination of employment.

### **Risk Management Plan for High-Risk Activities and Special Events**

The Nominated Supervisor and educators will analyse the risk of 'harm' to children for all relevant events including purchase of new equipment as well as high risk activities where there is an increased risk of harm to children for example:

- water-based activities
- special events like service concerts and family information days where there will be a large number of visitors or people present
- events or activities where visitors will be present
- excursions
- playground renovations
- activities using dangerous equipment

The Nominated Supervisor and educators will:

1. Identify all the elements of an activity (eg objectives, location, participants, transportation, toileting/change room procedures, appropriate supervision and adult to child ratios, photography policy, managing medications, managing illness and injury, procedure applying to visitors, physical environment)
2. Identify the risks
3. Analyse the likelihood and consequences of the risks
4. Evaluate the level of risk (eg low, moderate, high, extreme)
5. Implement strategies to eliminate or minimise the risk
6. Review the activity to determine how it could be improved

### **Strategies for Communication and Support**

The Nominated Supervisor will implement the following to ensure families, employees, volunteers and children are aware of our Child Risk Management Strategy:

- advise families via service newsletters, emails and information evenings about the reasons for and components of our risk management strategy, where they can access our Child Protection Policy and Risk Management Strategy, and that we welcome feedback about the Policy/Strategy
- provide written information about our risk management strategy during enrolment and orientation and include in Parent Handbook
- regularly include the reasons for and components of our risk management strategy in staff meetings and include in Staff Handbook
- ensure educators talk to children about the Strategy where appropriate and provide any feedback to the Nominated Supervisor
- display posters about child protection issues, including safe and supportive environments
- include child protection issues and our risk management strategy in employees' performance and training plans
- ensure educators regularly include learning about appropriate child protection issues in the Curriculum, including how to keep themselves safe, and what to do if they feel unsafe
- make available to employees and families relevant resources

**SOURCES**

Children and Young People (Safety) Act 2017  
Child Safe Environments: Department of Education  
Child Safety (Prohibited Persons) Act 2016  
Child Safety (Prohibited Persons) Regulations 2019  
Department for Child Protection  
Education and Children’s Services Regulations 2020  
Education and Children’s Services Act 2019  
Department of Human Services – Child safe Environment  
Education and Care Services National Law and Regulations (2011)  
CESA Reporting Harm of Children and Young People Procedure (August 2020)  
Mandatory Reporting Guide Version 1.0 (Updated August 2018)  
Protective Practices for staff in their interactions with children and young people (2<sup>nd</sup> Edition, revised 2019)  
Managing allegations of sexual misconduct in SA education and care settings  
Catholic Archdiocese of Adelaide Safeguarding Children and Young People Policy

\_\_\_\_\_  
**(Chairperson)**

\_\_\_\_\_  
**(Date Reviewed)**

\_\_\_\_\_  
**(Principal)**

\_\_\_\_\_  
**(Date Reviewed)**