



Child Protection Policy and Procedures

National Quality Standard

Element	2.2.3	Child protection - Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.
	4.2.2	Professional standards - Professional standards guide practice, interactions and relationships.
	5.1.1	Positive educator to child interactions - Responsive and meaningful interactions build trusting relationships which engage and support each child to feel secure, confident and included
	5.1.2	Dignity and rights of the child - The dignity and rights of every child are maintained
	5.2.2	Self-regulation - Each child is supported to regulate their own behaviour, respond appropriately to the behaviour of others and communicate effectively to resolve conflicts
	7.1.2	Management Systems - Systems are in place to manage risk and enable the effective management and operation of a quality service
	7.1.3	Roles and responsibilities - Roles and responsibilities are clearly defined, and understood, and support effective decision making and operation of the service
	7.2.1	Continuous improvement - There is an effective self-assessment and quality improvement process in place
	7.2.3	Development of professionals - Educators, co-ordinators and staff members' performance is regularly evaluated and individual plans are in place to support learning and development

National Laws

Section	162A	Child protection training
	165	Offence to inadequately supervise children
	166	Offence to use inappropriate discipline
	167	Offence relating to protection of children from harm and hazards
	170	Offence relating to unauthorised persons on education and care service premises
	174	Offence to fail to notify certain information to Regulatory Authority
	175	Offence relating to requirement to keep enrolment and other documents

Aim

The *Child Protection Policy and Procedures* sets out our service's obligations, plans and procedures to protect children from any type of harm, abuse or neglect. It expresses our commitment to, and processes for, maintaining a child safe culture and environment (online and physical). It provides guidance about how our service will identify, manage and respond to risks, and suspected or actual cases, of harm, abuse or neglect - including when and how to report to the Police and other authorities.

Definitions



“Abuse of a child” - is maltreatment that endangers a child’s safety, wellbeing and development and includes physical or sexual abuse, or emotional abuse which causes significant harm to their wellbeing or development including abuse as a result of domestic violence. Source: [Children and Young People Act 2008](#)

“Complaint” - expression of dissatisfaction made to or about an organisation, related to its products, services, staff or the handling of a complaint, where a response or resolution is explicitly or implicitly expected or legally required. Source: [ANZ Standard Guidelines for complaint management in organisations – AS/NZS 10002:2014](#)

“Complaints handling” - effective resolution of problem before it becomes worse; and providing a remedy. Source: [Commonwealth Ombudsman – Better practice complaint handling guide.](#)

“Exploitation of a child” - includes sexual abuse and any other forms of exploitation (such as using a child for financial gain, labour or personal advantage). It also includes involving a child as a participant or spectator in sexual acts. Source: [State/territory based child protection legislation](#)

“Grievance” - see “Complaint” definition

“Grooming” - generally refers to behaviour that makes it easier for a perpetrator to procure a child for sexual activity. For example, a perpetrator might build a relationship of trust with the child, and then seek to sexualise that relationship (for example, by encouraging romantic feelings or exposing the child to sexual concepts through pornography). Grooming is a subtle and gradual process used by perpetrators, who could be adults or children themselves. Note: grooming is a criminal offence in most states and territories. Source: [Recognising signs of child abuse – Australian Government’s Royal Commission into Institutional Responses to Child Abuse](#)

“Harm” - physical or mental injury; hurt. Source: [ACECQA Policy Guidelines: Emergency and Evacuation](#)

“Harmful sexual behaviours” - a general term to describe behaviour in children under 18 years that fall across a spectrum of sexual behaviour problems, including those that are problematic to the child’s own development, as well as those that are coercive, sexually aggressive and predatory towards others. The term ‘harmful sexual behaviours’ recognises the seriousness of these behaviours and the significant impact they have on victims, but is not contingent on the age or capacity of a child. Source: [Final Report – Royal Commission into Institutional Responses to Child Abuse](#)

“Hazard” - a danger or risk, even though often foreseeable. Source: [ACECQA Policy Guidelines: Emergency and Evacuation](#)

“Investigation” - A formal and systematic inquiry to establish facts about a complaint by collecting, documenting, examining and evaluating evidence. An investigation is not an end in itself. Throughout an investigation, the investigator should keep an open mind about the possible outcomes of the investigation, such as education, compliance action, or a decision not to pursue the matter. Source: [Guide to the NQF - Regulatory Authority Powers – Monitoring, compliance and enforcement](#)

“Mandatory reporting” - the legislative requirement for selected classes of people to report suspected child abuse and neglect to government authorities. Source: [State/territory based child protection legislation](#)

“Neglect” - is a failure to provide the child with the necessities of life, e.g., the basic needs for his or her physical, emotional/psychological and intellectual development. Source: [Children and Young People Act 2008](#)

“Online grooming” occurs when adults make contact with children and adolescents online, with the intention of building a trusting relationship for the purpose of sexually abusing or exploiting them. Source: [Recognising signs of child abuse – Australian Government’s Royal Commission into Institutional Responses to Child Abuse](#)



“Personal information” - information or an opinion about an identified individual, or an individual who is reasonably identifiable: (a) whether the information or opinion is true or not; and (b) whether the information or opinion is recorded in a material form or not. Source: [Privacy Act 1988 \(Cth\)](#)

“Reasonably believes” - believes on grounds that are reasonable in the circumstances. You have a “reasonable belief” if a reasonable person in the same circumstances as you would believe something for the same reasons you believed it. See also “reasonable grounds”. Source: [Schedule 3, Child Protection Act 1999 \(Queensland\)](#)

“Reasonable grounds” - suspect that a child may be at risk of significant harm based on your observations of the child or family; what has been reported to you about a child or family; or what can reasonably be inferred based on observation, professional training and/or experience Source: [State/territory based child protection legislation](#)

“Reasonably suspects” - suspects on grounds that are reasonable in the circumstances. Source: [Schedule 3, Child Protection Act 1999 \(Queensland\)](#)

“Reportable conduct” - certain organisations or entities have legal obligations under Reportable Conduct Schemes. Under these Schemes, certain organisations or entities are required to notify and investigate certain allegations (reportable allegations) of abuse involving a child, when the allegation is against someone they employ, engage or contract in circumstances outlined by the legislation. Source: [State/territory based child protection legislation](#)

“Risk of significant harm” - means circumstances that are causing concern for the safety, welfare or wellbeing of the child or young person to a significant extent which means the concern is sufficiently serious to warrant a response by a statutory authority irrespective of a family’s consent. What is significant is not minor or trivial and may reasonably be expected to produce a substantial and demonstrably adverse impact on the child or young person’s safety, welfare or wellbeing. The significance can result from a single act or omission or an accumulation of these. Source: [State/territory based child protection legislation](#)

“Risk” - exposure to the chance of injury or loss; a hazard or dangerous chance. Source: [ACECQA Policy Guidelines: Emergency and Evacuation](#)

“Risk assessment” - assessing the risk means working out how likely it is that a hazard will harm someone and how serious the harm could be. Source: [ACECQA Risk assessment template: Excursions](#)

“Sexual abuse of a child” - any act that exposes a child or young person to, or involve a child or young person in, sexual activities that: they do not understand; they do not or cannot consent to; are not accepted by the community; are unlawful.

“Well-being” - sound wellbeing results from the satisfaction of basic needs – the need for tenderness and affection; security and clarity; social recognition; to feel competent; physical needs and for meaning in life. It includes happiness and satisfaction, effective social functioning and the dispositions of optimism, openness, curiosity, and resilience. Source: [ACECQA Guide to the NQF](#)

“Working directly with children” - a person is working directly with children at a given time if at that time the person is: physically present with the children; and is directly engaged in providing education and care to the children. Source: [National Regulations](#)

“Working with children / Working with vulnerable people check (WWCC/WWVP)” - a notice, certificate or other document granted to, or with respect to, a person under a working with children law to the effect that: the person has been assessed as suitable to work with children; or there has been no information that if the person worked with children; the person would pose a risk to the children; or the person is not prohibited from attempting to obtain, undertake or remain in child-related employment. Source: [National Law](#)



Implementation

The safety, health and well-being of children is a shared responsibility and is the number one priority for all staff, students and volunteers at our service. We have zero tolerance for any form of harm or abuse to children and are committed to acting in children's best interests, and in accordance with laws and regulations.

Child safety is relevant to most of our service's operations and program and, therefore, it is embedded in most of our policies and procedures. In particular, this *Child Protection Policy and Procedures* should be understood and used alongside our *Child Safe Policy*, which explains how our operations, policies and procedures meet the *National Child Safe Principles*.

This *Child Protection Policy and Procedures* covers the following areas:

- The Code of Conduct
- Risk assessments Indicators of harm, abuse and neglect (list of indicators at **Appendix A**)
- Child Protection procedures:
 - Child Safe Recruitment Procedure
 - Procedures for managing and recording incidents, disclosures and suspicions of harm, abuse or neglect (at **Appendix B** and forms at **Appendix C**)
 - Procedures for managing harmful sexual behaviour in children (at **Appendix B**)
 - Procedure for making a report (at **Appendix D** – covers our legal obligations in relation to child protection)
- Confidentiality, record keeping, safeguards for reporters and support
- Information sharing, training and monitoring
- Roles and responsibilities

Code of Conduct

Our service upholds the *Code of Conduct* (located our *Educator and Management Policy*) for employers, educators, volunteers, students, families and children to ensure the safety and wellbeing of children.

The *Code of Conduct* describes what is acceptable behaviour towards children. We expect a high level of professionalism, ethical behaviour and standards at our service, and we will act upon any behaviour that does not meet our expectations.

Risk assessments

(Note - certain activities may have specific regulatory requirements for risk assessments, so other policies and procedures should be implemented alongside this one, e.g., *Excursion Policy and Procedure, Safe Arrival of Children Policy and Procedure, Transport Policy and Procedure*).

The approved provider must ensure that regular risk assessments are conducted to identify risks of any activity or environment (physical and online) that could result in harm, neglect or abuse (including grooming and sexual abuse) of children. Our service will collaborate with staff and, where possible, families on risk assessments. We may seek feedback via newsletters or survey forms, or during parent information sessions.

Risk Assessment areas to consider



Situational risk

- The physical and online environment of the service itself, for example:
 - Whether it allows for adults to be alone with children, unseen by others
 - Whether educators have a 'line of sight'
 - Location/layout of children's toilets and nappy changing areas
 - Location/layout of sleep and rest areas
 - Playgrounds and play equipment
 - Temporary renovations
 - Photography, phone, tablet and social media usage
 - Heavy furniture, windows, stairs, outdoor environment
- Specific activities (e.g., nappy changing, using the toilet, rest and sleep, special events with visitors, transitions, travelling to other care and education services, use of dangerous equipment, outdoor vs indoor play, excursions, managing medications, managing illness and injury, emergencies)
- The type of contact between an adult and a child during an activity (e.g., does it involve physical contact as in changing a nappy or comforting a child, could the interaction result in an emotional dependence on adults?)
- Supervision arrangements (e.g., ratios, during different activities, natural lines of sight – note, this should be balanced with a child's right to privacy and their need for risky play which allows them to temporarily 'disappear').

Vulnerability risk

- Children who, in general, are more vulnerable to the risk of harm or abuse are:
 - From Aboriginal backgrounds
 - With disability
 - Newly arrived in Australia
 - From culturally and linguistically diverse backgrounds
 - Identifying as LGBTIQ/non-binary/gender diverse/unsure of sexuality or gender
 - From trauma, abuse or neglect backgrounds
 - Living out of home, including in foster care
 - Experiencing poor mental or physical health.

Propensity risk

- The profile of adults who are involved with children at our service
- Types of people who are attracted to working in the care and education sector
- How inappropriate behaviour is dealt with
- The attitudes of adults towards children in our service.

Institutional risk

- Internal structures that may lead to abuse or harm (e.g., strong hierarchical structure, authoritarian management, close-knit relationships – deep friendships or families)
- Culture (e.g., attitudes towards children, valuing reputation above the safety of children, inclusive or discriminatory)
- Attitudes about whose job it is to be responsible for child safety.



Indicators of harm, abuse and neglect and children

Behavioural or physical signs which assist in recognising harm to children are known as indicators. A list of indicators of harm, abuse (including sexual abuse and grooming) and neglect are at **Appendix A**. The list is meant as 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.

Remember, also, that 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. Harm, abuse and neglect can be single incidents or ongoing, and may be intentional or unintentional.

Child Protection Procedures

Child Safe Recruitment Procedure

We do not rely solely on clear/not prohibited Working with Children Checks. Our human resource practices support the recruitment and ongoing management of employees who implement strong child safe practices every day. For example:

- Job descriptions set clear expectations about child safety, and we implement probationary periods
- Interview questions establish the suitability of staff and their attitudes / practices / experience regarding child safety
- We provide ongoing and regular child protection training
- We conduct a Working With Children Check for paid staff, volunteers and students
- We maintain a Working With Children Check register
- Individual staff, volunteers and students records include their full name, address and date of birth, and the identifying number of their current Working With Children Check and the expiry date of the Check (as required under the *Regulations*)

See also our *Staffing Arrangements Policy*, which contains qualification requirements, including the relevant state/territory requirements for Working With Children Checks, and supervision procedures with a child safety focus.

Procedures for responding and recording incidents, disclosures and suspicions of harm, abuse or neglect

Harm, abuse or neglect can be:

- Witnessed
- Disclosed by a child, parent, staff member or community member. A disclosure of harm, abuse or neglect occurs when someone tells you about harm, abuse or neglect that has happened, is happening, or is likely to happen to a child. A disclosure can also be about a child harming or abusing another child
- Suspected - a suspicion of harm, abuse or neglect is when someone has a reasonable suspicion that a child has suffered, is suffering, or is at an unacceptable risk of suffering harm, or abuse or neglect. A suspicion can also be about a child harming or abusing another child.

If harm, abuse (including sexual abuse and grooming), neglect of a child is witnessed, disclosed by someone or reasonably suspected, the nominated supervisor and other staff will:

- Give protection if a child is in immediate danger and contact 000
- Follow the *Procedures for disclosures and suspicions of harm, abuse or neglect* at **Appendix B**
- Record incidents using the site based proforma
- Record disclosures and suspicions



- Follow the *Procedure for making a report* at **Appendix D**
- Manage risks to children/adults at our service such pending the outcome of any investigations, e.g.,:
 - Stand down the subject of an allegation or conviction
 - Restricting the subject's access to children or only allowing them to have supervised access
 - Restricting their access to sensitive computer systems, files or facilities.

Procedure for managing harmful sexual behaviour in children

Some children may exhibit harmful sexual behaviour while they are in our care. This behaviour can be self-directed and/or directed at other children and adults. It can extend to sexually abusing other children. Our service is required by law to have policies and procedure in place for dealing with children exhibiting harmful sexual behaviour.

“Harmful sexual behaviours in children” is a broad term that is used to describe a range of concerning and serious sexual behaviour displayed by children and young people. The behaviour may be:

- Coercive or involve bribery and/or aggression
- Clandestine and/or aggressive/predatory
- Abnormal for the child's age/developmental stage
- Compulsive, excessive and/or degrading
- Present when it involves another child that is significantly different in age/developmental to the individual
- Self-directed or directed at others

Children and young people display a range of sexual behaviours. Most of the time these are age-appropriate, and generally consistent with the child's developmental stage and the context in which they are growing up (e.g., living in a society where they are regularly exposed to sexualised imagery used in popular culture or in marketing, online material, and the influences of a child's religious/cultural backgrounds etc). Along the spectrum of behaviours are those that are concerning and those that are serious. Examples of behaviours across the spectrum is available in the South Australian Government's [Guide to problem sexual behaviour in children and young people](#).

Allegations of harmful sexual behaviour in children require an immediate response.

If a child is exhibiting harmful sexual behaviour, and/or if the child is suspected of sexually abusing another child, the nominated supervisor and other staff will:

- Give protection to any child in immediate danger and contact 000
- Follow the *Procedures for managing harmful sexual behaviour in children* at **Appendix B**
- Record incidents using the form available in our *Incident, Injury, Trauma and Illness Policy*
- Record disclosures and suspicions using the templates at **Appendix C**
- Follow the *Procedure for making a report* at **Appendix D**
- Manage risks to children/adults at our service such pending the outcome of any investigations, e.g.,:
 - Suspend/exclude the child from the service
 - Restricting the child's contact with other children or only allow them to have supervised contact
 - Restricting their access to sensitive computer systems, files or facilities (if applicable).

Procedure for making a report



Children's services have obligations under the law to act and report in relation to child protection matters. The Procedure for making a report at **Appendix D** describes our obligations and the steps we must take when we report to the relevant authorities. It covers:

- Mandatory Reporting to the child protection authority
- Reporting to Police
- Making a referral to family services
- Additional actions for dealing with allegations against service personnel

Unless they are inconsistent with our obligations under the law, reports and investigations must be conducted in line with our service's policies and procedures. For example: all child safe policies/procedures; *Privacy and Confidentiality Policy*; *Record Keeping and Retention Policy*; *Staffing Arrangements Policy and Educator and Management Policy*; *Grievance Policy and Procedure*.

Confidentiality, record keeping, safeguards for reporters and support

Confidentiality

Any information our service gathers during - records, identities and reports – should be kept confidential and only be disclosed if required by law or when it is required to ensure the safety and well-being of a child (see information above about exchanging information). Staff must follow directions from Police and child protection authorities and ensure they comply with all relevant legislation, including the *Privacy Act 1988 (Cth)*.

Staff should not promise absolute confidentiality to anyone involved in a disclosure or suspicion of harm, abuse or neglect (including children) as we may have disclose personal information in certain circumstances.

Record keeping

We are committed to keeping full and accurate records about any incidents, responses and decisions that relate to child safety and well-being, including sexual abuse. We all support individuals' rights to access, amend and annotate their own records, except if in doing so they are breaking the law or breaching one of our other policies.

It is common for children to delay reporting or pursuing cases of abuse or harm. Therefore, all records that relate to child safety and well-being – e.g., suspicions, disclosures, allegations, convictions, reports, complaints, grievances, investigations, complaints handling, breaches, disciplinary actions, referrals, exchanges of information, risk assessments, policies and procedures - will be kept, maintained and stored for the best practice period of a minimum of 45 years (and longer if possible).

Online records will be stored password protected file and physical records in a secure cabinet. Access will only be granted on a 'need to know' basis and in line with our other relevant policies.

Safeguards for reporters

Under the Children and Young People (Safety) Act 2017, reports made to the Department for Child Protection or Police are kept confidential and there are safeguards in place to protect the identity of the person making a report. The person who makes reports also cannot be held to have breached any professional ethics or acted unprofessionally.



Support after disclosure

Our service will help all parties affected by a disclosure of harm or abuse to access appropriate support and counselling services.

Information sharing, training and monitoring

Sharing information, training and checking compliance are key factors in ensuring our service has a child safe culture.

Educating children about protective behaviour

Our service promotes a culture of participation and inclusion, viewing all children as active participants and decision makers as they seek to include the interests, ideas, strengths, culture, abilities of each child). Educators regularly empower children to take part in discussions about their safety and decisions that affect them, and value their ideas, suggestions and feedback.

Educators will educate children about protective behaviour and include child protection issues in the curriculum. For example, they will intentionally teach children:

- About acceptable/unacceptable behaviour, and appropriate/inappropriate contact in a manner suitable to their age and level of understanding
- That they have a right to feel safe at all times
- To say 'no' to anything that makes them feel unsafe
- The difference between 'fun' scared that is appropriate risk taking and dangerous scared that is not ok
- To use their own skills to feel safe
- To recognise signs that they do not feel safe and need to be alert and think clearly
- That there is no secret too awful, no story too terrible, that they can't share with someone they trust
- That educators are available for them if they have any concerns
- To tell educators of any suspicious activities or people
- To recognise and express their feelings verbally and non-verbally
- That they can choose to change the way they are feeling.

Educators believe that:

- Children are capable of the same range of emotions as adults
- Children's emotions are real and need to be accepted by adults
- An adult's response to a child during their early emotional development can be hugely positive or detrimental depending on the adult's reaction
- Children are very in touch with their bodies' reactions to their emotions
- Children who better understand their body's response to an emotion are more able to foresee the outcome of a situation and avoid them or ask for help.

Sharing information with children, families and the community

Educators constantly build partnerships with families and community members, which provides many opportunities for discussion and feedback about safety practices. Staff encourage families to contribute to decisions about our practices and their child's learning through a range of ways, including questionnaires, information nights, face to face conversations and an 'Open Door' policy. Families know they can locate service policies and procedures at the signing in table, and are asked for feedback when we review our policies.



Our response to child safety, including in cases of harm, suspected harm or complaints, is culturally sensitive. We engage with families and community members to improve our understanding of cultural practices and inform our responses.

Staff, volunteers and family can access any of the risk assessments we conduct.

Staff and volunteer training

We include the *Child Protection Policy and Procedures* (and all other associated policies and procedures) in staff, student and volunteer inductions (and in the Staff Handbook) and ensure all relevant staff receive practical training in relation to the requirements, including about how to identify and manage risks.

Staff, volunteers and students who work directly with children regularly learn about child protection laws and their obligations under them, as well as our service's practices. The nominated supervisor and staff who are in day-to-day charge are required by law to have successfully completed child protection training. The nominated supervisor implements an ongoing training program tailored to each staff member's needs and goals, which are identified through regular performance reviews.

Monitoring compliance and managing breaches

The approved provider and nominated supervisor will monitor staff to ensure they are following our policies and procedures for child protection and safety. They will act quickly to fix any issues and will give staff any extra support or training they need to comply. Volunteers and students are also required to comply with all service policies and procedures and the Code of Conduct.

Staff, volunteers and students at our service have a duty of care and must support and protect children. Their duty of care 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.

A breach of duty of care also includes any action or inaction by an employee, volunteer or student that fails to comply with this *Child Protection Policy and Procedures*.

Breaches should be reported to the approved provider or nominated supervisor, who will manage an investigation in a fair, unbiased and supportive manner in line with our *Grievance Policy and Procedure*.

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 Policy and Procedures*, 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

Roles and responsibilities

All staff, volunteers, students and families must understand our *Child Protection Policy and Procedures* and their role and responsibilities in keeping children safe and cared for.

Responsibilities	Role
Ensure our service meets its obligations under the <i>Education and Care Services National Law and Regulations</i> , including to take every reasonable precaution to protect children from harm and hazards likely to cause injury, and to ensure that children are adequately supervised at all times they are in our care.	Approved Provider Nominated Supervisor
Ensure that no child in our care is subjected to any form of corporal punishment or any discipline that is unreasonable	Approved Provider Nominated Supervisor
Ensure that the nominated supervisor/s and staff who are in day-to-day charge and anyone working directly with children at the service have successfully completed child protection training.	Approved Provider
Ensure that nominated supervisors, staff who work directly with children, volunteers and students are aware of child protection laws, how they apply and any obligations they have under them.	Approved Provider
Keep staff records in accordance with the <i>Regulations</i> , including evidence of child protection training and evidence of current working with children/vulnerable people checks.	Approved Provider
Not allow anyone who is an unauthorised to be at our service unless they are being directly supervised by an educator or another staff member.	Approved Provider Nominated Supervisor
Not allow educators who are under 18 years old to work alone and ensure that they are adequately supervised by an educator who is over 18 years old.	Approved Provider
Ensure that our service has policies and procedures in place for a child safe environment that address specific areas set out in <i>the National Regulations</i> - i.e., among other relevant policies and procedures, this <i>Child Protection Policy and Procedures</i> and the <i>Child Safe Policy</i> need to be in place.	Approved Provider
Take reasonable steps to ensure that nominated supervisors, staff and volunteers follow, and can easily access, the <i>Child Protection Policy and Procedures</i> , including by: <ul style="list-style-type: none"> • Providing information, training and other resources and support • Providing this <i>Policy and Procedures</i> at induction • Clearly defining and communicating roles and responsibilities for implementing this <i>Policy and Procedures</i> • Communicating changes to routines and policies • Monitoring and auditing of staff practices (including through spot checks) and addressing non-compliance quickly • Regularly reviewing this <i>Policy and Procedures</i> The <i>Policy and Procedures</i> must also be available for inspection.	Approved Provider (ultimate responsibility) Nominated Supervisor
Notify families at least 14 days before changing this <i>Child Protection Policy and Procedures</i> if the changes will: <ul style="list-style-type: none"> • Affect the fees the charged or the way they are collected; or • Significantly impact the service's education and care of children; or • Significantly impact the family's ability to utilise the service. 	Nominated Supervisor Approved Provider
Ensure all incident, injury, trauma and illness records are confidentially stored until the child is 25 years old, in accordance with our <i>Record Keeping and Retention Policy</i> . Records relating to child abuse should be stored for at least 45 years from the date the record was created.	Approved Provider (ultimate responsibility) Nominated Supervisor



Implement the <i>Child Protection Policy and Procedures</i> .	Nominated Supervisor
Be aware of legal obligations, and understand and follow the <i>Child Protection Policy and Procedures</i> .	Educators Volunteers
<ul style="list-style-type: none"> Ensure risk assessments are conducted in line with this <i>Policy and Procedures</i>, other relevant policies and procedures and <i>Regulations</i>. Risks of harm, abuse and neglect must be identified and minimised or eliminated. Ensure staff are aware of and can access/use the risk assessments to manage risks and ensure the safety of children. Keep a record of all risk assessments conducted. 	Approved Provider (ultimate responsibility) Nominated Supervisor
Ensure that procedures are appropriate in practice to our service, identify risks and hazards, and any potential improvements to make to the <i>Child Protection Policy and Procedures</i> . Report any issues to the appropriate staff member (either approved provider, nominated supervisor, or educators).	Approved Provider Nominated Supervisor Educators and Other Staff Families
<ul style="list-style-type: none"> Ensure our service's premises, furniture and equipment are safe, clean and in good repair. Ensure all equipment and furniture meets relevant Australian Standards and other product safety standards and guidelines, and remain up-to-date on product recall notices (see productsafety.gov.au). Ensure that the indoor environment is hygienic and comfortable (not limited to being well ventilated and free from cigarette/tobacco smoke, with adequate natural light, and appropriately heated/cooled). 	Approved Provider (ultimate responsibility) Nominated Supervisor
Ensure that the layout/design of the premises allows for supervision but with regard to rights and dignity of children in our care.	Approved Provider
<p>Ensure our service responds in accordance with regulations, and our policies and procedures, if any incidents occur (see also our <i>Incident, Injury, Trauma and Illness Policy</i>).</p> <p>Ensure our service meets its reporting obligations under state/territory/national laws and regulations (see 'Procedure for making a report' section in this <i>Policy</i>)</p>	Approved Provider (ultimate responsibility) Nominated Supervisor
Be aware of requirements, and follow our policies and procedures, if any incidents (see also our <i>Incident, Injury, Trauma and Illness Policy</i>).	Nominated Supervisor Educators and Other Staff Families

Sources

Children and Young People (Safety) Act 2017
 Child Safety (Prohibited Persons) Act 2016
 Child Safety (Prohibited Persons) Regulations 2019
 Department for Child Protection
 Education and Care Services National Law and Regulations
 National Principles for Child Safe Organisations
 Keeping Children and Young People Safe -: a shared community responsibility: ACT Community Services
 National Quality Standard
 QLD Blue Card Services: Child and Youth Risk Management Strategy Toolkit
 Complaint Handling Guide: Upholding the rights of children and young people, Australian Government, National Office for Child Safety
 National Child Safe Standards
 South Australian Government's [Guide to problem sexual behaviour in children and young people](#)

Review



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The *Child Protection Policy and Procedures* will be reviewed annually and when there are changes that may affect child safety, including after any responses to disclosures or suspicions of harm. The review will include checks to ensure the *Policy and Procedures* reflects current legislation, continues to be effective, or whether any changes and additional training are required. The review will be conducted by approved provider, nominated supervisor/s, employees, families and committee members.

Reviewed: March 2024

Date for next review: March 2025



Appendix A

Indicators of harm, abuse and neglect

There are many indicators of harm, abuse and neglect of children, and harmful sexual behaviour in 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 harm, 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

Indicators of neglect in children

- Poor hygiene: matted hair, dirty skin or strong body odour
- Loss of 'skin bloom' and poor hair texture
- Untreated physical or medical problems
- Frequent illness and low-grade infections
- Persistently untreated head lice
- Hungry – scavenging, stealing or hoarding food
- Constantly tired and listless
- Delay in developmental milestones
- Low weight for age and/or failure to thrive for no medical reason
- A flat and superficial way of relating
- Anxiety about being dropped or abandoned
- Self-comforting behaviour, e.g., rocking and/or sucking
- Inadequate clothing in winter
- Frequent lateness to or absence from the service
- Child or young person states that no one is home to provide care
- Longing for adult affection
- Child or young person avoids going home

Indicators of neglect in parents and caregivers

- Dirty unhygienic environment, e.g., house over-run with pets, faeces not cleaned up etc
- Nowhere for child or young person to sleep
- Unable or unwilling to provide adequate food and/or clothing
- Leaving the child or young person inappropriately without supervision



- Abandoning the child or young person
- Unable to respond emotionally to the child or young person
- Depriving of or withholding physical contact or stimulation for prolonged periods
- Overwhelmed with other problems, e.g., substance abuse
- Showing no concern for the child or young person's wellbeing when it would be reasonably expected
- Family is isolated from relatives, other adults or social supports
- Greeting the child or young person with indifference
- An extremely chaotic life
- Family home is very chaotic and unkempt

Indicators of physical abuse in children

- Facial, head and neck bruising
- Other bruising and marks which show the shape of the object used (e.g, a hand print, belt buckle) Multiple bruises or injuries
- Lacerations and welts
- Bite marks
- Dislocations
- Fractures of bones, especially in children under three years old
- Burns and scalds – a burn with a clear outline may be suspicious
- A large number of scars of different sizes or ages, or on different parts of the body
- Verbal disclosure by the child or young person
- Explanation offered by the child or young person is not consistent with the injury
- Flinching when approached by adults
- Frozen watchfulness

Indicators of physical abuse in parents

- Direct admissions by parents or caregivers that they have injured the child or young person
- Direct expressions by parents or caregivers that they may injure the child or young person
- Family history of violence, including previous harm to children and young people
- Repeated presentations of the child or young person to health or other services with injuries, swallowing of non-food substances or minor complaints
- Marked delay between injury and presentation for medical assistance
- Story of injury which is inconsistent with the physical findings
- History of injury which is vague or variable
- Showing little concern about the welfare of a child or young person or the treatment and care of an injury
- Isolating a child or young person from contact with school, services etc in order to hide injuries or prevent disclosure.

Indicators of emotional abuse in children

- Over compliant, withdrawn, passive and/or tearful
- Displaying age-inappropriate behaviours, e.g. overly adult (parenting other children) or overly infantile (thumb sucking, rocking, wetting or soiling)
- Lack expectations and trust in people
- Fearful of parent(s) and/or caregiver(s)



- Indiscriminate attachment
- Disruptive or aggressive behaviour towards others
- Hyper-vigilance, particularly in pre-school children
- Exhibiting extreme attention seeking or risk-taking behaviour
- Withdrawn or seen as a 'loner' – difficulty relating to others
- Highly anxious
- Developmental delay

Indicators of emotional abuse in parents and caregivers

- Excessive or unreasonable demands
- Unrealistic expectations of the child or young person
- Persistent hostility and severe verbal abuse
- Rejection, ridiculing and scape-goating
- Exposure to domestic violence
- Constant criticism, belittling, teasing and withholding of affection and praise
- Belief that a particular child or young person is intrinsically 'bad', 'naughty' or 'evil'
- Using inappropriate social or physical isolation as punishment

Indicators of sexual abuse in children

- Direct or indirect disclosures
- Describes sexual acts, e.g. 'he hurts my wee-wee'
- Sexually explicit behaviour, play or conversation inappropriate to the child or young person's age
- Self-destructive behaviour including eating disorders, substance misuse, self-mutilation and suicide attempts
- An anxious unwillingness to remove clothes, e.g. for sporting events
- Persistent running away from home
- Sudden and unexplained changes in mood or behaviour
- Regression in developmental achievements in younger children
- Unexplained accumulation of money and gifts
- Pain, itching or bleeding in genital or anal area
- Bruising to buttocks, breasts, abdomen and thighs
- Sexually transmitted infection
- Difficulty sleeping and nightmares

Indicators of sexual abuse in parents, siblings, caregivers, relatives, strangers or acquaintances

- Exposing a child or young person to pornography or using a child or young person for pornographic purposes
- Intentional exposure of child or young person to sexual behaviour in others
- Previously committed or suspected of child sexual assaults
- Inappropriate curtailing or jealousy regarding age-appropriate development of independence from the family
- Coercing the child or young person to engage in sexual behaviour with other children
- Verbal threats of sexual abuse
- Exploitation or corruption of children or young people

Indicators of grooming in children



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- Undue attention paid to a child by an adult- including gifts or special outings together
- Inappropriate touching such as tickling and back rubbing
- Inappropriate joke telling, sexual in nature
- Emotional or behavioural changes- including the abrupt onset of mood swings, secretive behaviour or
- Withdrawal

Indicators of grooming in older children and teens

- Perpetrator allows or encourages rule breaking such as smoking, drinking, staying out late
- Perpetrator identifies with the adolescent and appears to be someone who 'understands'
- Perpetrator communicates with adolescent outside normal role (i .e. coach or teacher).
- The effects of grooming can often be mistaken for normal 'teenage' behaviour such as aggressive or secretive behaviour, unexplained gifts or money, a marked change in behaviour and increased permissiveness



Appendix B

Procedures for managing and recording incidents, disclosures and suspicions of harm, abuse or neglect

The nominated supervisor will implement, and other staff, volunteers and students will always follow, the *Procedures for Disclosures and Suspicions of Harm, Abuse or Neglect* to ensure the safety and wellbeing of children and ensure our service's compliance with all laws and regulations.

Managing and recording an *incident* of harm, abuse or neglect

If an incident is witnessed:

- Immediately intervene to protect the victim. If necessary, call 000
- Make a report in line with our *Procedure for making a report (Appendix D)*. For example, it may involve contacting Police/Child Abuse Report Line depending on incident
- Follow instructions from Police/Child Abuse Report Line and do not investigate the incident unless allowed
- Keep the victim supervised and supported. Reassure them and respond to their needs
- The first responder should not try to interview any children. Interviews should only be conducted by the nominated supervisor/approved provider and under instruction from the Police/Child Abuse Report Line. Interviews can be traumatising for a child so we must try to limit them
- When talking or interviewing people involved, the nominated supervisor/approved provider will:
 - Reassure the child or adult
 - 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 the suspected victim safe
- Contact the victim's parents and the parents of any other child who has been impacted
- Keep the child who has been harmed supervised and supported
- Immediately secure evidence such as CCTV footage, emails, computers
- Document the incident using the template in our *Incident, Injury, Trauma and Illness Policy* as soon as possible so the details are accurately captured, including:
 - Time, date, location and who was present
 - Full details of the behaviour/incident
 - Staff/volunteers' actions in response
- Manage risks to children/adults at our service such pending the outcome of any investigations, e.g.:



- Stand down the subject of an allegation or conviction
- Restricting the subject's access to children or only allowing them to have supervised access
- Restricting their access to sensitive computer systems, files or facilities.
- Provide ongoing support children, staff and families
- Ensure the management and storage of records complies with our *Privacy and Confidentiality Policy* and *Record Keeping and Retention Policy*

Managing and recording a **disclosure** of harm, abuse or neglect

A disclosure of harm, abuse or neglect occurs when someone, including a child, tells you about harm, abuse or neglect that has happened, is happening, or is likely to happen to a child. A disclosure can also be about a child harming or abusing another child.

Disclosures 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...||

If a disclosure is made:

- 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 the suspected victim safe
- Not try to investigate or mediate the matter yourself.
- If further interviews are needed after the initial disclosure, they should only be conducted by the nominated supervisor/approved provider and under instruction from the Police or Child Abuse Report Line. Interviews can be traumatising for a child so we must try to limit them
- Record your 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 the disclosure using the template at **Appendix C** 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 staff/volunteers/students asked
- Any comments educators made
- Staff/volunteers/students' actions following the disclosure
- Ensure the management and storage of records complies with our *Privacy and Confidentiality Policy* and *Record Keeping and Retention Policy*
- Follow our *Procedure for making a report* at **Appendix D**
- Wait for Police/ Child Abuse Report Line advice before continuing with investigations

Managing and recording a suspicion of harm, abuse or neglect

A suspicion of harm, abuse or neglect is when someone has a reasonable suspicion that a child has suffered, is suffering, or is at an unacceptable risk of suffering significant harm, or abuse or neglect. A suspicion can also be about a child harming or abusing another child.

Harm, abuse or neglect may be suspected if, for example:

- A child says they have been harmed, abused or neglected
- Someone else, for example another child, a parent, or an employee, says harm, abuse or neglect has occurred or is likely to occur
- A child says they know someone who has been harmed, abused or neglected (it is possible that they may be referring to themselves)
- There are significant changes in the behaviour of a child, or the presence of new unexplained and suspicious injuries
- Harm, abuse or neglect is witnessed

If there is a suspicion:

- Remain alert to any warning signs or indicators (see **Appendix A** for a list)
- Pay close attention to changes in the child's behaviour, ideas, feelings and words
- Make written notes of observations in a non-judgemental and accurate manner, and manage in line with our *Privacy and Confidentiality Policy*
- Record details of any conversation with other people (e.g., a parent who explains why a noticeable mark is on a child)
- Assure a child that they can come to talk when they need to, and listen to them and believe them when they do
- Document the suspicion using the template at **Appendix C** as soon as possible so the details are accurately captured
- Not try to investigate or mediate the matter yourself



- Interviews should only be conducted by the nominated supervisor/approved provider and under instruction from the Police or Child Abuse Report Line. Interviews can be traumatising for a child so we must try to limit them
- Follow our *Procedure for making a report* at **Appendix D**
- Ensure the management and storage of records complies with our *Privacy and Confidentiality Policy* and *Record Keeping and Retention Policy*
- Wait for Police/Child Abuse Report Line advice before continuing with investigations

Threshold for disclosures or suspicions of harm, abuse or neglect

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, abuse or neglect.

In these cases, and if the family consents, educators will connect families to external support services (see *Procedure for making a report* at **Appendix D**)

Procedures for managing harmful sexual behaviour in children

Harmful sexual behaviours is a broad term that is used to describe a range of serious sexual behaviours displayed by children and young people. The behaviour may be:

- Coercive or involve bribery and/or aggression
- Clandestine and/or aggressive/predatory
- Abnormal for the child's age/developmental stage
- Compulsive, excessive and/or degrading
- Present when it involves another child that is significantly different in age/developmental to the individual
- Self-directed or directed at others

Examples of behaviours across the spectrum – ranging from age appropriate to concerning and serious - is available in the South Australian Government's [Guide to problem sexual behaviour in children and young people](#). **Harmful sexual behaviours in children always requires a response.**

If a child exhibits serious harmful sexual behaviours:

- Immediately intervene to protect victim/s. If necessary, call 000
- If a child directs harmful sexual behaviour towards an adult at the service, the adult must immediately physically distance themselves from the child and tell the child that the behaviour must stop. This should be done in a sensitive and respectful manner
- Make a report in line with our *Procedure for making a report* (**Appendix D**). For example, it may involve contacting police/ Child Abuse Report Line, depending on the behaviour
- Follow instructions from police/ Child Abuse Report Line and do not investigate the incident unless allowed



- The first responder should not try to interview any children. Interviews should only be conducted by the nominated supervisor/approved provider and under instruction from the Police/ Child Abuse Report Line. Interviews can be traumatising for a child so we must try to limit them
- Keep the child supervised and supported
- Keep the victim supervised and supported. Reassure them and respond to their needs
- When talking or interviewing people involved, the nominated supervisor/approved provider will:
 - Reassure the child or adult
 - 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 the suspected victim safe
- Contact the parents of the child and any other child who has been impacted
- Immediately secure evidence such as CCTV footage, emails, computers (where applicable)
- Document the incident using the template in our *Incident, Injury, Trauma and Illness Policy* as soon as possible so the details are accurately captured, including:
 - Time, date, location and who was present
 - Full details of the behaviour/incident
 - Staff/volunteers/students' actions in response
- Manage risks to children/adults at our service such pending the outcome of any investigations. Responses should be appropriate to the risk posed. E.g.:
 - Suspending/excluding the child from the service
 - Restricting the child's contact with other children or only allow them to have supervised contact
 - Restricting access to sensitive computer systems, files or facilities (if applicable).
- If the child remains at the service, establish a behaviour support plan in consultation with family services/child's parents/professionals
- Ensure the management and storage of records complies with our *Privacy and Confidentiality Policy* and *Record Keeping and Retention Policy*

If a child exhibits concerning harmful sexual behaviours:

- Intervene to protect other children
- If a child directs harmful sexual behaviour towards an adult at the service, the adult must immediately physically distance themselves from the child and tell the child that the behaviour must stop. This should be done in a sensitive and respectful manner
- Contact parents of the child
- Discuss with the child why the behaviour is unacceptable
- Depending on the situation and how serious the behaviour is, consider:
 - Creating restricted areas/activities for the child
 - How the child will be monitored and supervised
 - Suspending/excluding the child from the service



- Document the behaviour using the template in our *Incident, Injury, Trauma and Illness Policy* as soon as possible so the details are accurately captured, including:
 - Time, date, location and who was present
 - Full details of the behaviour/incident
 - Staff/volunteers/students' actions in response
- Manage risks to children/adults at our service such pending the outcome of any investigations. Responses should be appropriate to the risk posed. E.g.:
 - Suspending/excluding the child from the service
 - Restricting the child's contact with other children or only allow them to have supervised contact
 - Restricting access to sensitive computer systems, files or facilities (if applicable)
- Confirm with the police/welfare authority that our proposed actions are appropriate
- Exchange information with other relevant agencies/professionals if appropriate and permitted
- Arrange a meeting with parents of the child to discuss any immediate responses and ongoing options for support for the child/family, such as a behaviour support plan
- Ensure the management and storage of records complies with our *Privacy and Confidentiality Policy* and *Record Keeping and Retention Policy*

Supporting children, staff and families who have been impacted by another child's harmful sexual behaviour:

- Assess and respond to the needs of anyone who has been impacted
- Inform other parents that their child was/may have been impacted by the harmful sexual behaviour or witnessed the behaviour; and that accounts of the behaviour might be circulating amongst other parents. **Do not** disclose the name of the children involved
- Remain calm and listen in an attentive, active and non-judgemental way
- Take anything a child says seriously
- If the child has reported the behaviour to a staff or family member, tell they have done the right thing
- Help children to know how to respond to questions that other children ask about the incident and which staff member will be supporting them
- Allow children and families to be part of decision-making processes where appropriate
- Communicate to children and parents what action is being taken and what they can expect to happen next, including timeframes
- Where applicable, advise parents that the police or welfare authority may need to interview their child
- Provide referrals to support agencies/counselling services
- Arrange a meeting with the parents to discuss implementing a safety plan for children at the service



Appendix C

Disclosure of harm, abuse or neglect

A disclosure of harm, abuse or neglect occurs when someone, including a child, tells you about harm, abuse or neglect 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...||

Child's name _____

Name of the person who made the disclosure _____

Are they related to the child? Yes _____ No _____

If yes, what is the relationship? _____

What did the person disclose? Try to use the exact words they used. Use "I said" "they said" statements, include any questions you asked and comments you made

What date did the person make the disclosure? _____ What time _____ AM/PM

Where did the disclosure occur? _____

Was anyone else present during the disclosure? Yes _____ No _____

If yes what is/are their name, role and employer?

Have you followed the procedure in the Child Protection Policy and Procedure for making a report? Yes _____ No _____

Describe the actions you have taken following the disclosure

Name of person completing form _____

Signature of person completing form _____

Date _____

Time _____ AM/PM



Suspicion of harm, abuse or neglect

Staff, volunteers and students may suspect harm, abuse or neglect if:

- a child says they have been harmed, abused or neglected
- someone else, for example another child, a parent, or an employee, says harm, abuse or neglect has occurred or is likely to occur
- a child says they know someone who has been harmed, abused or neglected (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, abuse or neglect happening.

Child's name _____

Why do you suspect harm, abuse or neglect? Try to use the exact words a child or someone else uses if relevant. Provide as much detail as possible

If relevant, what date did the person say something? _____ What time _____ AM/PM

Have you followed the procedure in the *Child Protection Policy and Procedure for making a report*? Yes No
Describe the actions you have taken because of your suspicion

Name of person completing form
Date _____

Signature of person completing form
Time _____ AM/PM



Appendix D

Procedure for making a report

Children's services have obligations under the law to act and report in relation to child protection matters. The *Procedure for making a report* here describe these and the steps we must take when we report to the relevant authorities.

Unless they are inconsistent with our obligations under the law, reports and investigations must be conducted in line with our service's policies and procedures.

Call 000 if there is an immediate risk of harm to a child

Mandatory Reporting to the Child Abuse Report Line (SA Department for Child Protection)

1. Consider whether we need to make a report to the Child Abuse Report Line:
 - In SA paid staff and unpaid volunteers at our service are 'mandated reporters' and, by law, **must make a report** to the Child Abuse Report Line (SA Department for Child Protection) **if they suspect, on reasonable grounds** (see definitions) **that a child or young person, or may be, at risk of harm when the suspicion is formed in the course of their employment (whether paid or voluntary)**
 - **A child or young person is 'at risk' of 'harm' if the child or young person:**
 - has or is likely to suffer harm of a kind against which a child or young person is ordinarily protected (includes physical and psychological harm caused by sexual, physical, mental or emotional abuse and neglect)
 - will likely be removed from the State by their parent/ guardian or another person for a medical or other procedure that's 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
 - has any other circumstances of a kind prescribed by the regulations in relation to the child or young person.
 - In assessing whether there is a likelihood that a child or young person will suffer harm, regard must be had to not only the current circumstances of their care but also the history of their care and the likely cumulative effect on the child or young person of that history.
 - Can use the information on mandatory reporting on the Department for Child Protection's [website](#) to help make a decision about whether to report
2. Make a report by phone to the Child Abuse Report Line on 131 478 (available 24 hours/7 days a week).
3. Make the report as soon as practicable and with the assistance or support of the approved provider and/or nominated supervisor. Although, if they do not follow through and make the report, employees and volunteers will make the report



4. If reporting by phone, record name of person taking report and ask them for a written confirmation that the report has been made
5. Get clear guidance from the Child Abuse Report Line about what the next steps in the process are, including with whom information about the report should/can be shared with.

Reporting to Police procedure

1. Consider whether we need to make a report to the Police:
 - Mandated reporters at our service only need to report to the Child Abuse Report Line – no additional report to the Police is needed. However, we do need to confirm with the Child Abuse Report Line that they will pass on the report to Police
 - 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)
 - In SA, it is a **criminal offence for certain people** – including child care workers (paid and unpaid) - **not to report to Police if they know, suspect or should have suspected that another person has previously engaged in the sexual abuse of a child while an employee of the service, and that the employee is engaging or, is likely to engage, in the sexual abuse of a child** (known as 'failure to report')
 - It is also a **criminal offence for a 'prescribed person'** (someone who has the necessary degree of power and responsibility e.g., approved provider or nominated supervisor) **not to remove or reduce the risk if they know there is a substantial risk that another employee of the service will engage in the sexual abuse of a child (known as 'failure to protect')**
2. To report an offence to the Police, phone 131 444 or Crime Stoppers on 1800 333 000
3. Make the report with the assistance or support of the approved provider and/or nominated supervisor. Although, if they do not follow through and make the report, employees and volunteers will make the report
4. If reporting by phone, record name of person taking report and ask them for a written confirmation that the report has been made
5. Get clear guidance from the Police about what the next steps in the process are, including with whom information about the report should/can be shared with.

Making a report to the regulatory authority procedure

1. Consider whether we must report to the Education Standards Board (ESB)
 - Under the *National Laws*, the approved provider must notify ESB of:
 - **any serious incident at the service; and any complaints alleging that a serious incident has occurred or is occurring while a child was/is being cared for by our service** (notify in writing, within 24 hours)
 - **circumstances at the service which pose a risk to the health, safety or wellbeing of children** (notify in writing, within 7 days)
 - **any incident or allegation that physical or sexual abuse of a child or children has occurred or is occurring while the child or children are being educated and cared for by the service** (notify in writing, within 7 days)



- **if there has been a change relevant to whether the approved provider is a fit and proper person to be involved in our service (notify in writing, within 7 days**
 - **suspension or cancellation of a working with children card (including blue card) or teacher registration of a nominated supervisor, or disciplinary proceedings of a nominated supervisor under an education law (notify in writing, within 14 days)**
2. Notify ESB in writing within the prescribed time period

Additional actions for dealing with allegations against service personnel procedure

Where there are allegations of harm against the approved provider, nominated supervisor, employees or volunteers, the approved provider or nominated supervisor will make all the necessary reports to the relevant authorities and also:

1. Complete an *Incident, Injury, Trauma and Illness Record* and notify ESB within 24 hours of making the report
2. Follow employment law and privacy law
3. Pending the outcome of investigations, suspend any volunteers and contractors who are the subject of allegations, and review the duties of employees who are subjects of allegations, including whether it is appropriate to restrict their access to children
4. Ensure employees subject to allegations are supervised at all times. Seek legal advice, if relevant, about restricting a person's duties or putting them on leave with/without pay
5. Provide appropriate support for any employee/volunteer who has an allegation made against them
6. Protect the identity of employees/volunteers in relation to unproven complaints
7. Help the subject of the allegations access appropriate support/counselling, provide support to alleged child victims and their families, and any others involved in reportable incidents, if appropriate.