11. Working with Children Policy and Procedure

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Purpose

Australian Quality Care recognises the participant's right to feel safe and to live in an environment that provides protection from assault, neglect, exploitation or any other form of abuse. This policy specifically looks at the requirements when working with participants under the age of eighteen (18) years.

The policy includes a Working with Children Check – Blue Cards procedure and sets out how our organisation will comply with its responsibilities under the *Working with Children (Risk Management and Screening) Act 2000 (Qld)* concerning employment and volunteer arrangements.

This procedure sets out:

- Types of work that require a person to hold a blue card
- How the organisation manages blue cards
- Responsibilities of blue cardholders and other persons.

Scope

This policy is relevant to all Staff unless otherwise exempt under a statute or order.

Policy

All paid employees who present for work to undertake child-related employment or activities require a blue card if their duties include, or are likely to include, providing services directed mainly towards a child or children, or conducting activities that involve contact with children for at least:

- Eight (8) consecutive days
- Once a week, each week, for over four (4) weeks
- Once a fortnight, each fortnight, over eight (8) weeks
- Once a month, each month, over six (6) months.

Volunteers require a blue card before commencing child-related work or activities irrespective of the frequency of the work.

The Working with Children (Risk Management & Screening) Act 2000 (Qld) provides an exemption from the blue card requirements for any person who is a registered teacher, police officer or health practitioner (who is registered as a registered health practitioner in accordance with the Health Practitioner Regulation National Law Act 2009 (Qld)) and who works with children as part of their professional duties.

Australian Quality Care will encourage and support any person who has witnessed the abuse of a participant or who suspects that abuse has occurred to make a report and be confident of doing so without fear of retribution.

Australian Quality Care, as a mandatory reporting body, is required to report any indicators.

Australian Quality Care acknowledges that prevention is the best protection from abuse and neglect and recognises their duty of care obligations to implement prevention strategies.

As part of our requirements, under the Blue Card Risk Management Strategy, all Staff working with children must hold a blue card. Specific information on blue card requirements is located on the Queensland Government's Blue Card Services website: www.bluecard.gld.gov.au

To comply with the Working with Children (Risk Management and Screening) Act 2000 (the Act) and the Working with Children (Risk Management and Screening) Regulation 2011 legislative framework, Australian Quality Care has developed a child and youth risk management strategy which we review and update, as required, annually (see below - 3.6 Risk management strategy).

Commitment

Our Statement of Commitment to the safety and wellbeing of children and the protection of children from harm outlines that Australian Quality Care will:

- Take a preventative, proactive and participatory approach to child safety
- Value and empower children to participate in decisions which affect their lives
- Foster a culture of openness that supports all persons to disclose risks of harm to children safely
- Respect diversity in cultures and child-rearing practices, while keeping child safety paramount
- Provide written guidance on appropriate conduct and behaviour towards children
- Engage only the most suitable people to work with children and have high-quality Staff,
 volunteer supervision and professional development
- Ensure children know who to talk with if they are worried or are feeling unsafe and that they're encouraged and comfortable to raise such issues
- Report suspected abuse, neglect or mistreatment promptly to the appropriate authorities
- Share information appropriately, and lawfully, with other organisations where the safety and wellbeing of children is at risk

Communicate regularly with families and carers and value their input.

Code of Conduct

All Staff must treat children with respect. There is no place for sarcasm, derogatory remarks, offensive comments or any other inappropriate conduct that may result in emotional distress or psychological harm to a child.

The following behaviours are not tolerated by Australian Quality Care:

- Targeted and sustained criticism, belittling or teasing
- Excessive or unreasonable demands
- Hostility, verbal abuse, rejection or scapegoating
- Any form of harassment of children with disabilities or their associates.

Only Staff trained in managing challenging behaviours will be allocated to work with these children. Staff are required to follow the risk management strategy and other strategies listed in the child's support plan.

Physical conduct

Australian Quality Care views appropriate conduct as any actions that relate to supporting the health and development of the child, such as to assist with an activity; demonstrate a skill; provide first aid. Our organisation uses a child's support plan to determine relevant practices and processes when working with a child.

Inappropriate physical conduct includes:

- Hitting
- Kicking
- Slapping or pushing
- Kissing
- Touching of a sexual nature
- Violent or aggressive behaviour.

During their work with children, staff must:

- Always be visible to others during one-on-one contact with children
- Review the environment to ensure that it is safe for the child; this means both the
 physical and emotional environment. If any issues may cause a risk to the child, then this
 must be reported
- Give a gift only with the written permission of the Board

- Transport children, only if listed in their support plan; if they hold a current driver's license; vehicles are registered and insured; appropriate child restraints/car seats are available and properly fitted
- Contact the child only as per the remit of their role. At no stage are staff to undertake
 private visits, call a participant or use social media to contact the child and their family
 unless related to their work.

Capability

Refer to our 'Human Resource Management Policy and Procedure' for procedures regarding recruiting, selection, training and management of Staff and volunteers.

Concerns

A Risk Management Plan will be created for each participant when undertaking high-risk activities and attending special events. This information is recorded in the child's support plan.

If a Staff member breaches any aspect of the risk management plan, then the Staff performance dispute procedure outlined in the 'Human Resource Management Policy and Procedure' will commence.

Risk management strategy

Australian Quality Care will implement the following risk management strategy:

- Ensure current processes comply with current legislation
- Identify any risks of harm as listed in this policy
- Train Staff in the process of reporting risks of harm to children and young people
- · Record any identified risk and determine if any incidents occurred
- Follow the 'reportable incident, accident and emergency policy and procedure' which includes informing state authorities and the NDIS Quality and Safeguards Commission.

The Board will delegate the following actions, recording and updating information in accordance with blue card system requirements:

- Record Staff in a register outlining their blue card details, i.e. name, number and expiry date
- Train Staff in the procedural requirements of reporting and protecting children
- Review monthly renewal applications; any person whose blue card is due to expire within
 the next two (2) months must complete the relevant application to ensure the renewal is
 lodged on time
- Refer any change in police information immediately to blue card services

- Review current Staff members' work practices to ensure the safety of children
- Take prompt action when a Staff member or volunteer is issued with a negative notice; has their blue card suspended/cancelled; or has their application withdrawn. These people will not be allowed to work with children and will have their employment status reviewed
- Conduct an annual review of this risk management strategy.

Acceptable Checks: Queensland

For registered NDIS providers delivering NDIS supports and services in Queensland, from 1 July 2019 any worker engaged in a risk assessed role must meet the following requirements:

- the person holds a current disability check (Yellow Card) in accordance with Part 5
 of the Disability Services Act 2006 (Qld); or
- the person holds a current Working with Children Check (Blue Card) in accordance with the Working with Children (Risk Management and Screening) Act 2000 (Qld) in relation to screening for regulated employment or regulated businesses; or
- the person engages in the risk assessed role in the person's capacity as a registered health practitioner (within the meaning of the Health Practitioner Regulation National Law 2009 (Qld)) and the person has a certificate of registration in accordance with that Act.

If workers in risk-assessed roles hold a check before the end of the transition period that already meets these requirements, the check is recognised until the check expires.

Note: Staff and volunteers must inform Australian Quality Care if they have had a change in police information (they're not required to advise the specifics of that change, only that a change has occurred) and the organisation will provide notification to Blue Card Services.

Information about our risk strategies and safe environments can be found in the Participant Handbook.

Staff must undergo the NDIS worker screening process prior to employment; results will be recorded in their personnel file.

Procedure

When to report an abusive situation

It is important to always search for the cause of a change in a participant's behaviour or unexplained physical symptoms. If a participant shows one or more of the possible signs of abuse, it must be reported immediately, however this does not automatically mean abuse has taken place.

Possible signs of abuse are detailed below:

- A participant shows a change in behaviour or mood that may indicate they are being abused
- Someone is seen behaving inappropriately towards a participant
- A participant tells Staff that another person is abusing them
- A person tells Staff that they are abusing a participant
- A participant or visitor tells Staff that they have observed abusive acts
- Someone observes an action or inaction that may be considered abusive
- A person suspects or has reason to believe a participant is being abused.

Board or their delegate will then report to child safety services.

Failure to report an abusive situation may result in a criminal offence.

How to report

As mandated notifiers, the Board or their delegate will use the online <u>Child Protection Guide</u> to decide when to refer or report concerns about a child's safety or wellbeing. Where child protection concerns do not meet the threshold for a report to the Department of Child Safety, Youth and Women referrals will be made to <u>Family and Child Connect</u>.

The Board or their delegate will use their professional understanding and knowledge of child protection to determine when to contact the required reporting body.

The Board or their delegate will report a child at risk of harm or neglect to the Department of Child Safety, Youth and Women services.

During business hours call the local Regional Intake Service:

- Brisbane 1300 682 254
- Central Queensland 1300 703 762
- Far North Queensland 1300 684 062
- Ipswich 1800 316 855
- North Coast 1300 703 921
- North Queensland 1300 706 147
- South East 1300 679 849
- South West (Darling Downs) 1300 683 390

After hours and on weekends:

Child Safety After Hours Service Centre (24 hours/7 days)

Details to provide

The Board will provide the following information to the child abuse report line:

- Child's name, age, date of birth and address
- Description of injury, abuse and neglect (outline current and previous)
- Child's current situation
- Location of the child, parent or caregiver and alleged perpetrator
- When and how the manager found out about the abuse.

Child identification details and context

Australian Quality Care will need to provide enough detail to identify the child or young person and give context to the report, including:

- Child's full name
- Date of birth or age
- Current address
- Contact number
- School/kindergarten/childcare centre
- Ethnicity, i.e. Cultural background, aboriginal kinship group, non-English speaking. Who are the parents? Do they all live in the same house? Are there siblings in the house?
- Alleged perpetrator's name, age, address, relationship to the child, and current whereabouts
- Current whereabouts of the child of concern
- Details of when the next expected contact with the alleged perpetrator will occur
- Family court orders, apprehended violence orders and domestic violence orders, if in place.

Defining child maltreatment, abuse and neglect

Child abuse and neglect are related to any behaviour by parents, caregivers, other adults or older adolescents, that's outside the norms of conduct and entails a substantial risk of causing physical or emotional harm to a child or a young person. Such behaviours may be intentional or unintentional and can include acts of omission (i.e. neglect) and commission (i.e. abuse).

Physical abuse

Signs and symptoms: Bruising, lacerations, welts, rashes, broken or healing bones, burns, weight loss, facial swelling, missing teeth, pain or restricted movements, crying, acting fearful, agitation, drowsiness, hair loss or poor physical wellbeing.

Causes: Hitting, slapping, pushing, punching or burning, which involves an incident that's non-accidental, resulting in pain or injury.

Psychological and emotional abuse

Signs and symptoms: Loss of interest in self-care, helplessness, withdrawn, apathy, insomnia, fearfulness, reluctance to communicate openly, chooses not to maintain eye contact, paranoia and confusion.

Causes: Intimidation, humiliation, harassment, threatening behaviour, sleep deprivation, withholding affection, not allowing a person to maintain their decision-making powers which leads to a pattern when repeated over time.

Financial abuse

Signs and symptoms: Unpaid accounts, withholding funds, loss of jewellery and personal belongings, removal of cash from wallet/purse, person becomes agitated when discussing money, not providing money for outings and personal items or a person takes over the care of someone's money without their permission.

Causes: Misuse of a person's money, valuables or property, forced changes to legal documents (such as a will), denying access to or control of personal funds, stealing, fraud, forgery, embezzlement, misuse of power of attorney, removing decision-making powers of a person.

Sexual abuse

Signs and symptoms: Unexplained sexual transmitted disease, vaginal/anal bleeding, fearful of certain people or places, bruising to genital areas, inner thigh or around breasts, anxiety, torn or bloody underclothes, difficulty in walking or sitting, change in sleep patterns, repeating nightmares.

Causes: Rape (penetration and/or oral-genital contact), interest in older person's bodies, inappropriate comments and sexual references, inappropriate (possibly painful) administration of enemas or genital cleansing, indecent assault, sexual harassment which is mainly about violence and power over another person rather than sexual pleasure.

Neglect

Signs and symptoms: Poor hygiene or personal care, unkempt appearance, lack of personal items, absence of health aids, weight loss, agitation, inappropriate clothing, lack of food.

Cause: Intentional failure to provide basic life necessities.

Social abuse

Signs and symptoms: Sadness and grief due to people not visiting, anxiety after a certain person's visit, withdrawal, low self-esteem, appearing ashamed, passivity, listlessness.

Causes: Prevention of contact with friends or family, preventing access to social activities.

Related documents

- Code of Ethics and Conduct Agreement
- Human Resource Management Policy and Procedure
- Incident Investigation Form
- Participant notes
- Reportable Incident, Accident and Emergency Policy and Procedure
- Risk Assessment Form
- Risk Management Plan
- Violence, Abuse, Neglect, Exploitation and Discrimination Policy and Procedure
- Zero Tolerance Policy and Procedure

References

- Child Protection Act 1999 (QLD)
- Child Protection Reform Amendment Act 2017 (QLD)
- The National Framework for Protecting Australia's Children 2009-2020
- United Nations Convention on the Rights of the Child 1990
- Working with Children (Risk Management and Screening) Act 2000