



Child Protection Policy and Procedure

Statement

All educators and staff at our Service take seriously their responsibility to protect children from any type of abuse and are aware of their roles and responsibilities regarding child protection. While we understand there are legislative obligations we must follow, we believe it is also our responsibility as educators to ensure the safety and wellbeing of all children, and to provide the children at our service with the opportunity to develop to their full potential free from any form of harm and abuse. We will implement a child protection risk management strategy to ensure the safety of children is paramount and the service will always act quickly in the best interests of a child.

Background

The *Education and Care Services National Regulations (2011)* and *Education and Early Childhood Service (Registration and Standards) Act 2011* require approved providers to ensure their services have policies and procedures in place around the safety, health and wellbeing of children.

In the National Quality Framework element 2.2.3 focuses on child protection.

Legislative Requirements

Section/regulation	Description
Regulation 84	Awareness of child protection law
Regulation 175	Prescribed information to be notified to Regulatory Authority

NQF	
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.

Children and Young People (Safety) Act 2017 (CYPSA 2017)

Child Safety (Prohibited Persons) Act 2016

Procedure

The Nominated Supervisor, educators, staff members and volunteers will implement a Child Protection Risk Management Strategy to ensure the health, wellbeing and safety of all children at the Service.

Child Protection Risk Management Strategy

1. Code of Conduct

The Service upholds a Code of Conduct in relation to employers, educators, volunteers, students, families and children to ensure the safety and wellbeing of children.

2. Recruitment, Selection and Training Procedures include child protection principles.

The Nominated Supervisor is responsible for developing recruitment and professional development procedures that ensure all people working at the Service do not pose a risk to children and understand how to respond to disclosures or suspicions of harm and abuse. All management, educators, staff members, volunteers and students must have a current working with children check (WWCC) before interacting with the children at the Service. The WWCC must be completed by the South Australian Department of Human Services (DHS) Screening unit. This can be initiated by the Service or by the person. The Nominated Supervisor will then link the WWCC to the Service through the DHS portal. A WWCC is valid for 5 years and is continuously monitored.

It is an offence to:

- Work or volunteer in a child-related role without a WWCC.
- Work or volunteer in a child-related role if you're 'prohibited from working with children'.
- Employ a person or volunteer for a child-related role who doesn't have a valid WWCC or is prohibited from working with children.

Offences carry fines of up to \$120,000 and/or prison sentences.

3. Procedures for Reporting and Documenting concerns about a child or young person

What is harm?

Under the *CYPSA 2017* harm means:

- physical or psychological harm (whether caused by an act or omission) and, without limiting the generality of this, includes such harm caused by sexual, physical, mental or emotional abuse or neglect.

A child or young person is deemed to be 'at risk' if:

- they have suffered harm or there is a likelihood that they will suffer harm, being harm of a kind against which a child is ordinarily protected.
- there is a likelihood that the child will be removed from the State (whether by their parent or guardian or by some other person) for the purpose of—
 - being subjected to a medical or other procedure that would be unlawful if performed in this State (including, to avoid doubt, female genital mutilation);
 - taking part in a marriage that would be void or invalid under the *Marriage Act 1972*
 - taking part in an activity that would be illegal in South Australia.

- their parents or guardians are unable or unwilling to care for them, have abandoned them, cannot be found or are dead.
- they are of compulsory school age but are persistently absent from school without explanation.
- they are homeless or of no fixed address.

Under *CYPSA 2017*, educators, staff members and volunteers are mandatory reporters and must report suspicion of harm or risk of harm if they have a reasonable belief (objective basis) based on:

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

The reporter is not required to prove that abuse has occurred.

A person suspects on reasonable grounds that a child or young person is, or may be, at risk; and that suspicion was formed in the course of their work, report that suspicion as soon as is reasonably practicable after forming the suspicion. Maximum penalty: \$10 000.

The identity of a person who makes a report or notification that a child or young person may be at risk is confidential and it may be an offence to disclose their identity (section 163(1) *CYPSA 2017*).

Responsibilities

The Nominated Supervisor, educators, staff members and volunteers must:

- be able to recognise indicators of abuse (see indicators below).
- take anything a child says seriously and follow up their concerns.
- understand they must report to Child Abuse Report Line (CARL) on **131 478** (available 24 hours/7 days a week)) if they suspect on reasonable grounds a child is or may be at risk. Educators, staff members and volunteers should make the report with the assistance or support of the Nominated Supervisor. If the Nominated Supervisor does not follow through and make the report, staff and volunteers will make the report. Some matters can now be reported on-line. Under the legislation a report must be accompanied by a statement of the observations, information and opinions on which the suspicion is based.
Report any online child sexual abuse material to the Australian Centre to Counter Child Exploitation and anything else regarding unsafe online practices to the eSafety Commission. (See Safe Use of Digital Technologies and Online Environments policy and procedure for more information).
- contact the police on 000 if there is an immediate danger to a child and intervene immediately if it is safe to do so.
- connect families with referral agencies where concerns do not require reports to Department for Child Protection. Under *CYPSA 2017*, a person does not necessarily exhaust their duty of care to a child by notifying Department of Child Protection. Supporting a family where children are at risk is also important. A list of agencies that can help families is on the Australian Institute of Family Studies website <https://aifs.gov.au/>. Family consent will be sought before making referrals.
- promote the welfare, safety and wellbeing of children at the Service.
- prepare accurate records to assist investigations of suspicion of harm or risk of harm by Department of Child Protection or the Police or dealings with referral agencies. Accurate records

record exactly what happened, not what was thought to have happened or potentially could happen. They must be clear, objective and thorough.

- understand that allegations of harm against them are treated in the same way as allegations of harm against other people.

The Nominated Supervisor must also:

- ensure that all employees and volunteers are:
 - clear about their roles and responsibilities regarding child protection.
 - aware of their obligations to immediately report cases where there is a suspicion of harm or risk of harm.
 - aware of the indicators showing a child may be at risk of harm.
- provide training and development for all educators, staff and volunteers in the recognition and reporting of harm.
- provide reporting procedures and professional standards to safeguard children and protect the integrity of educators, staff and volunteers.
- inform all stakeholders of the actions or inactions that form a breach of the child protection risk management strategy and the potential outcomes of breaching the strategy.
- manage any breaches of the child protection risk management strategy.
- conduct a WWCC for all educators, staff and volunteers. A WWCC needs to be renewed every 5 years. All people employed by the Service will be on a register that the Nominated Supervisor can access and will be notified if there have been any new allegations against a particular person.
- provide access to relevant acts, regulations, standards and other resources to help educators, staff and volunteers meet their obligations.
- ensure records of harm or suspected harm are kept in line with our Privacy and Confidentiality Policy.

Allegations against Service Personnel

Allegations of harm or suspicion of harm against educators, staff members, volunteers or the Nominated Supervisor are treated in the same way as allegations against other people. Reports will be made to Department of Child Protection where a child is at risk of harm by a person at the Service. Educators will make the report with the assistance or support of the Nominated Supervisor. If the Supervisor is the alleged perpetrator, then the Approved Provider or most senior educator will assist in notifying Department of Child Protection.

The Nominated Supervisor.

- will complete an Incident, Injury, Trauma and Illness Record and notify the Regulatory Authority within 24 hours of making the report to Department of Child Protection.
- Any incidents and/or allegations of physical/sexual abuse must be reported within 24 hours.
- will provide appropriate support for any educator or staff member who has an allegation made against them.
- will protect the identity of educators/staff members against whom unsubstantiated complaints have been made.

- will review the person's duties, and if they continue to interact with children, ensure they are appropriately supervised at all times.
- may seek legal advice about restricting that person's work activities.

Documentation

Documenting a *suspicion* of harm

If educators have concerns about the safety of a child, they will:

- record their concerns in a non-judgmental and accurate manner as soon as possible.
- record their own observations as well as accurate details of any conversation with the child or their parent (who may for example explain a noticeable mark on a child).
- not attempt to conduct their own investigation.
- document as soon as possible so the details are accurately captured including:
 - time, date and place of the suspicion.
 - full details of the suspected harm date of report and signature.

Documenting a *disclosure* of harm

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

When receiving a disclosure of harm, educators, staff members, the Nominated Supervisor or Approved Provider will:

- remain calm and find a private place to talk.
- not promise to keep a secret.
- tell the child/person they have done the right thing in revealing the information but that they'll need to tell someone who can help keep the child safe.
- only ask enough questions to confirm the need to report the matter because probing questions could cause distress, confusion and interfere with any later enquiries.
- the person / educator who is speaking with the child / person should endeavour to ask open ended questions, so that the child can provide the information in their own words (and to avoid any leading questions i.e. "putting words in their mouth").
 - not attempt to conduct their own investigation or mediate an outcome between the parties involved.
 - document as soon as possible, so the details are accurately captured including:
 - time, date and place of the disclosure.
 - 'word for word' what happened and what was said, including anything they said and any actions that have been taken.
 - date of report and signature.

Notifications of harm

The person making a notification of harm or suspicion of harm will make a record of the answers to the following:

- name of person they spoke to.
- what the next step in the process is.
- what advice will be sent to confirm the report has been made.
- If there is any further action they need to take.

Confidentiality

It is important that any notification remains confidential, as it is vitally important to remember that no confirmation of any allegation can be made until the matter is investigated. The individual who makes the complaint should not inform the person they have made the complaint about. This ensures 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 CYPSPA 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*.

All documentation relating to this policy will be kept for 45 years. Documentation will be stored securely in a filing cabinet in the office, which is locked when management are not present. Information will be shredded after 45 years.

4. Procedures for Managing Breaches

This plan outlines the steps to be taken following a breach of the child protection risk management strategy in order to address the breach in a fair and supportive manner.

Definition

All educators and staff working with children have a duty of care to support and protect children. A duty of care is breached if a person:

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

A breach is also any action or inaction by any member of the service, including children and young people, that fails to comply with any part of the strategy including any breach of:

- a statement of commitment to the safety of children and their protection from harm.
- a code of conduct for interacting with children.
- procedures for recruiting, selecting, training and managing paid employees and volunteers.
- policies and procedures for handling disclosures or suspicions of harm, including reporting guidelines.
- policies and procedures for implementing and reviewing the child protection risk management strategy.

- risk management plans for high-risk activities and special events.
- strategies for communication and support.

Processes to manage a breach of the child protection risk management strategy

The Nominated Supervisor or Approved Provider will manage breaches in a fair, unbiased and supportive manner:

- all people concerned will be advised of the process.
- all people concerned will be able to provide their version of events.
- the details of the breach, including the versions of all parties and the outcome will be recorded.
- matters discussed in relation to the breach will be kept confidential.
- an appropriate outcome will be decided.

Suitable outcomes for breaches

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.
- further education 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.

5. Risk Management Plan for High-Risk Activity

In addition to workplace health and safety concerns, a child risk management assessment should be undertaken to analyse the risk of 'harm' to children during high-risk activities.

6. Information for Families

Our Child Protection Risk Management Strategy

Creating safe and supportive service environments for children is everyone's business. Our Service is committed to ensuring children are kept safe from harm. We will initiate and maintain ongoing planning and commitment to a safe and supportive environment so children:

- feel safe and protected from harm.
- help plan activities and make decisions.
- are consulted and respected.
- have their best interests considered and upheld.

We have a written child protection risk management strategy (this policy) to protect the children in our Service from harm, and to ensure we have a safe and supportive environment for children by identifying and minimising risks.

The child protection risk management strategy consists of:

- a code of conduct for interacting with children.
- procedures for recruiting, selecting, training and managing paid employees and volunteers, including screening procedures through DHS.
- procedures for handling disclosures or suspicions of harm, including reporting guidelines.
- procedures for managing breaches of the strategy.
- risk management plans for high-risk activities and special events.
- strategies for communication and support.

As a parent/carer it is important for you to understand the policies and procedures that form the child protection risk management strategy.

Educating Children about Protective Behaviour

We aim to teach children:

- about acceptable and unacceptable behaviour, and appropriate and inappropriate contact in a manner suitable to their age and level of understanding.
- that they have the right to consent or not consent to what is happening to them.
- that they always have a right to feel safe.
- 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.

Beliefs

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 response given to a child from an adult in a child's early stages of 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 retain, enhance and better understand their body's response to an emotion are more able to foresee the outcome out a situation and avoid them or ask for help.
- Children have a right to consent or not consent using verbal or non-verbal means.
- Children should be provided with information in ways that they will understand

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. Harm might occur as a single incident or be ongoing and may be intentional or unintentional.

General indicators of harm

- 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 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
- often left unsupervised

Indicators of Neglect in parents and caregivers

- failure to provide adequate food, shelter, clothing, medical attention, hygiene or leaving the child inappropriately without supervision
- 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

Indicators of Physical Abuse in children

- 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
- pressure marks from fingers on face, chest and back
- poisoning or significant over medicating

Indicators of Physical Abuse in parents and caregivers

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

Indicators of Emotional Abuse in children

- 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)
- running away or continually staying at a friend's house
- clingy with certain people
- lying and stealing
- depression, self-mutilation

Indicators of Emotional Abuse in parents and caregivers

- constant criticism, belittling, teasing of a child or ignoring or withholding praise and affection
- excessive or unreasonable demands
- persistent hostility, severe verbal abuse, rejection and scape-goating
- belief that a particular child is bad or "evil"
- using inappropriate physical or social isolation as punishment
- exposure to domestic violence

Indicators of Sexual Abuse in children

- genital injuries
- bite marks
- sexually transmitted disease or pregnancy
- persistent soiling or bedwetting
- sleep disturbance

- obsessive and compulsive washing
- promiscuous affection
- 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

Indicators of Sexual Abuse in parents, caregivers of anyone else associated with the child

- exposing the child to sexual behaviours of others
- suspected of or charged with child sexual abuse
- inappropriate jealousy regarding age-appropriate development of independence from the family
- coercing the child to engage in sexual behaviour with other children
- verbal threats of sexual abuse
- exposing the child to pornography

Indicators of exposure to Domestic Violence in children

- 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
- acute stress disorder
- mood disorders
- anxiety and depression
- increased rates of violence in their own relationships
- impact on development and reading age

Other Sources

Department for Child Protection
 Early Years Learning Framework
 2 parents that work in the field of child protection

Links to other policies

Children's Program Policy and Procedure
 Incident Injury Trauma and Illness Policy and procedure
 Staff Arrangements policy and procedure
 Code of Conduct

Confidentiality Policy and procedure

Record Keeping and Retention Policy and procedure

Safe Use of Digital Technologies and Online Environments policy and procedure

Ongoing training

RRHAN-EC or Through Their Eyes

Review:

The policy will be reviewed every two years

Last reviewed: August 2025

Date for next review: May 2026