

# Child Protection Policy and Safety Checking Procedure

Foundation Standard 2022

5.15.1

## Background

The Starship Children’s hospital guidelines for abuse and neglect state:

“Child abuse and neglect (CAN) is a serious health issue in New Zealand society and preverbal children are at particularly high risk. Health care providers need to be alert for signs and symptoms that require further assessment, or that might be indicative of violence and abuse. Health care providers also need to be able to respond appropriately if a child makes a disclosure of abuse.”

The policy is written in accordance with the Children’s Act 2014. It provides a framework for staff to manage actual and/or suspected child abuse and neglect. It recognizes the important role and responsibility that staff have in the accurate detection of suspected child abuse and/or neglect, and the early recognition of children at risk of abuse.

## Scope

This policy covers all staff and contractors who have direct or indirect contact with children and their whanau.

## Definitions

For the purposes of this policy the following definitions apply:

**Whanau / family violence:** covers a broad range of controlling and harmful behaviour commonly of a physical, sexual and/or psychological nature which typically involve fear, intimidation, and emotion deprivation

**Child:** tamariki / children aged 0-14 years inclusive

**Young person:** tamariki / children between the ages of 14 and 16 years but does not include any person who is or has been married or in a civil union (Children, Young Person, and Their Families Act 1989, Section 2).

**Child abuse:** the harming (physical, emotional, sexual), ill treatment, abuse, neglect or serious deprivation of any tamariki/children or young person. This includes actual, potential, and/or suspected abuse

**Physical abuse:** any acts that may result in physical harm of a child or young person

**Sexual abuse:** any acts that involve forcing or enticing a child to take part in sexual activities, including child sexual exploitation, whether or not they are aware of what is happening

**Emotional abuse:** any act or omission that results in adverse or impaired psychological, social, intellectual, and emotional functioning or development

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**Neglect:** the persistent failure to meet a child's basic physical or psychological needs, leading to adverse or impaired physical or emotional functioning or development

**Child, Youth and Family:** the agency responsible for investigating and responding to suspected abuse and neglect and for providing care and protection to children found to be in need

**New Zealand Police:** the agency responsible for responding to situations where a child is in imminent danger and for working with Child, Youth and Family in child protection work, including investigating cases of abuse or neglect where an offence may have occurred

**Staff:** means people working at the practice and includes employees, contactors, consultants, students, associates, and volunteers whether working on a full time, part time, casual, or temporary basis.

**Supervising adult:** of child or children means a parent, guardian, relative, family friend or carer, and/or an adult acting as "parentis in loci".

**Core worker:** The Children's Act has created two categories of children's workers, core children's workers and non-core children's workers.

A core children's worker is defined as:

- a children's worker who works in or provides a regulated service
- who has primary responsibility or authority for a child or children
- involves regular or overnight contact with a child or children
- who works alone with a child or children – work must take place without a parent or guardian of the child being present
- includes doctors, nurses, counsellors, – who see children or young people (up to the age of 17) in their clinics or office.

**Non-core workers:** are those who have regular but limited child contact, e.g., general hospital staff, health administrative staff.

### **Relevant New and Amended Legislation**

#### **Oranga Tamariki Act 1989**

The purpose of the Oranga Tamariki (OT) Act 1989 (with an accompanying title of the Children's and Young People's Well-being Act) is 'to promote the well-being of children, young persons, and their families, whānau, hapū, iwi, and family groups'

- This law has been amended to increase information sharing for the safety and wellbeing of children and young people.
- Agencies and practitioners can now share information with non-statutory agencies/people (those specified in the Act) to prevent harm or reduce risk to a child or young person.
- A key principle of the OT Act is that the wellbeing and best interests of the child/young person take precedence over any duty of confidentiality.

## **Family Violence Act 2018**

The purpose of the Family Violence (FV) Act 2018 is 'to stop and prevent family violence'; the purpose of Part 2 of the Act, the information sharing provisions, is '...to encourage family violence agencies and social services practitioners to collaborate to identify, stop, prevent, and otherwise respond to Whānau /family violence'.

- In this new Act the principle is safety comes first, confidentiality second.
- Information may be requested and disclosed. Decision makers should, whenever appropriate, recognize that children are particularly vulnerable to family violence, including seeing or hearing violence against others - which puts them at particular risk of lasting harm to their current and future well-being

### **Key principles to guide practice**

- The new legislation urges people to **consider sharing information, rather than not sharing**, in the first instance, whereas the Privacy Act has a starting point of not sharing unless a specified ground applies.
- You are protected if you share information in good faith. Good faith = making your best effort to do the right thing (following the provisions of the Act) in the right way for the right reasons
- Document all decisions: when, what, who, why?
  - Respond to requests – who made the request, details, whether the request was granted, reasons for sharing or not sharing information, how you attempted to gain consent, whether it was obtained or not, and what info was sent and when.
  - Keeping records helps show you acted in good faith and can help explain decisions

### **Policy Statement**

Mt Eden Village Doctors will keep children safe by:

- Ensuring the practice is compliant with current legislation and requirements regarding tamariki/children accessing services at the practice (or children indirectly involved with a patient e.g., siblings / young visitors)
- Ensuring staff are aware of their responsibilities / expected response following disclosure by a child, or following recognition and observation of warning signs / symptoms
- Providing staff with the guidelines by which to identify and respond appropriately to concerns of abuse and neglect, and to understand their role in keeping children safe.
- Ensuring all services provided by the practice for the safety and wellbeing of children adhere to the principles of partnership, protection and participation; and the rights and responsibilities accorded by Te Tiriti o Waitangi.
- Ensuring all employed and contracted workers will be safety checked in accordance with the safety checking requirements under the Children's Act 2014.
- Not employing or engaging a person as a children's worker without ensuring that a safety check is completed before that employment or engagement commences.

**This policy will be part of the Initial Induction programme for all new staff**

**Staff responsibilities**

The following are the key responsibilities, to be outlined to staff at new staff orientation and regular training updates:

**1. Signs and symptoms**

- Front line staff must be alert to the ‘Signs and symptoms of Child Neglect or Child Abuse.’  
Refer to Section 1 of the [“Family Violence Assessment and Intervention Guideline: Child abuse and intimate partner violence”](#).
- Identifying possible abuse or neglect - Information on identifying possible abuse or neglect is detailed in ‘Working together to keep children and young people safe. An Interagency Guide’ (Child, Youth and Family, Page | 2 2011, (Working Together)). This document should be read in conjunction with this policy. In brief, staff need to be aware of the indicators of potential abuse and neglect. These indicators as noted in Working Together include:

Physical signs	Behavioural concerns
Developmental delays	The child talking about things that indicate abuse (sometimes called an allegation or disclosure)
Physical neglect	Neglectful supervision
Medical neglect	Abandonment

- Every situation is different, and it is important to consider all available information about the child and their environment before reaching conclusions. For example, behavioural concerns may be the result of life events, such as divorce, accidental injury, or the arrival of a new sibling, etc.
- Staff must take appropriate action to protect the wellbeing and safety of children and young people, whether the child/young person is directly or indirectly a client/patient of the service.

**2. Immediate Action**

If the staff member discovering the abuse/suspected abuse is not a General Practitioner (GP), they will notify the Safeguarding and Child Protection Lead as soon as is practicable but within that day to take over the responsibility of investigating and reporting the abuse/suspected abuse.

- In all cases where a member of staff has a concern about a child / tamariki / young person / rangatahi being or likely to be abused or neglected (refer to Definitions) by an adult or another child / tamariki or young person / rangatahi, they will report this to Oranga Tamariki and the Police on the same day as the abuse/suspected abuse is discovered. If the child or young person is in immediate danger **call the police on 111.**
- For seeking advice or reporting abuse contact Oranga Tamariki – Ministry for Children.

### 3. Responding to a child when the child discloses abuse

Listen to the child/young person	Disclosures by children are often subtle and need to be handled with particular care, including an awareness of the child’s cultural identity and how that affects interpretation of their behaviour and language.
Reassure the child/young person	Let the child know that they: <ul style="list-style-type: none"> <li>• Are not in trouble.</li> <li>• Have done the right thing.</li> </ul>
Ask open-ended prompts e.g. “What happened next?”	Do not interview the child (in other words, do not ask questions beyond open prompts). Do not make promises that cannot be kept e.g. “I will keep you safe now”.
If the child/young person is visibly distressed	Provide appropriate reassurance and re-engage in appropriate activities under supervision until they are able to participate in ordinary activities.
If the child/young person is not in immediate danger	Re-involve the child in ordinary activities and explain what you are going to do next.
If the child is in immediate danger	Contact the Police immediately.
As soon as possible formally record the disclosure	Record: <ul style="list-style-type: none"> <li>• What the child said, word for word.</li> <li>• The date, time and who was present.</li> </ul>

### 4. Recording and notifying Oranga Tamariki of suspected child abuse or neglect

What process to follow	Example	Key considerations
Recording	Formally record: Anything said by the child/young person  The date, time, location, and the names of any staff that may be relevant  The factual concerns or observations that have led to the suspicion of abuse or neglect (e.g., any physical,	Relevant information can inform any future actions.

	<p>behavioural, or developmental concerns)</p> <p>The action taken by the practice</p> <p>Any other information that may be relevant</p>	
Decision- making	Discuss any concern with the Clinical Director or the designated person for child protection.	No decisions should be made in isolation.
Notifying authorities	<p>Notify Oranga Tamariki promptly if there is a belief that a child has been, or is likely to be, abused or neglected.</p> <p>A phone call to the National Contact Centre is the preferred initial contact with Oranga Tamariki as this enables both parties to discuss the nature of the concerns and appropriate response options.</p>	<p>In consultation with our practice Oranga Tamariki will make the decision to inform the parents or caregivers.</p> <p>Advise what, if any, immediate action may be appropriate, including referring the concern to the Police.</p>
Storing relevant information	<p>Securely store in the clinical record:</p> <p>A record of any related discussions (including copies of correspondence, where appropriate)</p> <p>A record of any advice received</p> <p>The action the practice took including any rationale</p> <p>This concern with any earlier concerns, if the notification is based on an accumulation of concerns (rather than a specific incident)</p>	Records assist in identifying patterns.

### 5. Informing Parents / Caregivers

- Informing Parents / Caregivers of a referral to the police or Oranga Tamariki should be managed with consideration to the safety of the child, staff and other family members.
- After discussion with Oranga Tamariki only inform the caregivers if it is safe to do so. Informing the parents / caregivers of a referral should be undertaken in a safe environment for both staff and the patient, parents or caregivers. Additional guidance can be obtained from the Clinical Director or other senior member of staff.

## 6. Informing the Child's GP

The child's GP MUST be informed where a referral has been made to Oranga Tamariki by sending an urgent task, or preferably face to face. The responsibility for this lies with the referrer.

### Safety Checking Procedure

The Safeguarding Children and Child Protection Lead will ensure the process for conducting the children's workforce safety checks are followed:

#### New employees

All new employee core and non-core children's workers must be safety checked before starting employment or engagement as a children's worker

#### **New worker safety checks include:**

- Reasonable steps to obtain identity confirmation (Such as through RealMe identity verification, primary identity documentation or searching personal records).
- Police Vetting
- Employment or Personal References (at least 2)
- Employment History
- Interviews with the Applicant. As part of the interview, questions must explore the potential employee's safety to work with children (e.g., any complaints made about their practice; reasons for leaving previous practice; what they would do if the situation arose where a child or young person disclosed abuse; what they think constitutes professional practice when working with children)
- Professional Membership Check (registration and annual practicing certificate) Information from relevant licensing or registration authority about the potential employees' scope of practice and whether they are restricted by any conditions.
- Assessment of the risk the potential employee might pose to the safety of children

#### Existing employees

All existing core and non-core children's workers are safety checked and workers need to be rechecked every three years.

#### **Existing worker safety checks include:**

- ID Verification
- Police Vetting
- Professional Membership Check (registration and annual practicing certificate)
- Final Assessment

### Training

- All team members require training to ensure they are skilled to detect, manage and report child abuse as per the Children's Act 2014.

- Although doctors and nurses often work more closely with patients and their whānau, receptionists are invaluable for observing behaviour outside of the consultation rooms

**Recommended training:**

[Fundamentals of Child Protection provided by Safeguarding Children](#)

**This document has been written in accordance with the following legislation:**

- [Oranga Tamariki Act, 1989](#)
- [Family Violence Act, 2018](#)
- [Children's Act, 2014](#)
- [Victim's Rights Act 2002](#)
- [Privacy Act, 2020](#)
- [Health Information Privacy Code, 2020](#)
- [Crimes Act, 1961](#)
- [Health Act, 1956](#)
- [Health and Disability Sector Standards Regulations, 2001](#)

**Websites Resources**

**Oranga Tamariki - Ministry for Children**

<http://www.childrensactionplan.govt.nz/childrens-workforce/safety-checking-and-the-workforce-restriction/>

**Legislation Guidance**

[Oranga Tamariki Act -guidance on information sharing provisions](#)

[Family Violence Act 2018 – guidance on information sharing](#)

**About NZ Police Vetting Service**

<http://www.police.govt.nz/sites/default/files/publications/new-zealand-police-vetting-service-approval-criteria.pdf>

**Website link for Vetting Service**

<http://www.police.govt.nz/advice/businesses-and-organisations/vetting>