

GREENWOOD HEALTH - GH9 - Policy on Keeping Children Safe

1) INTRODUCTION

This child protection policy describes the commitment that Greenwood Health has to children, and the measures it will take to ensure their safety and well being. The safety of the child is our prime consideration at all times. This policy applies to all children who are patients at Greenwood Health, and to those with whom staff and contractors come into contact during their work. Failure to adhere to the child protection policy as upheld by Greenwood Health could result in disciplinary action being taken against its employees.

Sections 2 and 3 of this Policy cover Our Staff (Recruitment, Conduct and Training) and Our Practice (Recognising, Responding, Support of Patients and Care of Staff).

Definitions

Abuse 1: "Child abuse means the harming (whether physically, emotionally or sexually), ill-treatment, abuse, neglect or deprivation of any child or young person" [*Section 2, Children and Young Persons Amendment Act, 1994*]

Abuse 2: "Child abuse or maltreatment constitutes all forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child's health, survival, development or dignity in the context of a relationship or responsibility, trust or power." [*World Health Organisation 1990*]

Children and Young People: For the purposes of this policy, children are those under the age of 14. Young people are those from 14 and up to the age of 17.

Our commitment to the prevention of child abuse and neglect

Greenwood Health values children and young people, and is committed to the prevention of child abuse and to the protection of children. This commitment means that the interests and the welfare of the child are the prime considerations when any decision is made about suspected child abuse. Greenwood Health acknowledges that there must be a widespread commitment across Greenwood Health to the prevention of child abuse and neglect and that we will ensure that this commitment is recognized and followed.

We support the roles of the Police and CYF in the investigation of suspected abuse, and will report suspected abuse to these agencies.

We are committed to supporting families, and maintaining relationships with agencies and individuals in the community. Greenwood Health will follow its child protection policies to provide a safe and nurturing place for children.

The Practice Manager takes overall responsibility for the process and will a) establish a working group to develop and review the child protection policy, b) consult with stakeholders and c) ensure that the policy is up to date and available to all concerned. The working group will comprise people from all parts of the organization to offer a balanced view of what works in a practical way for the organization.

- The commitment to the safety of children will be given leadership from the board and management team. It will be included in all of Greenwood Health's strategies, plans, and relevant public documents.
- Information about Greenwood Health's commitment will be made available to stakeholders including patients and prospective patients, staff and prospective staff, and all others involved with Greenwood Health.

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2) OUR STAFF - Recruitment, Conduct and Training

A) Recruitment:

Greenwood Health wants to ensure that children are safe in our care. Our commitment begins by ensuring that those who work with them are going to do no harm. It is well documented that those people who abuse children will choose to work in a child-focused environment. Our Recruitment Policy covers the following four areas

1. Application forms and CVs.

Greenwood Health will request sufficient relevant information to be able to gain a comprehensive candidate picture.

2. Vetting and reference checking

Greenwood Health will check candidates' suitability and safety for working with children and no applicant will be employed without being vetted and undergoing a reference check. These procedures will satisfy the "safety check" requirements of the Vulnerable Children's Act 2014.

3. Interviewing

Greenwood Health recognises that an interview is an excellent way to learn more about the background and personal history of the applicant and will conduct effective interviews. Interviews will be conducted in accordance with suggestions made in the Vulnerable Children's Act 2014

4. Employment contracts and Code of Conduct

All successful applicants will be expected to sign an Employment Contract and a Code of Conduct regarding their behaviour towards children.

B) Professional conduct of staff

Greenwood Health believes that as far as possible, staff working with children and families should keep their personal and professional lives separate, and does not encourage close personal relationships or care-taking activities outside the work environment.

Procedures

- Any staff member (paid or unpaid) shall feel it is their right to bring any issue relating to child abuse and child protection to Management or a senior designated person.
- All staff will have a clear understanding of, and to agree to the Code of Conduct.
- Staff will inform their manager of any relationships with other staff, patients or families which could constitute a conflict of interest, or place them in a potential position of compromise.
- No staff member is to enter into any relationship with a child, young person or family, which could mean that any other section of this policy is compromised.

C) Training

Greenwood Health aims to ensure that staff are trained

- To recognise their responsibility and identify when children are at risk
- To respond in the most appropriate way to children who are suspected of being abused
- To report their concerns appropriately and support children, staff and family members

1. Induction Training

Staff will be asked to read and follow the Keeping Children Safe Policy.

2. Basic and ongoing training

All staff will be expected to undertake appropriate training in child protection. Members of the working group will be expected to have attended an external course in safeguarding children. Greenwood Health will ensure that such knowledge is kept up-to-date and relevant.

3. Training budgets and resources

Greenwood Health believes it is essential that staff are trained in child protection and will provide time, resources and funding to support this process. Refresher courses are recommended every 3 - 5 years at minimum.

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3) OUR PRACTICE - Recognising and Responding to abuse

Greenwood Health's aims:

- To protect children
- To show the commitment the organisation has to children
- To provide guidance to staff in the event of suspected abuse
- To ensure public confidence in the safe practices of the organisation, and reassure parents
- To provide consistency of actions so that everyone follows the same process
- To avoid allegations of abuse, and to protect and support staff in the event that one is made
- To provide accountability and meet government and other requirements
- To reduce opportunities for litigation as a result of taking wrongful action

A Recognising child abuse and neglect

Staff at Greenwood Health must be familiar with

- a) the Manitoba Risk Assessment Model (Appendix 1) that describes the factors contributing to the risk of child abuse and neglect; and
- b) the indicators of child abuse (both physical and sexual) and neglect as described in the booklet "How can I tell" that is produced by Child Matters

B Responding to suspected child abuse and neglect

Greenwood Health aims to respond to suspicions of abuse in a manner which best ensures children's or young persons' immediate and long-term safety and to refer to specialist advice and support those who seek help when concerned about a child at risk.

Greenwood Health will respond to suspicions and allegations of child abuse by recording all observations, impressions and communications about children suspected of being abused.

Staff will not act alone, and will refer all suspected situations of child abuse to the Police or Child, Youth and Family. The safety of the child will be the primary consideration, and no person at Greenwood Health will collude to protect an adult or an organisation.

Allegations will be treated in such a way that the rights of adults, and the stresses of the staff are also taken into consideration.

Procedures

- When abuse is suspected or an allegation made against another person, the first consideration will be to ensure the safety of the child.
- **When abuse is suspected or disclosed, staff will follow the process outlined in the flowchart in Appendix 2**
- Staff will declare to a manager any situation where there could be a conflict of interest, and provision made on a case-by-case basis about who will handle the process.
- Any person may make a notification of suspected child abuse or neglect. Prior to notification you may wish to discuss the case with a Greenwood Health Child Protection Officer(CPO) including : Daniel Bulman, Sarah Moore, Carissa Katene, Catherine Vercammen
- The manager may consult with a specialist agency to clarify whether to make a notification.
- When child abuse is suspected the manager will inform Child, Youth and Family or the Police.

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3) OUR PRACTICE - Recognising and Responding to abuse continued

- When it is decided that concerns are not significant enough to refer to statutory authorities, the child will continue to be monitored, and records kept.
- All suspicions and information will be recorded factually, and held confidentially. Anything that is an opinion or a personal concern will be identified as such and not as being fact.
- Staff will not question or interrogate a child who has disclosed abuse, or is displaying signs of possible abuse. However, the child should be listened to and responded to appropriately.
- A senior staff member will inform parents as soon as practically possible. A process for doing this will be discussed by that person and a manager or specialist adviser. The senior staff member will only inform the parents if they are certain that the child will be safe if they do so.
- Disclosure to a parent or caregiver will be made by a skilled and experienced person. It is acknowledged that such disclosures may be difficult and traumatic for both staff and parents, and that support may be required. The person undertaking the disclosure will have the skills and knowledge to support the family. If Maori / Pacific / Refugee consider referring to Kaiatawhai Service (cultural support)
- If a family member or someone close to the family is suspected of abuse, the police or Child, Youth and Family should make the disclosure. The staff member will not advise a family member or caregiver of the concerns. The family will be notified as soon as possible, but only after it has been confirmed that this will in no way jeopardize the safety of the child.
- Greenwood Health recognises the added stress to fellow staff in such a situation, and will ensure support is available to help staff debrief after dealing with a case of child abuse.
- In all cases of suspected abuse, the information and concerns will be made available only to those who have a need to know. This will be determined by the senior manager designated.
- A process will be identified by the senior manager for sharing information to others at Greenwood Health at the appropriate times. All staff members involved will be kept informed as far as possible within the limits of confidentiality and the need to protect the best interest of the child. This will be determined by the designated senior staff member.
- All actions and reasons for them will be recorded and information will be stored in a secure place with limited access to designated people.

C Sharing information with other groups and agencies

Greenwood Health recognises that all staff must act within the legal requirements of the Privacy Act, Children Young Person's and their Families Act, Health information Act and other statutes. There are provisions within each of these acts for sharing information needed to protect children and enable other people to carry out their legitimate functions. In general, staff will not share information if they believe that by doing so this will endanger the child.

Greenwood Health encourages the sharing of information when appropriate steps have been taken.

Procedures

- Staff may be asked to provide information to the Department of Child, Youth & Family Service, Lawyers and Psychologists.
- Information sharing will be restricted to those who have a need to know.
- When any of the above contacts a staff member for information, that staff member must first refer to their manager or supervisor for clearance before providing the information.
- Information will only be given after the staff member has identified the person making the request, the actual purpose of the request, what use the information will be put to, and who will see the information.

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3) OUR PRACTICE - Recognising and Responding to abuse continued

- Before information is provided to a non-custodial parent or other family member, staff will consult a child's records and follow any recommendations on record.
- A child's records will be kept as factual as possible, and nothing will be recorded as fact without evidence to back it up. This means, for example, that no entry will be made on a child's record about guardianship of a child without sighting the appropriate documentation.

D Support for families with child abuse

Greenwood Health will not provide counseling, therapy or treatment of child abuse. Staff will not work outside their roles and boundaries and all children who need these services will be referred on as appropriate. We will ensure that staff and volunteers understand the process of appropriate referral to skilled practitioners, and that they offer support and help in the referral process.

Procedures

- Designated staff will be expected to provide support for families where child abuse has been suspected or determined. This support will be in the form of listening, empathizing, and offering advice about where to get specialist help. Staff will also offer practical assistance in these situations when appropriate. Such assistance could include acting as a support person at an interview, arranging transport etc.
- Staff will receive on-going training and refresher information to enable them to carry out these functions appropriately.

E Care of staff

To ensure that staff feel well supported, supervised and are not overloaded:

- a) Greenwood Health will take all reasonable effort to ensure that it provides an environment where staff are supportive of one another, and are heard and appreciated for the contribution.
- b) Greenwood Health will ensure that staff have access to personal supervision, and the opportunity to deal with stress and any issues arising as a result of being involved directly or indirectly with an incidence of child abuse.

Procedures

- Greenwood Health will provide professional, supportive workplace supervision to all staff.
- In the event of a traumatic incident, or an incident of child abuse, professional supervision will be available and paid for by Greenwood Health for those staff affected. The need will be determined by the manager in conjunction with the staff involved.
- Regular staff performance reviews will assess staff workload.
- Opportunities for staff to communicate with each other and their peers and managers will include peer mentoring, staff meetings.
- Greenwood Health adheres to guidelines as set out by OSH and referred to in the Health and Safety policy.

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4) Related Documents and Review

Related Documents

1. The child protection policy is to be used in conjunction with the following existing policies:
 - Complaints Policy
 - Respecting Patients' Rights Policy
 - Health & Safety Policy
2. This child protection policy refers to Child Matters' booklet "How can I tell?" (describes indicators of child abuse both physical and sexual) Reference :
www.childmatters.org.nz/childprotectionguide/
3. This child protection policy adheres to the following Acts:
 - Health and Disability Commissioner Act 1994
 - Children Young Persons and Their Families Act 1989
 - Privacy Act 1993
 - Human Rights Act 1993
 - Education Act 1989/1998
 - Domestic Violence Act 1995
 - Care of Children Act 2005
 - Employment Relations Act 2000
 - Child Young Person and their Families Act 1989
 - Code of Health and Disability Services Consumer's Rights 1994
 - Vulnerable Children's Act 2014
 - Crimes Act 1961 (2012 amendment)
 - Professional Codes of Conduct for GP's and Nurses
 - Health Information Privacy Code 1994
 - Greenwood Health Code of Conduct
 - Greenwood Health Complaints Policy
 - Greenwood Health Computer Use, Internet and Email Policy
 - Greenwood Health Use of Vehicle Policy
 - Greenwood Health Employment Process
4. This child protection policy fulfills the requirements of RCGPNZ's Cornerstone accreditation programme

Review:

The child protection policy and all its sub policies and related policies will be reviewed every three years or if there is a critical event .

Approved by Management Team - August 2015

Next review date: August 2018

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Appendix 1 - The Manitoba Risk Assessment Model

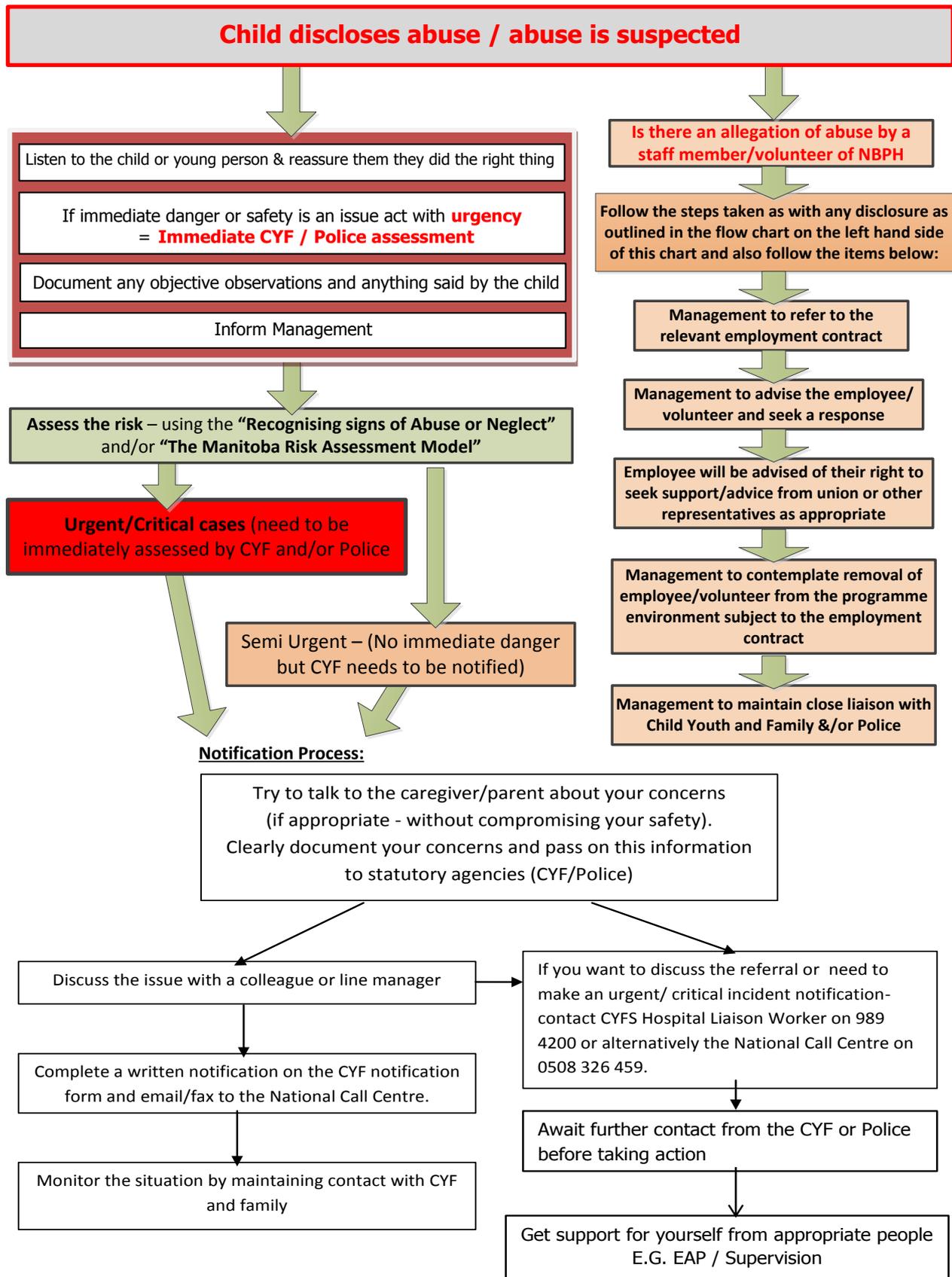
The Manitoba Risk Assessment Model gives a list of risk factors for child abuse and neglect. Number 1 is the highest level of risk. Where there are multiple risk factors present, the risk to the child increases proportionally.

1. History of previous abuse or neglect or suspected abuse or neglect
2. Domestic Violence
3. Parent is indifferent or intolerant of the child or reports the child as particularly troublesome
4. Severe social stress
5. Severe isolation and lack of support
6. Parents abused as children
7. Alcohol and drug use
8. Mental illness including post-natal depression in parent
9. Young Parent – under 20
10. Frequent changes of address - more than 2 over the last twelve months
11. At risk family actively avoiding contact with health care providers or family support agencies

The Manitoba Risk Assessment Model comes from Reid, G. and Sigurdson, E. The Manitoba Child Abuse/Neglect Scale. Printed from the 4th National Roundtable on Child Protection Risk Assessment, Summary of Highlights, University of Manitoba, Canada.

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Appendix 2 - Response Flow Chart



CYFS National Call Centre;

Phone 0508 326 459, Fax 09 9141211 or 09 912 3820
email : cyfcallcentre@cyf.govt.nz

Nelson Regional CYFS office

Phone 03 9894200

Practice Leader/Duty Supervisor

Paula Grooby or Marieke