

CHILD PROTECTION POLICY FOR WESTERN BOP PRIMARY HEALTH ORGANISATION GENERAL PRACTICE

Issued by	Te Puke Medical Centre
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1. Overview

On 1 July 2014 the Vulnerable Children Act and other associated legislation passed into law. The Children's Action Plan and the Vulnerable Children Act 2014 rest on the belief that no single agency alone can protect vulnerable children. Chief Executives from the Ministries of Education, Health, Justice, Social Development and the NZ Police must jointly report against a vulnerable children's plan.

2. Purpose: To provide information and processes to improve identification and reporting of child abuse and neglect.

It recognises the important role and responsibility staff have in the accurate detection of suspected child abuse ad/or neglect, and the early recognition of children at risk of abuse, and also ensures that any services provided or actions taken in respect of child abuse, neglect or suspected or potential child abuse and neglect situations are guided by this organisations Child Protection Policy.

- **3. Scope**: This policy applies to all staff working within the Western BOP Primary Health Organisation (WBOPPHO) and its subcontracted Providers.
- **4. Identification:** Child protection concerns can arise either by disclosure, or recognition of signs and symptoms in a child receiving services from any WBOPPHO services. It also includes child protection concerns related to a child indirectly involved with the child or another child living with or visiting the household.

Staff need to:

I. be aware of the signs of potential abuse Physical signs

Behavioural concerns

Developmental delays, changes or signs the child talking about things that indicate abuse (sometimes called an allegation or

disclosure)

II. be aware of the signs of potential neglect Physical neglect

Neglectful supervision

Medical neglect Abandonment

III. Understand that every situation is different, and it is important to consider all available information and their environment before reaching conclusions.

5. Roles and responsibilities:

Management Responsibilities

- Worker Safety Checks will be undertaken as required by the Vulnerable Children Act 2014.
 Each worker safety check will be repeated within 3 years of the previous one.
- Provide training and updates for staff appropriate to their area of work
- When reported by a staff member, take action when child abuse is suspected or identified by a member of staff

Staff Responsibilities

- Be aware alert to the signs and symptoms of neglect or abuse
- Take appropriate action to protect the well being and safety of children and young people, whether the child/young person is directly or indirectly a client/patient of the service.
- Attend child protection meetings as and when required.

Staff Roles

- The role of the health professional is a preliminary risk assessment only in order to assess
 the level of immediate risk to the child or young person and/or identify appropriate reporting
 or referral options.
- It is the responsibility of the health practitioner to provide appropriate information to Agencies and provide appropriate health follow up and support.
- It is the responsibility of CYF to ensure Care and Protection and assist the police to investigate allegations of Child Abuse and Neglect.

Staff who identify child protection concerns should consult with at least one of the following:

- Senior member of staff
- Child and Family Social worker
- Community Child Health Service Manager
- Child Youth & Family
 - o CYF
 - o Tauranga
 - o 94 Grey Street, Level 1, West Plaza, Tauranga
 - o Phone 0508 326 459
 - Email: cyfcallcentre@cyf.govt.nz

If there is an immediate safety issue, the staff member should phone the police in the first instance.

- Clinical staff must follow up their own referrals to CYF.
- The senior member of staff must be consulted regarding any police or CYF notifications.

6. Communication

Informing parents/caregivers of a referral

Communication with the child's parents or caregivers that a referral to the police of CYF has been made should be managed with consideration to the safety of the child, staff and other family members. **Do not inform the caregivers unless it is safe to do so**.

Informing the client/caregivers of a referral should be undertaken in a safe environment for both staff and the client, parents or caregivers e.g in the general practice or by telephone. Communication with the client/caregiver must only occur after consultation with a senior member of staff.

Privacy issues

There is no issue of breach of confidentiality where staff report valid child protection concerns to police or CYFS. The CYFS Act provides specific protection from legal action to anyone reporting to CYFS in good faith. Health workers are able to release information to Child Youth and Family Services or the NZ Police in the following circumstances:

- There is concern for a child's immediate safety
- A client/parent is the (suspected) abuser holds information relevant to care and protection issues under investigation by Child, Youth and Family.

Child, Youth and Family can apply for a court order requesting WRHN staff to produce documents relevant to suspected child abuse and may be required to do so under (sections 59 - 64 of the Children, Young Persons and Family Act 1989). Section 22C of the Health Act 1956, and Rule 11 of the Health Information Privacy Code 1994, provide guidance on when health information can be released.

7. Documentation

Clinical staff are required to document the following in the clinical notes:

- Observations and assessments use the Child's Body Diagram, as appropriate
- Discussion with senior staff member and others
- Documentation of what was reported to CYF

8. Security

For circumstances where the safety of the child, family or staff member is at high riskstaff are to:

- Consult with senior member of staff
- Arrange appointment with the family at a venue outside of the home
- Visit in pairs or carry a mobile phone

9. Placing a Child Protection Alert

Full documentation is required to alert others on this situation, with the notation of "Child Protection Alert" recorded in the child's clinical record. Note, the absence of an alert does not mean there is no child protection concerns and the presence of an alert does not mean the child is currently at risk.

10. Staff Support

- Staff can access support with a senior colleague/team leader
- The Employee Assistance Programme (EAP)
- Debrief process as required within 1 week, e.g supervision, case review, discussion with senior colleague or the Chairperson WBOPPHO Clinical Committee.

11. Incident reporting

Staff are to complete an incident report for any related issues, for example threats of harm because a CYF referral is being made.

12. Information to staff and training

Staff will be informed of this policy, and training/updates to front-line staff, as required.

13. Measurement

- I. Documented evidence of completed police checks on all employees personnel files
- **II.** Documented evidence that the WBOPPHO Protection Procedure has been followed when there is concern about child abuse/neglect.
- III. Documented evidence of safety checks on employees every three years
- IV. Documented evidence of professional training for personnel working on child health service delivery

14. Definitions

Child/tamariki Individuals aged 0-14 years

Young person/rangatahi Individuals aged 15 – 17 years

Child protection The activities carried out to ensure the safety of the

child/tamariki and young person/rangatahi, in cases where

there is abuse or neglect.

Physical abuse Any act or acts that may result in physical injury to a child

or young person

Sexual abuse Any acts or acts that result in sexual exploitation of a child

or young person, whether consensual or not

Emotional Abuse Any act or omission that results in impaired psychological,

social, intellectual and or emotional functioning and

development of a child or young person

Neglect Any act or omission that results in impaired

physical/emotional functioning, injury and or development

of a child or young person

Non-accidental injury Includes any injury inflicted and violence directed at a child

or young person

Child, Youth & Family The agency responsible for investigating and responding

to suspected abuse and neglect, and to provide care and

protection to children found to be in need.

Childrens worker Anyone who may have regular or overnight contact with a

child AND this takes place without a parent or guardian

present.

Safety check Identity check, police vetting, pre-employment screening

15. References

Legislation – Vulnerable Children Act 2014: http://www.legislation.govt.nz/act/public/2014/0040/latest/whole.html

Child, Youth & Family: http://www.cyf.govt.nz/working-with-others/working-together-to-keep-children-and-young-people-safe.html

Privacy Act and Health Information privacy Code: https://www.privacy.org.nz/the-privacy-act-and-codes/codes-of-practice/health-information-privacy-code/

Police Vetting: http://www.police.govt.nz/advice/businesses-and-organisations/vetting