

# POLICY AND PROCEDURE

## Jesuit Social Services



### WORKING WITH CHILDREN, YOUNG PEOPLE & FAMILIES

<b>Policy Classification</b>	<b>Section (Category)</b>	Programs	
	<b>Number</b>	6.1.23	
	<b>Version</b>	5	
	<b>Level</b>	Level 2 Executive Approval	
	<b>Issue Status</b>	Current	
	<b>Effective Date</b>	March 2013	
	<b>Written By</b>	Executive Director of Programs	
	<b>Approval</b>	Jesuit Social Services Executive	
<b>Policy Description</b>	<b>Purpose</b>	To ensure that the well being of children, young people and families underpins decision making and program planning, delivery and review.	
	<b>Scope</b>	All staff	
	<b>Policy Review</b>	Due: December 2018	
		<b>Last date of review</b>	<b>Reviewed by</b>
December 2015		Executive Director of Programs	
April 2015	Executive Director of Programs		
March 2013	Executive Director of Programs		
<b>Law</b>	<b>Relevant key legislation, regulations and amendments</b>	<ul style="list-style-type: none"> <li>- Children Youth and Families Act 2005</li> <li>- Crimes Amendment (Protection of Children) Act 2014</li> <li>- Working with Children Act 2005 (Vic)</li> <li>- Child Wellbeing and Safety Act 2005 (Vic)</li> <li>- The Charter of Human Rights &amp; Responsibilities Act 2006 (Vic)</li> <li>- Family Law Act 1975 (Cth)</li> <li>- Occupational Health and Safety Act 2004</li> <li>- Victorian Crimes Act 1958.</li> </ul>	
<b>Policy</b>	<b>Policy Statement</b>	<p>Jesuit Social Services believes the well being of children, young people and families is of paramount importance. The Children Youth &amp; Families Act 2005 (Vic) provides the legislative basis for the provision of services to vulnerable children, young people and their families. Jesuit Social Services believes the best protection for children and young people is usually within the family, however, if additional support is needed to address issues we have a responsibility to involve the Child Protection or Child First services.</p> <p>This responsibility includes children (aged 0-16 years) who are utilising our services and children who accompany parents/carers who are utilising Jesuit Social Services' programs.</p> <p>Jesuit Social Services also acknowledges its legislative and community obligations including the Working with Children Act 2005. This Act requires</p>	

		<p>all who work or volunteer in child-related areas to undergo a Working with Children Check (WWC). Under this policy children will be supervised at all times while on Jesuit Social Services premises by workers and volunteers holding a Working With Children Check. In these situations workers and volunteers must ensure the safety of the children under their supervision at all times.</p> <p>Jesuit Social Services also acknowledges its duty of care to all participants see <i>Practice Framework – Duty of Care</i> in Jesuit Social Services programs.</p> <p>Finally, under the Occupational Health and Safety Act 2004, Jesuit Social Services is responsible for the health and safety of all who enter its premises.</p>
	<b>Related Policies</b>	<ul style="list-style-type: none"> <li>• Practice Framework – Duty of Care</li> <li>• Responding appropriately to disclosures and allegations of sexual and other criminal abuse</li> <li>• Child Safety</li> </ul>
<b>Procedure</b>	<b>Area</b>	<p>Jesuit Social Services staff recognise the importance of the safety and well being of children and young people in their programs. Staff are trained in the stages of child development and consider the developmental needs and milestone attainments of children and young people in their case planning. Staff development will maintain currency of skills in this area and the Strong Bonds project will be a vehicle in which to carry out this training.</p> <p>Jesuit Social Services also has an appointed Child Safety &amp; Professional Standards Officer (Manager Learning &amp; Practice Development) whose role is to oversee the adherence to practice and policy standards and to act as a resource for staff and volunteers regarding the safety and well-being of children in our organisation.</p> <p>Jesuit Social Services programs involved with vulnerable young people and their families/carers, including families with an unborn child, may consider that a family requires additional support and may consider reporting or referring a concern about the child or young person to the Department of Human Services <b>Child Protection</b> or to the regional <b>Child FIRST</b> Service.</p> <p><b>Child FIRST</b> may be the best way of connecting children, young people and their families/carers to the services they need when there are concerns about any of the following:</p> <ul style="list-style-type: none"> <li>• Significant parenting problems that may be affecting the child or young person’s development</li> <li>• Severe conflict</li> <li>• Mental illness, substance abuse, disability or bereavement</li> <li>• Social isolation</li> <li>• Social or economic disadvantage that may adversely impact on a child or young person’s care or development.</li> </ul> <p><b>Child FIRST</b> is also a useful point for secondary consultation.</p> <p>A report should be made to <b>Child Protection</b> when concerns are more serious and include:</p> <ul style="list-style-type: none"> <li>• Physical abuse or, non accidental or unexplained injury to a child or young person</li> <li>• Disclosure of sexual abuse by a child or young person, or a combination of factors suggesting the likelihood of sexual abuse (eg.</li> </ul>

the child exhibiting concerning behaviours or where a known or suspected perpetrator has had unsupervised contact with the child or young person)

- Emotional abuse and ill treatment of a child or young person
- Persistent neglect, poor care or lack of appropriate supervision where there is a likelihood of significant harm to the child.
- Persistent family violence or parental/carer substance misuse, psychiatric illness or intellectual disability – where there is a likelihood of significant harm to the child
- Where a child or young person's actions place them at risk of significant harm
- Where a child or young person appears to have been abandoned and there is no person adequately caring for the child or young person.

See Types and Indicators of Child Abuse at Appendix A

Child Protection has an afterhour's service that is available outside of normal business hours.

### **Procedure for contacting Child FIRST or Child Protection**

1. In all instances where there are concerns about the welfare of a child or young person, the degree of risk should be discussed with line management. The decision about whether the risk is sufficient to make a referral to **Child FIRST** or a notification to **Child Protection** will be made in consultation with the relevant Manager.
2. Where possible concerns should be discussed with the parent/carer.
3. Jesuit Social Services staff must record concerns and discussions accurately and concisely in participant files.

**Child FIRST** and **Child Protection** will request information including:

- Name, address and age of the child/young person
- Reason for notification
- Assessment of immediate danger
- Current whereabouts of child/young person
- Schools/groups or other professionals involved with the child/young person/family/carer
- Known medical conditions
- Your relationship to the child
- Whether the family/carer is aware that a notification is being made and their possible response to Child Protection.

A notification can be made despite gaps in this information.

**Child FIRST** and **Child Protection** will carry out a risk assessment and provide advice/take action as necessary.

### **Minimising risk when Jesuit Social Services is supporting families with children/young people on site at Jesuit Social Services premises.**

In general when working with children/young people and their families Jesuit Social Services is responsible for ensuring that:

- Effective measures are implemented to eliminate or reduce the risk to children's and young people's health and safety while with Jesuit

#### Social Services.

- Referrals are made to children's support services and programs as appropriate.
- Services are conducted on an outreach basis where possible.
- When a parent or carer attends Jesuit Social Services offices the worker will determine whether the matter can be dealt with solely through the provision of information and in this situation the child may attend the interview with the parent.
- Parents requiring more in-depth counselling/support will be asked, and if necessary assisted, to arrange child-care while this counselling occurs.
- Parents wishing to attend Jesuit Social Services programs on an ongoing basis will need to make their own child care arrangements. Jesuit Social Services staff will provide parents with information from local councils on community child care including occasional care, family day etc.
- If parents constitute the major component of a new Jesuit Social Services program, staff should consider parents' child care needs and develop protocols with local community child care services as part of the program development and implementation.
- Parents attending Jesuit Social Services Perry House accommodation facility may receive visits from their children if the visit is arranged in advance, a Jesuit Social Services worker is present at the site and the other residents have been informed of the visit.
- Parents attending Jesuit Social Services Rooming House accommodation should ensure contact visits with their children are made off site and with the prior knowledge of their case worker.

## Appendix A: Types and Indicators of Child Abuse

There are various types of child abuse including physical harm, sexual harm, emotional harm & neglect.

**Please note:** The presence of an indicator **does not always** indicate that a child is being abused; and the absence of the indicators listed below does not indicate that the child is **not** being abused.

### Physical Harm

**Physical** indicators may include:

- Bruises, burns, sprains, dislocations, bites, cuts, welts, fractured/broken bones
- Poisoning
- Internal injuries
- Shaking or strangulation injuries.

**Behavioural** indicators may include:

- Disclosure
- The child or young person or expressing little emotion when hurt
- Unlikely explanation of and hiding of injuries
- The child or young person demonstrating a fear of parents/carers and being reluctant to go home
- The child or young person showing fear when hearing others cry or shout
- The child or young person being excessively friendly to strangers
- Passivity and quietness, nervousness, hyperactivity, aggression.

### Sexual Abuse

**Physical** indicators may include:

- Injury to the genital or rectal area, vaginal bleeding or discharge
- Discomfort in urinating or defecating
- Sexually Transmitted Infections or frequent Urinary tract infections
- Anxiety related illnesses.

**Behavioural** indicators may include:

- Disclosure
- Persistent and age inappropriate sexual activity or sexually explicit & age inappropriate drawings
- Regressive behaviour such as bedwetting and speech loss
- Self harming behaviour such as substance use, sex work and self mutilation
- Rocking sucking and biting
- Signs of depression
- Complaining of headaches or stomach pains or difficulties sleeping.

### Neglect

**Physical** indicators may include:

- Frequent hunger and/or malnutrition
- Poor hygiene
- Inappropriate clothing
- Lack of supervision
- Medical needs not attended to
- Failure to thrive.

**Behavioural** indicators may include:

- Stealing food
- Staying at school outside school hours
- Tiredness, falling asleep
- Substance use
- Aggression
- Inability to relate well to peers
- Indiscriminate with affections.