

Name of Policy:	Child Safety and Wellbeing Policy
Policy Number:	P01-45
Purpose of Policy:	To create and maintain a child safe organisation, compliant with Victorian Child Safe Standards.
National Standard Applicable:	Governance
Policy Applies to:	☒ All Staff ☐ Management
Approval Authority:	Safety and Quality Management Committee
Document Author:	Banksia NUM
Responsible Officer:	Chief Executive Officer
Policy Date:	October 2024

Policy Statement

Mildura Health Private Hospital (MHPH) is committed to ensuring the safety and wellbeing of all children who access our services. We acknowledge the importance of creating a safe and supportive environment that protects children from harm and promotes their best interests.

This Child Safety Policy outlines our commitment to meeting the *Child Safe Standards* set by the Victorian Government and clearly states the expectations associated with each standard.

Statement of Commitment to Child Safety

It is our commitment to empower children, who are vital and active participants at MHPH. We involve them when making decisions, especially about matter that directly affect them. We listen to their views and respect what they have to say. We promote diversity and acceptance at MHPH, and people from all walks of life and cultural backgrounds are welcome.

In particular, we:

- Promote the cultural safety, participation and empowerment of Aboriginal children.
- Promote the cultural safety, participation and empowerment of children from culturally and/or linguistically diverse backgrounds.
- Ensure that children with a disability are safe and can participate equally.

Definitions

Child or Children: Typically refers to an individual who is under the age of 18 years. This definition is based on the general understanding of childhood and legal definitions in many jurisdictions, including Victoria, Australia.

Child Abuse: Any form of physical, emotional, or sexual mistreatment or lack of care that leads to harm, potential harm, or threatens the child's safety, wellbeing, or dignity.

Reportable Conduct: Incidents or allegations that must be reported under the Reportable Conduct Scheme, including specific types of harm or misconduct towards children as defined by the Child Wellbeing and Safety Act 2005.

Mandatory Reporting: Legal obligation requiring certain professionals, such as registered medical practitioners and nurses, to report suspected child abuse or neglect to the appropriate authorities, based on specific criteria and reasonable grounds for belief.

Page 1 of 6	Author: Banksia NUM	Approved by: CEO
Document Number: P01-45(3)		Review Date: October 2027
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Working with Children (WWC) Check: A screening process to assess a person's criminal record and professional conduct, determining their suitability to work with children by ensuring they do not pose an unjustifiable risk to children's safety and wellbeing.

Scope

The Mildura Health Private Hospital Child Safety and Wellbeing Policy covers all hospital areas where children are present, involves all personnel, emphasises training, reporting mechanisms, compliance with Victoria Child Safe Standards, continuous improvement, and collaboration with stakeholders.

Victorian Government Child Safe Standards

These Standards were introduced in response to the Victorian Parliament's Betrayal of Trust Inquiry. The Standards aim to drive cultural change so that protecting children from abuse is imbedded in the everyday thinking and practice of organisational leaders, staff, and volunteers.

The Child Safe Standards align with MHPH's values of honesty, fairness, and respect for the rights of others.

What are the Child Safe Standards?

There are 11 Child Safe Standards. These Standards commenced on 1 July 2022 and replace the Child Safe Standards that were established in 2016. The Child Safe Standards aim to protect children and young people, by requiring organisations to put policies, procedures, and processes in place to prevent and respond to abuse. They aim to make keeping children and young people safe a key focus of organisations in Victoria.

The Child Safe Standards help organisations to:

- Promote the safety of children.
- Prevent child abuse.
- Ensure effective processes are in place to respond to and report allegations of child abuse.
- Encourage children to 'have a say', especially on issues that are important to them or about decisions that affect their lives.

Child Safe Standard 1 - Relevant entities establish a culturally safe environment in which the diverse and unique identities and experiences of Aboriginal children and young people are respected and valued.

Child Safe Standard 2 - Child safety and wellbeing is embedded in organisational leadership, governance and culture.

Child Safe Standard 3 - Children and young people are empowered about their rights, participate in decisions affecting them and are taken seriously.

Child Safe Standard 4 - Families and communities are informed and involved in promoting child safety and wellbeing.

Child Safe Standard 5 - Equity is upheld and diverse needs respected in policy and practice.

Child Safe Standard 6 - People working with children and young people are suitable and supported to reflect child safety and wellbeing values in practice.

Child Safe Standard 7 - Processes for complaints and concerns are child focused.

Child Safe Standard 8 - Staff and volunteers are equipped with the knowledge, skills, and awareness to keep children and young people safe through ongoing education and training.

Child Safe Standard 9 - Physical and online environments promote safety and wellbeing while minimising the opportunity for children and young people to be harmed.

Child Safe Standard 10 - Implementation of the Child Safe Standards is regularly reviewed and improved.

Child Safe Standard 11 - Policies and procedures document how the relevant entity is safe for children and young people.

Responsibilities and Roles

Board Members:

- Understand and endorse the Child Safe Standards and the hospital's commitment to implementing and upholding these standards.
- Ensure that adequate resources and support are allocated to maintain a child-safe environment within the hospital.
- Review and approve policies related to child safety and wellbeing.
- Monitor compliance with the Child Safe Standards and hold leadership accountable for implementation.

Management:

- Provide visible and active leadership in promoting a child-safe environment throughout the hospital.
- Allocate necessary resources, support, and time for staff training, education, and implementation of child safety policies.
- Regularly review and evaluate the effectiveness of the hospital's Child Safety and Wellbeing Policy, ensuring its alignment with the Victoria Child Safe Standards and making any necessary improvements.

Staff:

- All staff members are responsible for maintaining a safe environment for children and reporting any concerns promptly.
- Participate in mandatory training and awareness programs regarding child safety, abuse identification, and reporting procedures.
- Actively engage in promoting a culture that prioritises child safety, including modelling appropriate behaviour and maintaining professional boundaries.
- Report any observed or suspected instances of child abuse or neglect following hospital protocols and procedures.

Doctors:

- Ensure that interactions with children and their families prioritise the child's safety, comfort, and wellbeing.
- Collaborate with hospital staff to provide care in a manner that upholds child safety standards and respects the rights of children.
- Familiarise themselves with reporting protocols and immediately report any suspicions or concerns about child abuse or neglect.

Volunteers:

- Adhere to the hospital's policies and procedures concerning child safety and wellbeing.
- Undergo training and orientation specific to child safety standards before engaging in any activities involving children within the hospital premises.
- Report any observed or suspected instances of child abuse or neglect according to hospital protocols.

Students:

- Follow all hospital policies and procedures related to child safety and wellbeing during their placement or educational programs within the hospital.
- Participate in orientation and training sessions specifically addressing child safety standards and reporting mechanisms before engaging in any activities involving children at the hospital.
- Report any observed or suspected instances of child abuse or neglect according to hospital protocols and seek guidance from supervising staff or designated authorities.

Contractors:

- Comply with the hospital's policies and procedures related to child safety while working within the hospital.
- Participate in any required training or orientation related to child safety and understand reporting procedures.
- Report any observed or suspected instances of child abuse or neglect according to hospital protocols.

Reporting Requirements

Reportable Conduct

Under the Reportable Conduct Scheme, reportable conduct includes allegations against workers or volunteers of child abuse and misconduct involving children. *Reportable Conduct* is defined in the *Child Wellbeing and Safety Act 2005* to include:

- A sexual offence committed against, with or in the presence of, a child;
- Sexual misconduct, committed against, with or in the presence of, a child; or
- Physical violence committed against, with or in the presence of, a child; or
- Any behaviour that causes significant emotional or psychological harm to a child; or Significant neglect of a child.

Prior to reporting, staff will inform an appropriate senior staff member of their concerns and subsequently notify the MHPH Chief Executive Officer (MHPH CEO).

The Reportable Conduct Scheme requires that the MHPH CEO is made aware of any allegation and that there is an appropriate response to the allegation.

The Reportable Conduct Scheme requires allegation of suspected criminal conduct to be reported to Victoria Police as the first priority and maintains the primacy of an investigation by Victoria Police of any allegations of criminal misconduct. In all circumstances, allegations of criminal conduct must be reported to Victoria Police as the first priority.

The amendment of the *Crimes Act 1958 (Vic)* introduced two sexual-related offences which are:

- Failure to disclose.
- Failure to protect.

Failure to disclose: a person failing to disclose to the Victorian Police, as soon as practicable to do so, the reasonable belief that a sexual offence has been committed against a child under 16 years by another adult. Failure to disclose is a criminal offence that imposes a clear legal duty of all adults, not just professionals, in Victoria to report child (under 16 years) sexual abuse to Police.

Failure to protect: a person in a position of authority within organisations who knew of child sexual abuse by someone in the organisation and had the authority to reduce or remove the risk, but negligently failed to do so.

Mandatory Reporting

All registered medical practitioners and nurses are required under the *Children Youth and Families Act 2005* who, in the course of practising his or her profession forms the belief on reasonable grounds that a child is in need of protection must report the belief and the reasonable grounds for it as soon as practicable.

To complete a Child Safe Report at MHPH for suspected child abuse, staff must:

Immediate Action:

- Observe and assess the situation, ensuring the child's safety and immediate needs are met, if necessary.

Report Protocol:

- Report suspicions or observed incidents of child abuse promptly to the designated Child Safety Officer or appropriate authority within the hospital. The Director of Clinical Services is the nominated Child Safety Officer.

Documentation:

- Accurately document all details and observations using the hospital's prescribed reporting system (Riskman), including date, time, location, individuals involved, and specifics of the incident.

Confidentiality:

- Maintain confidentiality throughout the reporting process while sharing information only with authorised personnel or external agencies as required by law.

Support for the Child:

- Ensure the child receives appropriate care, support, and, if necessary, referrals to specialised services for their safety and wellbeing.

Follow-Up:

- Cooperate with internal and external authorities as needed for further investigation and support, adhering to hospital policies and legal requirements while providing ongoing assistance to the child and their family.

Working with Children (WWC) Check

The WWC Check helps protect children from physical and sexual harm by screening people's criminal records and professional conduct and preventing those who pose an unjustifiable risk to children from working with or caring for them.

The *Working with Children Act 2005* has been amended to expand the definition of 'direct contact' to include the following types of contact:

- Face-to-face contact.
- Contact by post or other written communication.
- Contact by telephone or other oral communication.

- Contact by email or other electronic communication.

In response to this, MHPH requires that all hospital employees have a current Employee WWC Check. To meet this requirement, internal processes have been implemented to ensure that all existing MHPH employees have a current WWC Check, and that all new employees provide a current WWC Check prior to commencement of employment (this is monitored via the MHPH Corporate Services Office processes).

It is an offence to undertake 'child-related work' if employees do not hold a valid Check. Each Check is valid for five years (unless a relevant change in circumstances results in a negative notice being issued before the expiry date). Employees may apply for a new Check six months before or up to three months after the expiry date.

Related Policies:
P01-42 Incident Reporting and Management Policy
P01-39 Code of Conduct
Related Procedures:
Related Forms:
References:
• <u>Child Wellbeing and Safety Act 2005</u> (the Act) • <u>Child Wellbeing and Safety Regulations 2017</u> • <u>Working with Children Act (2005)</u> • <u>Worker Screening Act 2020</u> • <u>Victorian Government Child Safe Standards</u> (July 2022) • Working with Children / Child Safe Standards – Reportable Conduct: Private Hospitals and Day Procedure Centres publication (August 2017)

Revision Date	Revisions Made
January 2024	Reviewed. Significant changes to the content to align with the Victorian Child Safety Standards
November 2018	Document created