



Children & Young People Reporting Policy

Guiding Values

In keeping children and young people safe, the following values are a mechanism for guiding our actions and assisting in decision-making, they are a reference to which personnel can refer, to ensure their responsibilities to children and young people are upheld;

- Safeguarding children and young people is a shared responsibility, it is reliant on all
 individuals within our organisation to keep children and young people safe in our
 care.
- Any form of abuse or neglect towards children and young people will not be tolerated and immediate action will be taken upon report of any suspected harmful or abusive behaviours.
- The best interest of the child will be the primary consideration in all actions and decisions concerning the safety or wellbeing of a child or young person.
- We are accountable to the children and young people we work with by fostering high ethical standards in a culture of openness and transparency.

We empower children by informing them of their rights and responsibilities and support them to speak up about any matters of importance to them, including if something goes wrong. We work to include the participation of children and young people in decision making regarding any services or other matters affecting them.

1.Purpose

This policy forms part of our zero-tolerance towards abuse and neglect of children and young people

The purpose of the Reporting Policy is to ensure all instances, allegations, disclosures or reasonable concerns of abuse or neglect involving children and young people, are accurately reported, and responded to in a consistent, timely and sensitive manner. This policy has the explicit approval of and is endorsed by TassieCare Directors.

This policy also outlines the responsibility of personnel to report any concern with breaches or actions of other personnel within our organisation that contravene our policies and procedures, such as outlined in our **Code of Conduct.**

Compliance with this policy ensures all incidents are reported and managed in a way that is responsive to the immediate circumstances of the incident, the rights of those involved, and wherever possible, any risks of recurrence are minimised.

This policy assists personnel to:

- recognise the different types of abuse and neglect.
- respond to the immediate needs of individuals involved in an incident (including personnel)
- guide responses to allegations and matters of concern, including breaches of our Code of Conduct
- follow our organisations reporting procedures.





 ensure their legal responsibilities when working with children and young people are upheld.

Our policies and procedures reflect child safe legislation and promote best practice and care for the children and young people within our organisation. Our *director* approves and endorses our *TassieCare Reporting Policy*.

2.Scope

The Reporting policy applies to all personnel, including employees, casual staff, Director and leadership team members, volunteers and contractors involved with TassieCare.

This policy applies in all our operational environments and without fail wherever children and young people are participating in our organisation's activities, programs, services and / or facilities.

3. Responsibilities

All personnel within our organisation have a duty of care, and at times a legal obligation, to ensure that 'reasonable steps' are taken to prevent harm to children and young people. All personnel are responsible for supporting a transparent culture, whereby any actions by personnel that go against our Code of Conduct and Safeguarding Children and Young People Policy, however minor, are reported and documented.

Consequences of breaching policy

If our personnel fail to report instances, allegations, disclosures, or concerns in relation to abuse or neglect of a child or young person – by personnel within our organisation or by others – we view such failure as a serious matter that, depending on the circumstances, may result in disciplinary action or be grounds for dismissal. Failure to report incidents of abuse, neglect and harm of child or young person may be classed as a criminal offence under state law.

Our personnel are obligated to report any information relating to:

- Incidents, allegations, disclosures, or reasonable concerns in relation to abuse or neglect of a child or young person, either by personnel within our organisation or by others
- Any breaches or actions of other personnel within our organisation that contravene our policies and procedures, such as outlined in our Code of Conduct.

Our policy prohibits all personnel from:

- discussing any concerns or allegations with unauthorised personnel within or
 outside our organisation such prohibition not being designed to limit, in any way,
 their rights and responsibilities to report their concerns or allegations, but rather as
 part of our organisation's commitment to ensuring privacy, confidentiality and
 natural justice.
- making deliberately false, misleading, or vexatious allegations.





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All children and young people within our organisation are informed of our policy and provided with the support and mechanisms to feel empowered to speak up if they feel unsafe, hear something, or see something that doesn't feel right. Our organisation upholds a child's rights to be heard, protected, and supported.

In adhering to this policy, personnel of TassieCare will promote equity and respect diversity of the children and young people and their parents/care givers who access our services and inform children and young people of their rights to feel and be safe. This includes Aboriginal and Torres Strait Islander children, children from culturally and linguistically diverse backgrounds and children, young people with a disability, LGBTQI+ children, and children who cannot live at home. Our organisation upholds a family's right to have their concern resolved and done so in a culturally respectful and safe way.

The responsibility of each role in relation to the development and compliance of the TassieCare Reporting Policy is detailed in section 11 of this policy.

Complaints Handling

TassieCare prioritises children and young people's rights, safety, and wellbeing, including the right to make a complaint via formal or informal mechanisms. A complaint can include expressions of dissatisfaction about:

- the TassieCare services or dealings with individuals
- allegations of abuse or misconduct by personnel or another individual associated with the organisation
- disclosures of abuse or harm made by a child.
- the conduct of a child at TassieCare
- the inadequate handling of a prior concern
- general concerns about the safety of a group of children or activity

Any complaint made by a child or young person will be responded to and investigated promptly in-line with TassieCare Complaints Handling Policy

Prevention and Preparedness

All of our personnel are provided with our **Code of Conduct** and **Safeguarding Children and Young People Policy** which clearly detail the behavioural expectations of personnel around children and young people. Personnel are advised that any breaches, including minor breaches, to these policies are required to be reported.

It is all personnel's responsibility to identify and assess potential risks in ongoing programs and one-off activities. Personnel should consider the online, physical, or psychological risks. associated with activities and develop and implement risk mitigation strategies to address those risks, in line with our organisations *Risk Management Policy*.

Our organisation creates a safe environment for children and young people. Our personnel use strategies to support and encourage children and young people to practice safe behaviours amongst personnel and their peers and speak up if they feel unsafe.





4.Key Steps

There are four critical steps that everyone in our organisation must follow regarding all incidents, allegations, disclosures or reasonable concerns of abuse or neglect, or breaches of policy where appropriate:

- I. Responding
- 2. Reporting
- 3. Sharing of Information
- 4. Supporting

4.1 Responding

Responding to an incident

Immediate responses include the care, support and communication actions that take place immediately following an incident to mitigate further harm and ensure the safety of children and young people / other service users, families, and personnel.

- 1. Reduce the harm and risk of harm to those impacted by the incident including by:
- making the surroundings safe to prevent immediate recurrence of the incident, for example.
 - o removing potentially harmful person(s)
 - o increase supervision of children and young people
 - o move uninvolved children and young people away from incident.
- moving to a safe place
- alerting others to risks that extend beyond the local environment, for example, other areas within the organisation.
- Calling Emergency Services if required 000.
- **2.** Provide immediate care and support to child or young person / other service users, families, personnel, and others involved in the incident including addressing:
- physical well-being e.g. providing first aid or arranging medical treatment if a person suffers any harm or injury as a result of the incident; and
- emotional well-being (including psychological) e.g. arranging for coverage of duties and supervision facilitating access to counselling, debriefing and support for others involved in the incident.
- **3.** Where possible, preserve evidence in situations where allegations or suspicions of abuse and neglect has occurred. This can include.
- ensuring that clothes worn by the person who may have perpetrated the abuse and the child or young person who has been subject to the abuse remain in their clothing, or the clothing is not washed and is sealed securely in a bag.
- not cleaning or disturbing the area in which the abuse has occurred.
- protecting any physical items such as weapons from being touched or removed.

Responding to a disclosure/allegation

- When responding to a disclosure or allegation by a child or young person, personnel should respond by;
- listening to the allegation or disclosure supportively, without dispute





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- clarifying the basic details, without seeking detailed information or asking suggestive or leading questions, guided by our organisation's Incident Report Form
- providing reassurance that the child or young person has done the right thing in telling you, are believed and our organisation will take immediate action in response to the disclosure / allegation.
- explaining to the child or young person that other people may need to be told, in order to stop what is happening. Do not promise to keep any information a secret.
- reporting the matter as per organisational policy requirements to the Safeguarding Coordinator / Case Manager.
- record notes as early as possible to ensure all information is captured before completing our organisation's *Incident Report Form*.

In your responses you will need to consider the specific needs of the child or young person. Consider the unique qualities of a child including, for example, whether the child is Aboriginal or Torres Strait Islander, has a disability, identifies as LGBTQI+ has a culturally and linguistically diverse background and/or is unable to live at home.

Responding to a complaint

Information on how an adult or child can make a complaint can be found in our *Complaints Management Policy* When responding to a complaint made by a child or young person (or by another individual on behalf of a child or young person) all personnel should follow the steps outlined in the *TassieCare Complaints Management Policy*. Where the complaint relates to a disclosure or allegation against a member of personnel, follow the same steps listed in the above 'Responding to a disclosure/allegation' section.

Personnel should also;

- answer any questions the child or young person asks.
- give clear advice about what will happen next.
- Provide any information about how they will be supported.

Responding to alleged abuse and harm of a child by another child/young person

Responding to harm and abuse of a child by another child or young person may require Child Protection intervention, and/or other additional support services for all children/young people involved.

Children and young people who display harmful sexual behaviours require specific responses and supports that carefully examine the nature of their behaviours, developmental considerations, and any other contextual and contributing factors.

Any allegation or incident of this nature should immediately be reported to *Safeguarding Officer* to determine the appropriate internal and external reporting requirements.

Responding to a breach of policy or procedure

Whilst an incident and or disclosure or allegation could include a breach of the Code of Conduct and Safeguarding Children and Young People Policy, if there is no immediate response required as identified above, it is still deemed an incident, and therefore required to be





reported and documented as with all other incidents. Personnel are also required to formally report any concerns for breaches to our organisation's policies and procedures by other personnel within our organisation.

4.2 Reporting

Once the immediate response to the situation is completed, it is important to fulfill the internal and external reporting requirements.

Our personnel are required to report any reasonable concerns or instances of abuse or neglect (cases in which a child or young person has suffered, or is likely to suffer, significant harm from abuse or neglect) by any person immediately, or if that is not possible, no later than before ending that person's shift or session of work with our organisation.

Personnel should follow the guidance on the *Incident Report Form which is located on Visual Care* to complete the form accurately and to the best of their ability. All reports must be documented fully and written factually and objectively. Clear and accurate reporting can assist to support any internal or external investigation which may be required after an incident.

It is not the role of personnel to identify or investigate an allegation or concern, however personnel must continually report each new instance of suspicion of harm and / or breach of policy as they become aware, and to seek advice from their Case Manager/ Line Manager when they are unsure.

Key Reporting Contacts	
Primary Key Internal Contact	Safeguarding children coordinator: 03 6421 6066 TassieCare Director: 03 6421 6066
Alternate Key Internal Contact If the primary contact is not available or subject to the complaint	Direct Service manager 03 6421 6066 On Call Case Manager: 0484 788 106
Key External Contact	Tasmanian Emergency Services 000 Police, Fire, & Ambulance.

Internal reporting requirements

The Incident Report template is available on Visual Care are accessible to all personnel. All personnel are trained in the Reporting requirements, location and completion of forms and notification requirements and support available. All incidents including minor incidents must be recorded on an Incident Report Template which is forwarded to the Compliance Officer All incidents are entered into the Incident Register.

I. In adherence to internal reporting requirements, personnel must; Report any safety or wellbeing concerns for a child or young person, and / or breach of policy and procedures to the: Safeguarding Coordinator / Case Manager





If a person does not feel comfortable making a report to the Safeguarding Coordinator / Case Manager , or the report is about that person, they must report their concern directly to the: Direct Service manager

An Incident Report should be completed as soon as possible following an incident by the attending personnel and signed off by Safeguarding Coordinator / Case Manager. Reports must include:

- details of the person/s involved
- date, time, location of the incident/disclosure/allegation
- incident type and how incurred
- what was said, and relevant factual information without assumptions (where possible, noting the exact words used by the person making the allegation / disclosure)
- actions taken including treatment

Where appropriate, details of the incident should also be recorded in the child / young persons file.

- 2. The Safeguarding Coordinator / Case Manager is responsible for:
- ensuring the immediate response was sufficient and take any further action needed.
- assessing and categorising the incident / breach of policy as Minor, Moderate or Critical. Definitions to be found in Appendix 3
- ensuring an Incident Report is completed fully and logged on the Incident Register located on Visual Care
- notifying Director where required
- providing confirmation to the reporter that all required steps have been completed to manage the incident as necessary. Where appropriate, the reporter should continue to be updated as the incident is further managed, until closed off, whilst maintaining privacy and confidentiality obligations.
- 3. Moderate incidents and critical incidents must be reported to the Director immediately. In the case of critical incidents, the Director may establish a Critical Incident Response Team comprised of Managers for the effected program/s and personnel with responsibility for the People & Culture Manager, Executive Team and Police/Child Protection Liaison. The Critical Incident Response Team's role is to ensure that immediate responses are coordinated and effective and to deploy resources to support this end. The Critical Incident Response Team is a central point for supporting responses to incidents and in managing and collecting information on incidents.

External reporting requirements

In addition to our internal reporting process, our organisation has external reporting requirements to fulfil, including legal reporting obligations. This includes reporting to the Police, child protection authorities, other relevant government bodies including any professional bodies and / or accrediting/regulatory bodies. All incidents that require external authority notification must be reported to the *Director*. External notifications required by





organisational policy and governing legislation must be initiated by the Safeguarding Coordinator / Case Manager / Director.

Mandatory reporting

Mandatory reporting requirements are the legal obligations of specified professionals to report incidence of child abuse and /or neglect where they have reasonable belief that abuse has, or is likely to, occur.

If the incident meets mandatory reporting thresholds or if unsure, personnel within our organisation who are Mandatory Reporters must, as soon as practicable and before the end of the shift, notify the prescribed child protection authority of their suspicion and its basis. Incidents involving personnel within our organisation or others (i.e., family members) must be reported to child protection authorities.

The above does not preclude other non-mandated individuals from making a report to the child protection authority or the police if they have reasonable concerns for the safety and wellbeing of a child.

Criminal Offences under Mandatory Reporting

It is a criminal offence for a mandated reporter to fail to report abuse where they have a reasonable belief that abuse has, or is likely to, occur.

Reportable Conduct

Our organisation falls within the jurisdiction of *Tasmania* where the Reportable Conduct Scheme is not applicable.

Reporting to WWVP (or equivalent) Authorities

Should there be reasonable concern that an individual has acted in a way and or / been charged with or convicted of an offence which makes it inappropriate for them to engage in child-related work, WWCC authorities may need to be notified.

Reporting to the Australian Childhood Foundation (ACF)

As a Safeguarding Children Accredited organisation by the ACF), reports must be made to ACF by completing the TassieCare incident report on Visual Care

- i. All critical incidents to be verbally reported to ACF within 24 hours; and
- ii. Any allegations of child abuse or neglect, that involves our personnel within 28 days of the incident in accordance with the requirements of the Safeguarding Children Program.
- iii. It is the responsibility of the Safeguarding Coordinator to ensure that this report is made and that at the end of 28 days a review into the incident is completed.

Reports to the ACF will be made by our **Safeguarding Coordinator / Case Manager.**





4.3 Sharing of Information Confidentiality and Privacy

Our organisation maintains the confidentiality and privacy of all concerned (including the alleged perpetrator), except if doing so would compromise the safety or wellbeing of the child or young person and/or investigation of the allegation, or other reporting legislative requirements.

After an incident has been reported and where appropriate, the information sharing process with child/ young person, their families and involved personnel will begin as soon as reasonably possible. The process will be adapted to fit child/ young person, family and, personnel needs, the requirements of any investigation processes and any relevant confidentiality, privacy and employment law obligations.

Where appropriate to the circumstances and nature of the report, information will be provided to the child and family about:

- What was done to respond to the report/complaint including any investigation
- The decision or finding, including the main evidence that was obtained or unable to be obtained, and reasons why this decision was made
- Action taken, or that will be taken, to address the report/complaint, including by whom and when
- The family will be provided with regular progress updates even where limited information can be provided.

Where police and/or child protection are involved, our organisation will provide the authorities with information about the incident to assist them in their investigations.

Where personnel are involved in breaches of **Code of Conduct** or **Safeguarding Children and Young People Policy**, **The Director** or **People & Culture Manager** will advise on internal communications regarding action taken, if appropriate.

Where an allegation about the conduct of personnel is received from a child, young person, parent/caregiver, or other member of the community the allegation will be dealt with in a confidential manner that is respectful to both complainant and respondent. Reasonable steps will be taken to protect personnel information from loss, unauthorised access, use, disclosure or any other misuse during the complaint-handling and investigation process. However, the organisation cannot give an assurance of absolute confidentiality, given statutory obligations and principles of natural justice.

If the incident has reached the threshold to report to external agencies, our organisation will consult with the relevant child protection authority / police to determine what information can be shared with parents / care givers. This can include.

- Not contacting the parents / care givers in circumstances where they have alleged to have been engaged in the abuse, or the child is a mature minor and does not wish their parent/care giver to be contacted.
- To contact the parents / care givers and provide agreed information as soon as possible.





Police and/or child protection will be consulted about the disclosing of information to child/young person, their/ families, and personnel.

The decision to share information will consider:

- whether the ongoing safety of those involved in or impacted by the incident is compromised by the sharing or non-sharing of information
- the advice of police and child protection (care will be taken not to compromise their investigations)
- Relevant privacy legislation and information-sharing provisions (where provisions allow for the responsible exchange of information between relevant parties to promote child safety).
- the rights of those impacted by the incident to privacy, confidentiality, procedural fairness, and a presumption of innocence in accordance with organisational policies and employment law, and
- the need (of those potentially impacted by the incident) to know of the incident.

4.4 Supporting

It is important to address the support needs of those impacted by the incident including considerations of cultural safety for:

- the child/young person and their family (this includes any specific support needs for those from an Aboriginal and Torres Strait Islander; Culturally and Linguistically Diverse; or person with a disability background; LGBTQI+, or a child or young person who is unable to live at home);
- other children or young people as witnesses to incident
- personnel who witness and/or reported the incident
- any personnel against whom a complaint is made, for example, offering professional counselling
- other personnel impacted by the incident

It is further important to make clear to all other personnel who are aware of the incident that:

- any allegation does not mean the person is guilty, and that the allegation will be properly investigated and will include the right to 'procedural fairness'
- they are not to discuss the matter with any person, except as directed by police, child protection authorities and/or our Safeguarding Coordinator / Case Manager and only in direct relation to investigation of the allegation.

5.Records and Documentation

All Incidents will be recorded on Visual Care which is TassieCare's Incident Register this will be used to determine the effectiveness of actions taken and to identify areas for improvement.

Our Executive Committee will oversee the administration of the completed *Incident Report* Form and any other documentation relating to the allegation and subsequent action.





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To prevent access by unauthorised persons, our organisation stores any documentation associated with an allegation of abuse or neglect of a child or young person and breaches of policy by having:

- hard-copy documentation stored in a locked filing cabinet (or similar)
- electronic documentation stored in a password-protected folder (or similar).

We maintain and regularly monitor records of *Incident* Reports as part of our *Incident* Management processes to ensure that they are responded to effectively in accordance with this policy and that requirements for reporting to external authorities are complied with. These records will inform reviews of the policy as detailed in section 7.

6.Communication and Training

We communicate our Reporting policy and its requirements to children, young people and their families and our personnel.

Our organisation ensures all new personnel are informed and supported to understand our organisations safeguarding children and young people policies and procedures, paying particular attention to the practices detailed in this Reporting policy

Copies of this Reporting policy and our organisation's Safeguarding Children and Young People Policy and Code of Conduct are provided directly to personnel, they are also publicly accessible and available in child-friendly versions.

Our organisation provides training and guidance relating to an individual's safeguarding responsibilities and offers opportunities to seek clarity in relation to the commitments and behavioural expectations set out in our safeguarding policies.

We provide regular ongoing training of our personnel in relation to how keeping children and young people safe will be fulfilled, including training regarding children and young people's rights, voices and participation, cultural safety and humility.

7.Monitoring and Review

This document will be reviewed every three years, in consultation with stakeholders. Some circumstances may trigger an early review, this includes but not limited to legislative changes, organisational changes, incident outcomes and other matters deemed appropriate by the *Director* Records are retained to document each review undertaken. Such records may include minutes of meetings and documentation of changes to policies and procedures that result from a review.

8. Supporting Resources

Appendix I Definitions

Appendix 2 Key Indicators of Abuse

Appendix 3 Categories of Incidents

Appendix 4 Reporting Flow Chart- Four Critical Actions

Appendix 5 Jurisdictional Information





9. Related Policies and documents

- Safeguarding Children and Young People Policy
- Code of Conduct
- Incident Management Policy

10.Related Frameworks and Legislation

Our Policy complies with relevant legislation and frameworks.

- United Nations Convention on the Rights of the Child
- National Framework for Protecting Australia's Children 2009-2020
- Australian Human Rights Commission National Principles for Child Safe Organisations

11.Roles and Responsibilities

The responsibilities of each role in relation to the development, implementation and compliance of the TassieCare Reporting Policy are detailed below.

Position	Responsibility
Leadership Team	 Provide oversight and endorsement of this policy. Receiving incident reports for specified categories of incidents, provide support and advice as appropriate, and utilise data to inform organisation incident and risk management strategies
Director	 Implement policies and procedures across the organisation. Ensure personnel have access to and understand this policy and related procedures. Ensure all managers/supervisors have access to support, advice and resource to understand and implement this policy and related procedures. Reportable Conduct responsibility Establish CIRT Term in response to Moderate and Critical Incidents Initiates external reporting
Workforce/HR/ Quality	 Review and update this document and supporting resources in consultation with relevant stakeholders. Provide training and advice in the application of policy and procedures. Assist with messaging across organisation if required
Safeguarding Coordinator Managers/ Supervisors	 Ensure this policy and related procedure is followed and implemented Receive and manage incident reports Assess each situation reported and notify appropriate personnel of the incident as indicated on this policy Responsible for the response and recovery coordination of an incident Report to the Critical Incident Response Team where required Provide support and advice in the application of this policy
Personnel	 Awareness of and compliance with this policy and related procedure. Immediately control the situation including liaising with key stakeholders, obtaining and documenting details of the incident





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Position	Responsibility
	 Complete incident report form and escalate to Safeguarding Coordinator/Manager





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Appendix 1-Definitions

Term	Definition
Bullying	Bullying involves the inappropriate use of power by one or more persons over another less powerful person or group and is generally an act that is repeated over time. Bullying has been described by researchers as taking many forms which are often interrelated and include: • Verbal (name calling, put downs, threats); • Physical (hitting, punching, kicking, scratching, tripping, spitting); • Social (ignoring, excluding, ostracising, alienating); and/or • Psychological (spreading rumours, stalking, dirty looks, hiding or damaging possessions).
Child or young person	A person under the age of eighteen years.
Emotional or psychological abuse	Emotional or psychological abuse occurs when a child does not receive the love, affection or attention they need for healthy emotional, psychological and social development. Such abuse may involve repeated rejection or threats to a child. Constant criticism, teasing, ignoring, threatening, yelling, scapegoating, ridicule and rejection or continual coldness are all examples of emotional abuse. These behaviors continue to an extent that results in significant damage to the child's physical, intellectual or emotional wellbeing and development.
Family Violence	Family violence occurs when children are forced to live with violence between adults in their home. It is harmful to children. It can include witnessing violence or the consequences of violence. Family violence is defined as violence between members of a family or extended family or those fulfilling the role of family in a child or young person's life. Exposure to family violence places children and young people at increased risk of physical injury and harm and has a significant impact on their wellbeing and development.
Grooming	Grooming is a term used to describe what happens when a perpetrator of abuse builds a relationship with a child with a view to abusing them at some stage. There is no set pattern in relation to the grooming of children. For some perpetrators, there will be a lengthy period of time before the abuse begins. The child may be given special attention and, what starts as an apparently normal display of affection, such as cuddling, can develop into sexual touching or masturbation and then into more serious sexual behaviour. Other perpetrators may draw a child in and abuse them relatively quickly. Some abusers do not groom children but abuse them without forming a relationship at all. Grooming can take place in any setting where a relationship is formed, such as leisure, music, sports and religious activities, or in internet chatrooms, in social media or by other technological channels.
Harm	Harm to a child, is any detrimental effect of a significant nature on the child's physical, psychological or emotional wellbeing. It is immaterial how the harm is caused. Harm can be caused by: • physical, psychological or emotional abuse or neglect; • sexual abuse or exploitation; • a single act, omission or circumstance; and • a series or combination of acts, omissions or circumstances.
National criminal history record check	Involves identifying and releasing any relevant Criminal History Information (CHI) subject to relevant spent convictions/non-disclosure legislation and/or information release policies





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Term	Definition
Neglect	Neglect is the persistent failure or deliberate denial to provide the child with the basic necessities of life. Such neglect includes the failure to provide adequate food, clothing, shelter, adequate supervision, clean water, medical attention or supervision to the extent that the child's health and development is, or is likely to be, significantly harmed. Categories of neglect include physical neglect, medical neglect, abandonment or desertion, emotional neglect and educational neglect. The issue of neglect must be considered within the context of resources reasonably available.
Personnel	All who work for the organisation whether in a paid or unpaid capacity, including; employees, casual employees, volunteers, Board and committee members and contractors
Physical abuse	Physical abuse occurs when a person subjects a child to non-accidental physically aggressive acts. The abuser may inflict an injury intentionally or inadvertently as a result of physical punishment or the aggressive treatment of a child. Physically abusive behavior includes (but is not limited to) shoving, hitting, slapping, shaking, throwing, punching, biting, burning, excessive and physically harmful over training, and kicking. It also includes giving children harmful substances such as drugs, alcohol or poison. Certain types of punishment, whilst not causing injury can also be considered physical abuse if they place a child are risk of being hurt. Physical abuse also includes threats to physically harm.
Reasonable belief	A reasonable belief is more than suspicion. There must be some objective basis for the belief. However, it is not the same as having proof and does not require certainty. For example, a person is likely to have a reasonable belief if they; observed the conduct themselves, heard directly from a child that the conduct occurred, received information from another credible source (including another witness)
Reasonable steps	Personnel may breach duty of care towards a child or young person if they fail to act in the way a reasonable or diligent professional would have acted in the same situation. In relation to suspected child abuse, reasonable steps may include (but are not necessarily limited to): acting on concerns and suspicions of abuse as soon as practicable seeking appropriate advice or consulting with other professionals or agencies when the unsure of what steps to take, reporting the suspected child abuse to appropriate authorities such as Police or Child Protection, arranging counselling and/or other appropriate support for the child, providing ongoing support to the child and sharing information with other personnel who will also be responsible for monitoring and providing ongoing support to the child or young person.
Sexual abuse	Sexual abuse occurs when an adult or a person of authority (e.g. older) involves a child in any sexual activity. Perpetrators of sexual abuse take advantage of their power, authority or position over the child or young person for their own benefit. It can include making sexual comments to a child, engaging children to participate in sexual conversations over the internet or on social media, kissing, touching a child's genitals or breasts, oral sex or intercourse with a child. Encouraging a child to view pornographic magazines, websites and videos is also sexual abuse. Engaging children to participate in sexual conversations over the internet is also considered sexual abuse.
Sexual exploitation	Sexual exploitation is a form of sexual abuse where offenders use their power, (physical, financial or emotional) over a child or young person, or a false identity, to sexually or emotionally abuse them. It often involves situations and relationships where children and young people receive something (food, accommodation, drugs,



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Term	Definition
	alcohol, cigarettes, affection, gifts, money etc.) in return for participating in sexual activities. Sexual exploitation can occur in person or online, and sometimes the child or young person may not even realise they are a victim.





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Appendix 2-Key Indicators of Abuse

Abuse	Physical Indicators	Behavioural Indicators
Physical	 unexplained cuts, abrasions, bruising or swelling unexplained burns or scalds, cigarette burns rope burns or marks on arms, legs, neck, torso unexplained fractures, strains or sprains; dislocation of limbs recurrent injuries bite marks mouth and dental injuries ear or eye injuries disclosure of physical threats being made consistent sickness/nausea from potential poisons covering themselves with clothes inappropriate to weather conditions 	 avoidance of particular staff, fear of a particular person sleep disturbances changes in behaviour (e.g. unusual mood swings, uncharacteristic aggression) changes in daily routine, changes in appetite unusual passivity, withdrawal self-harm, suicide attempts inappropriate explanations of how injuries occurred excessive compliance to staff Rough handling
Sexual	 direct or indirect disclosure of abuse or assault trauma to the breasts, buttocks, lower abdomen or thighs difficulty walking or sitting pain or itching in genital and/or anal area; bruising, bleeding or discharge self-harm, abuse, suicide attempts torn, stained or blood-stained underwear or bedclothes sexually transmitted diseases, pregnancy unexplained money or gifts recurrent pain on passing urine or faeces 	 sleep disturbances changes in eating patterns inappropriate or unusual sexual behaviour or knowledge changes in social patterns sudden or marked changes in behaviour or temperament anxiety attacks, panic attacks, clinical depression refusal to attend usual places (e.g. work, school, respite) going to bed fully clothed excessive compliance to staff inappropriate or excessive masturbation
Psychological	 speech disorders in the case of a child, lags in physical development, failure to thrive injuries sustained from self-harm or abuse suicide attempts anxiety attacks 	 self-harm or self-abusive behaviours challenging/extreme behaviours excessive compliance to staff very low self-esteem, feelings of worthlessness clinical depression marked decrease in interpersonal skills





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Abuse	Physical Indicators	Behavioural Indicators
		 extreme attention-seeking behaviour
Neglect	 physical wasting, unhealthy weight levels poor dental health food from meals left on face and/or clothes throughout the day dirty, unwashed body and/or face, body odour person always wearing the same clothes ill-fitting and/or unwashed clothes person is always over- or underdressed for the weather conditions food is consistently poor quality, insufficient, inedible and/or unappetising persistent illnesses without appropriate medical treatment suffering persistent infestations such as scabies or headlice disclosure of being left alone for long periods of time that are inappropriate to age or maturity 	 constant tiredness persistent hunger unexpectedly poor social/interpersonal skills signs of loss of communication and other skills staff member, service provider, carer or support person consistently fails to bring the person to appointments, events, activities person is persistently denied opportunities to socialise with others in the community excessively clingy or fearful
Family Violence	 eating and sleeping difficulties concentration problems inability to play constructively clinginess defiant behaviour rebelliousness temper tantrums cruelty to pets physical abuse of others avoidance of peers dropping out of school academic failure delinquency/offending eating disorders substance misuse depression suicide ideation 	 fearfulness numbing increased arousal adjustment problems developmental delay physical complaints overly compliant behaviour withdrawal loss of interest in social activities self-harm poor school performance use of controlling behaviours distrust of adults violent behaviours violence toward a parent/care giver (particularly their mother) early pregnancy





Appendix 3- Categories of Incidents

Incident Type	Description	Managed/escalated to
Minor Incident	Events which cause or may cause minor physical stress and or emotional stress to personnel or clients/service users. Near misses and minor breaches of professional standards or agency policy (for example the Code of Conduct) that do not compromise the health and safety of clients/service users, including children and young people and personnel.	Frontline staff and direct Managers/Supervisors/ Safeguarding Coordinator/ Direct Service Manager
Moderate Incident	Events which cause or are likely to cause physical stress or emotional distress to personnel or clients/service users. Near misses and criminal behaviour or breaches of professional standards or agency policy (for example the Code of Conduct) by personnel that may compromise the health and safety of clients / service users, including children and young people and personnel.	Safeguarding Coordinator/ Direct Service Manager
Critical Incident	Criminal behaviour, breaches of professional standards or organisational policy (for example Code of Conduct) by personnel that cause harm to or significantly compromise the health and safety of including client / service users, including children and young people and personnel. For Accredited organisations ONLY A critical Incident, in relation to a child under the care of the Organisation (whether or not at the relevant time the child is on premises controlled by the Organisation or is otherwise under the physical supervision of the Organisation) includes the occurrence of any of the following events or any similar event: the child dies and: abuse or neglect is known or suspected to be a factor in the death; the death is, or appears to be, the result of suicide or accident; the death is, or appears to be, the result of alleged murder, homicide, reckless conduct or an act of violence; or the child is under statutory care; a child has not died but has sustained significant harm or is at risk of harm under the categories described in the relevant jurisdictional legislation of abuse and neglect; ACF notifies the Organisation that a child has been, in the opinion of ACF, subjected to cumulative inaction or wrong action; or ACF notifies the Organisation that an incident and or accumulation of incidents has occurred in relation to the child	Director and Critical Incident Response Team (CIRT Coordinator)



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Incident Type	Description	Managed/escalated to
	that, in ACF's opinion, gives rise to serious concerns about the adherence by the Organisation, or any employee or contractor of the Organisation, to any part of the Safeguarding Children Program (definition as per the ACF Accreditation Terms and Conditions Contract)	





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Appendix 4 – Responding to incidents – Four Critical Actions

Responding

Responding to an incident

If a child or young person is at immediate risk of harm, you must ensure their safety and provide immediate support Contact 000 (or 111) emergency services if required

Responding to a disclosure

Listen and provide reassurance Believe the child/young person Record notes as early as possible

Responding to a breach of policy

Provide immediate response as necessary All breaches, however minor, must be reported and documented



Reporting

Internal Reporting

All incidents and breaches to policy are to be reported to Safeguarding Coordinator/Case Manager on 03 6421 6066
All incidents and breaches of policy are to be recorded on Incident Report Form
Safeguarding Coordinator/
Case Manager to categorise incidents, initiate a response and escalate moderate and critical incidents to Director

External and Mandatory Reporting

External authorities such as police and child protection services may need to be contacted.

Commission for Children & Young People: 03 6166 1361

Reportable Conduct and or/WWVP

Department of Justice TAS



Sharing of information

Confidentiality and Privacy

Information sharing judgments will be guided by the best interests of the child and, where appropriate, guided by external authorities the Director or P&C Manager will advise of internal communications where breaches of policy have occurred







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Supporting

Supporting

Ongoing support should be provided to those impacted by incident. Consideration should be made to cultural safety, equity, and diversity





Tasmania

1. TAS Related Legislation Table

Tasmania	Children, Young
	Persons and their

Persons and their Families Act 1997 (Tas.) Adoption Act 1988 (Tas.) Child Care Act 2001 (Tas.)

Child Protection (International Measures) Act 2003 (Tas.) Children, Young Persons, and their Families Amendment Act 2009 (Tas.)

Commissioner for Children and Young People Act 2016 (Tas.) Community Protection (Offender Reporting) Bill 2016 (Tas.)

Education Act 1994 (Tas.) Family Violence Act 2004 (Tas.)

Registration to Work with Vulnerable People Act 2013 (Tas.)

Youth Justice Act 1997 (Tas.)

Justice Legislation Amendment (Organisational Liability for Child

Abuse) Act 2019



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Legal provisions	Sections 3, 4 and 14 of the Children, Young Persons and Their Families Act 1997 (Tas.)
Who is mandated to report?	Medical practitioners; registered or enrolled nurses; persons registered under the Health Practitioner Regulation National Law (Tasmania) in the midwifery, dental (dentists, dental therapist, dental hygienist or oral health therapist) or psychology professions; police officers; probation officers; principals and teachers in any educational institution including kindergartens; persons who provide child care or a child care service for fee or reward; persons concerned in the management of an approved education and care service, within the meaning of the Education and Care Services National Law (Tasmania) or a child care service licensed under the Child Care Act 2001; a member of the clergy of any church or religious denomination; a member of the Parliament of this State; any other person who is employed or engaged as an employee for, of, or in, or who is a volunteer in, a government agency that provides health, welfare, education, child care or residential services wholly or partly for children, and an organisation that receives any funding from the Crown for the provision of such services; and any other person of a class determined by the Minister by notice in the Gazette to be prescribed persons.
What must be reported?	Knowledge, or a belief or suspicion on reasonable grounds that: a child has been or is being 'abused' or 'neglected' or is an affected child within the meaning of the Family Violence Act 2004 (a child whose safety, psychological wellbeing or interests are affected or likely to be affected by family violence); or there is a reasonable likelihood of a child being killed or abused or neglected by a person with whom the child resides; or while a woman is pregnant, that there is reasonable likelihood that after the birth of the child: the child will suffer abuse or neglect, or may be killed by a person with whom the child is likely to reside; or that the child will require medical treatment or other intervention as a result of the behaviour of the woman or another person with whom the woman resides or is likely to reside, before the birth of the child. Note on extent of harm required to activate the duty (section 3(1) definition of 'abuse and neglect': for all forms except sexual abuse, reports must be made where: (i) the injured, abused or neglected person has suffered, or is likely to suffer, physical or psychological harm detrimental to the person's wellbeing; or (ii) the injured, abused or neglected sexual abuse must be reported.
Abuse and neglect types that must be reported	 Sexual abuse (any) Physical abuse Emotional/psychological abuse Neglect Exposure to family violence





2. <u>Mandatory Reporting Guidance Resource</u>

Mandatory reporting laws require specified people to report suspected abuse and neglect to government child protection services in Australia.

Tasmania mandatory reporting laws cover an extensive list of professions, and the details of the reporting requirements are provided in the table below.

For immediate help

- To report concerns that are life threatening, call TAS Police: 000
- To report concerns about the safety of a child contact the Child Safety Service: 1800 000 123
- Mandatory reporters with less serious concerns can report online. https://www.strongfamiliessafekids.tas.gov.au

Endorsed by:		
Joshua Aird Director		
Gautam Chadda Director		
on behalf of TassieCare		
Date:		