

What is Northcott's policy?

- ✓ We are committed to the safety, wellbeing and welfare of children and young people. This must be the main consideration and focus when making child protection decisions.
- ✓ Children and young people have a right to:
 - be safe from harm and to grow up free of abuse, neglect, violence and exploitation.
 - develop physically, intellectually, emotionally and socially with freedom and dignity.
- ✓ We have a zero tolerance policy for staff or volunteer abuse of customers or engaging in grooming behaviours towards customers.
- ✓ We comply with requirements for the NSW Working with Children Check, ACT Working with Vulnerable People Check and Criminal Record Check and any additional probity checks for prospective employees and volunteers. We carry out these checks for staff working in both NSW and the ACT.
- ✓ Employees and volunteers working with people with a disability:
 - Understand the behaviours or actions that indicate abuse and neglect.
 - Are able to recognise signs that may be indicators of abuse and neglect
 - Recognise that people who require behaviour support, are non-verbal or experience communication difficulties may be more vulnerable to abuse and neglect
- ✓ We support a prevention and early intervention approach to child abuse and neglect.
- ✓ We support any person who has witnessed or suspects abuse or neglect of a customer to be confident in reporting it without fear of retaliation
- ✓ We are committed to using current child protection practice and ongoing evaluation.
- ✓ Our employees have a duty of care to protect children and young people against risk of harm.
- ✓ The needs and rights of the child are prioritised over the rights of the parents in child protection matters.
- ✓ Children and young people must be supported to raise any problem or concern and know they will be listened to.
- ✓ We adhere to the legal requirement to report allegations of reportable incidents in supported group accommodation, centre based respite and camps to the NSW Ombudsman.
- ✓ We investigate any allegations of reportable conduct relating to a Northcott employee and refer to required statutory bodies to take appropriate action.

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What are the procedures?

Stage	What needs to be done?	Who does it?
<p>Observing and responding to current abuse and neglect situations</p>	<ol style="list-style-type: none"> 1. Keep yourself safe 2. Ensure that customers and any other people present are safe 3. If you think the customer or another person is in immediate danger call the Police <ul style="list-style-type: none"> • Do not move or touch any evidence the Police may need in their investigation. • If possible, isolate the area where the incident occurred and do not allow anyone to enter the area until the Police arrive. • In cases of alleged sexual assault preserve the victim's clothing, bedding or other relevant material where possible. Try and delay bathing/showering until the Police arrive (if the victim is not distressed by the delay). • Do not ask the customer questions about what happened. That is the role of the Police and asking questions may interfere with their investigations 4. If a customer or another person is injured call an Ambulance. 5. Immediately advise your Manager of the incident who will advise other relevant Northcott Management. <ul style="list-style-type: none"> • If the allegation relates to a Northcott employee, inform your Manager immediately who will escalate to a Level 2 Manager and the General Manager – People and Culture. Refer to Allegations of Customer Abuse by an Employee Procedure. 6. Consult the MRG to determine if you are required to make a report to Family and Community Services (FaCS) Helpline (see Completing the MRG on page 3) 	<p>Mandatory Reporter</p>

Stage	What needs to be done?	Who does it?
Suspecting and receiving an allegation of Risk of Harm	<p>7. Consult your manager if you suspect that a child or young person, or a group of children or young people, is at any risk of harm.</p> <ul style="list-style-type: none"> • See indicators of neglect, abuse, sexual abuse and psychological abuse in Appendix B. • Do not interview a child you suspect to be at risk of harm – this could jeopardise future investigations <p>8. Consult with other staff providing service to the child, including any external organisations working with the family. If you have concerns about a child or young person's wellbeing you can exchange information under Section 16A with other organisations without the consent of the family. Refer to Child Protection Information Exchange Procedure</p>	Mandatory Reporter
	<p>9. If the allegation relates to a Northcott employee, contact your Manager immediately who will escalate to your Level 2 Manager and the General Manager – People and Culture. Refer to Allegations of Customer Abuse by an Employee Procedure.</p> <p>10. Enter the allegation into RiskMan within 24 hours</p> <p>11. Consult with the Manager – Prevention and Response to Abuse and Neglect if further guidance is needed.</p>	
Completing the MRG	<p>12. Complete the Mandatory Reporter Guide (MRG) to determine the level of risk to the child.</p> <ul style="list-style-type: none"> • The MRG can be found via the ChildStory website: https://reporter.childstory.nsw.gov.au/s/mrg <p>13. Enter the most important concern first on the MRG (cumulative harm situations cannot be entered)</p> <ul style="list-style-type: none"> • Make sure the definitions on the right hand side are read as this will help guide your responses. • The MRG will tell you if the situation is considered to put the child at risk of significant harm. • If the report relates to a group of children, it is 	Mandatory Reporter

Stage	What needs to be done?	Who does it?
	<p>called a 'class of children report'. This report can be made when there is sufficient reason to believe a class of children/young people is currently at risk of significant harm e.g. class in a preschool, a playgroup, a sporting team. A class of children report is different from a report on a group of siblings.</p> <p>NOTE: The MRG does not replace professional judgment, but aims to support and guide you to make decisions. If the MRG delivers a decision that is not consistent with your level of concern, you need to make a report to the Child Protection Helpline on 132 111</p> <p>14. Follow the instructions given to you by the MRG.</p> <ul style="list-style-type: none"> • If the child, or group of children, is at risk of significant harm, it will tell you to make a report, by phoning the Community Services Helpline on 132 111 or making an eReport at: https://kidsreport.facs.nsw.gov.au • If a child is not considered to be at risk of significant harm continue to offer current services (where possible), refer to local services and work collaboratively with other organisations within the community to provide ongoing support to the child or young person and their family. Mandatory reporters should keep detailed records in RiskMan of concerns they have about a child as these concerns may continue and the pattern may require a report to the Child Protection Helpline. As per Section 23(2) of the Children Young Persons (Care and Protection) Act 1998 cumulative harm refers to "a series of acts or omissions that, when viewed separately may not indicate significant risk, but when viewed together suggests a pattern of significant harm". • You may also be directed by the Mandatory Reporter Guide to consult with a professional regarding your concerns i.e. staff with more 	

Stage	What needs to be done?	Who does it?
<p>Documentation/ Managing the incident</p>	<p>specialised knowledge e.g. Manager Prevention and Response to Abuse and Neglect</p> <p>15. Discuss any other safety issues with your immediate supervisor</p> <ul style="list-style-type: none"> Document a plan in RiskMan (using journal entries) to protect the staff member if needed. This may include not telling the family that the staff member is making a report, arranging for future meetings to occur in a neutral location, arranging for two staff to attend future home visits together. <p>16. Tell the family you are making a report, if it is safe to do so.</p> <ul style="list-style-type: none"> For an allegation of sexual assault where the alleged offender is a family member, consult with Community Services and the Police about when the family can be told and by whom and document onto RiskMan. This is very important for both child safety as there is a significant risk of threats, intimidation or escalation in violence if the alleged offender is 'tipped off' prior to intervention by authorities. <p>17. Complete the child's name, date and summary of MRG outcome on the Child Wellbeing Register Form forward to your manager for entry on RiskMan or if you have access enter it directly onto RiskMan. The Child Wellbeing Register Form should also be uploaded onto RiskMan as an attachment. This information is to be entered within 24 hours of the concern being raised.</p> <ul style="list-style-type: none"> When entering into RiskMan select 'Child Wellbeing' as the 'Type of Incident' and make sure the risk rating chosen is 3 or above Attach all information relating to the Mandatory Reporter's concerns, including the MRG decision page, any communication from Community Services and subsequent actions taken. 	<p>Mandatory Reporter</p>

Stage	What needs to be done?	Who does it?
	<p>18. Any information regarding child protection concerns or actions must not be documented within Carelink+. This includes attaching any documentation to the child's file within Carelink+. Carelink+ will list any incidents entered onto RiskMan for a customer under the "Incidents" node and can link users with relevant access to RiskMan to the incident. Staff who do not have RiskMan access and require access to this information can ask their supervisor. You can write a note onto Carelink with the date stating "A Child Wellbeing incident has been entered into RiskMan".</p> <p>19. Document progress and actions taken using journal entries on RiskMan.</p> <p>20. Complete the outcome and follow-up actions in RiskMan</p> <ul style="list-style-type: none"> • If you do not expect Northcott will continue in their role with the family as services are complete and other appropriate supports are not in place, advise Community Services and document into RiskMan <p>21. When you have a Child Wellbeing concern for a child who is not a Northcott Customer e.g. another child present at the time of a home visit, please enter the child in RiskMan with the information you have available. You can enter the Customer ID as "0000"</p>	
<p>Re-reporting a customer/family</p>	<p>22. When a customer has been reported on more than one occasion a case review of the particular customer situation by the appropriate manager should occur to assess whether there is an indication of escalating risk or cumulative harm (both of which would require further action)</p> <p>23. Where there have been three or more notifications made for the one customer, the Manager – Prevention and Response to Abuse and Neglect will follow up with the reporter's manager and Regional Manager. Questions will be asked to ensure best practice in supporting the customer/family and the Manager – Prevention and Response to Abuse and Neglect will be available to</p>	<p>Manager – Prevention and Response to Abuse and Neglect</p>

Stage	What needs to be done?	Who does it?
<p>Reporting to the NSW Ombudsman</p>	<p>guide staff/management as needed.</p> <p>24. Notify the NSW Ombudsman if the incident is a reportable incident.</p> <ul style="list-style-type: none"> • In regards to children, this will be when a child is in a supported group accommodation setting that is established to support two or more customers with a disability i.e. centre based respite. Reportable incidents include: <ul style="list-style-type: none"> ○ Customer to Customer incidents – pattern of abuse, use of a weapon, causes serious injury ○ Contravention of an AVO ○ Unexplained Serious Injury – fracture, burns, deep cuts, extensive bruising, concussion ○ Fraud <p>NOTE: If an incident occurs where a child is abused or neglected by an employee this will also need to be reported to the NSW Ombudsman under Part 3A of the Ombudsman Act. Refer to Allegations of Customer Abuse by an Employee Procedure.</p> <p>25. Inform the CEO of the requirement to notify the Ombudsman</p> <p>26. Enter progress into RiskMan journal entries</p> <p>27. Complete Notification Form Part A within the 30 day timeframe.</p> <p>28. Add details of notification to the Northcott Ombudsman Reportable Incidents Spreadsheet</p> <p>29. Get the completed Notification Form Part A from signed by the CEO or Level 2 Manager.</p> <p>30. Send the signed Notification Form Part A to the NSW Ombudsman by Registered Post.</p> <p>31. The NSW Ombudsman will tell us by mail if a Notification Form – Part B is necessary once they have reviewed the Part A paperwork. The Part B Form is completed once</p>	<p>Manager Prevention and Response to Abuse and Neglect/</p>

Stage	What needs to be done?	Who does it?
	<p>investigation into the reportable incident is completed and a risk management response is finalised.</p> <p>32. Upload copies of both the completed <i>Notification Form – Part A</i> and <i>Notification Form – Part B</i> into the Riskman entry, along with any other documentation relating to the incident.</p>	

Prenatal Reports

- The aim of prenatal reports is to provide assistance and support to the pregnant mother to reduce the chance that the child, when born, will need to be placed in out-of-home care. It also provides early information that a child who is not yet born may be at risk of harm subsequent to his or her birth.
- Under Section 25 of the Act you may make a report to Community Services if you think you have enough information to suspect that a child may be at risk of harm after their birth. This report is not considered mandatory.
- You must report to Community Services if a prenatal report is made under Section 25 and the birth mother of the child did not engage successfully with support services to eliminate or minimise the risk factors that led to the original report. This report is mandatory.

Protecting Mandatory Reporters

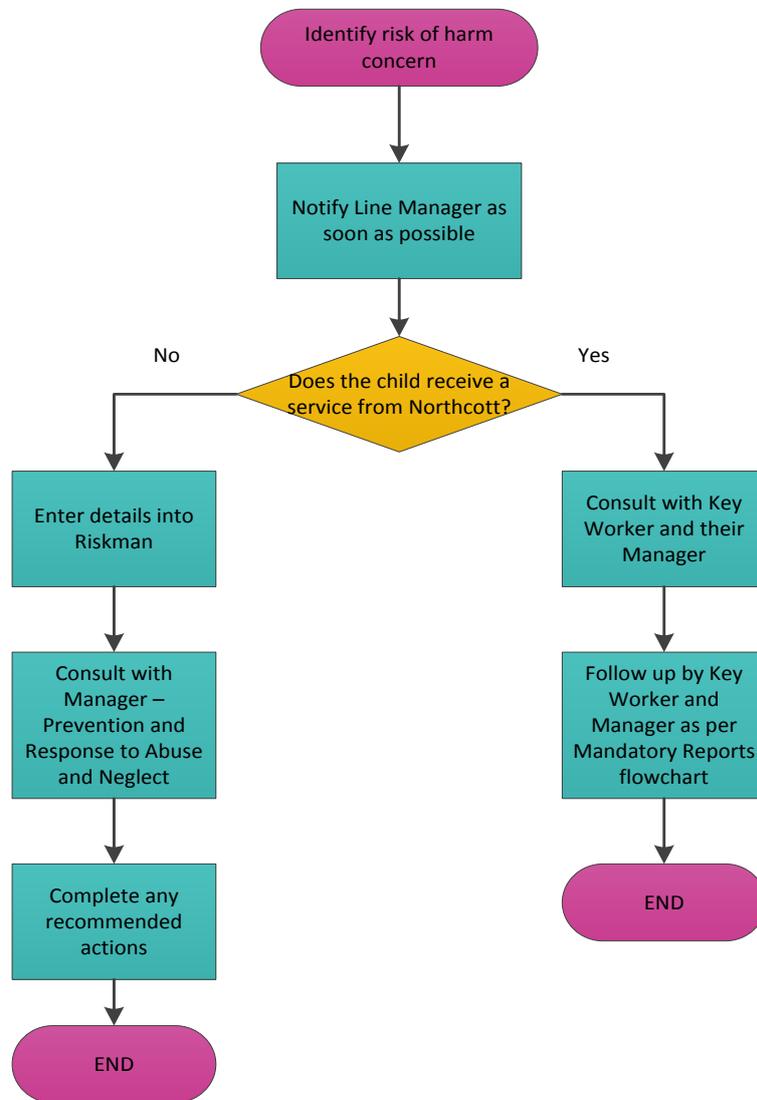
- It is illegal for the identity of someone who has made a report about suspected risk of harm or risk of significant harm to be disclosed to the subject child, their parents, or any other person who is not a delegate of the Deputy Director-General, Community Services (i.e. a Caseworker or Manager Casework) without the consent of the reporter.
- It is essential that guidelines regarding blacking out reporter details are followed when sharing information. See [Child Protection Information Exchange Procedure](#).

Workers Not Authorised to Work With Children

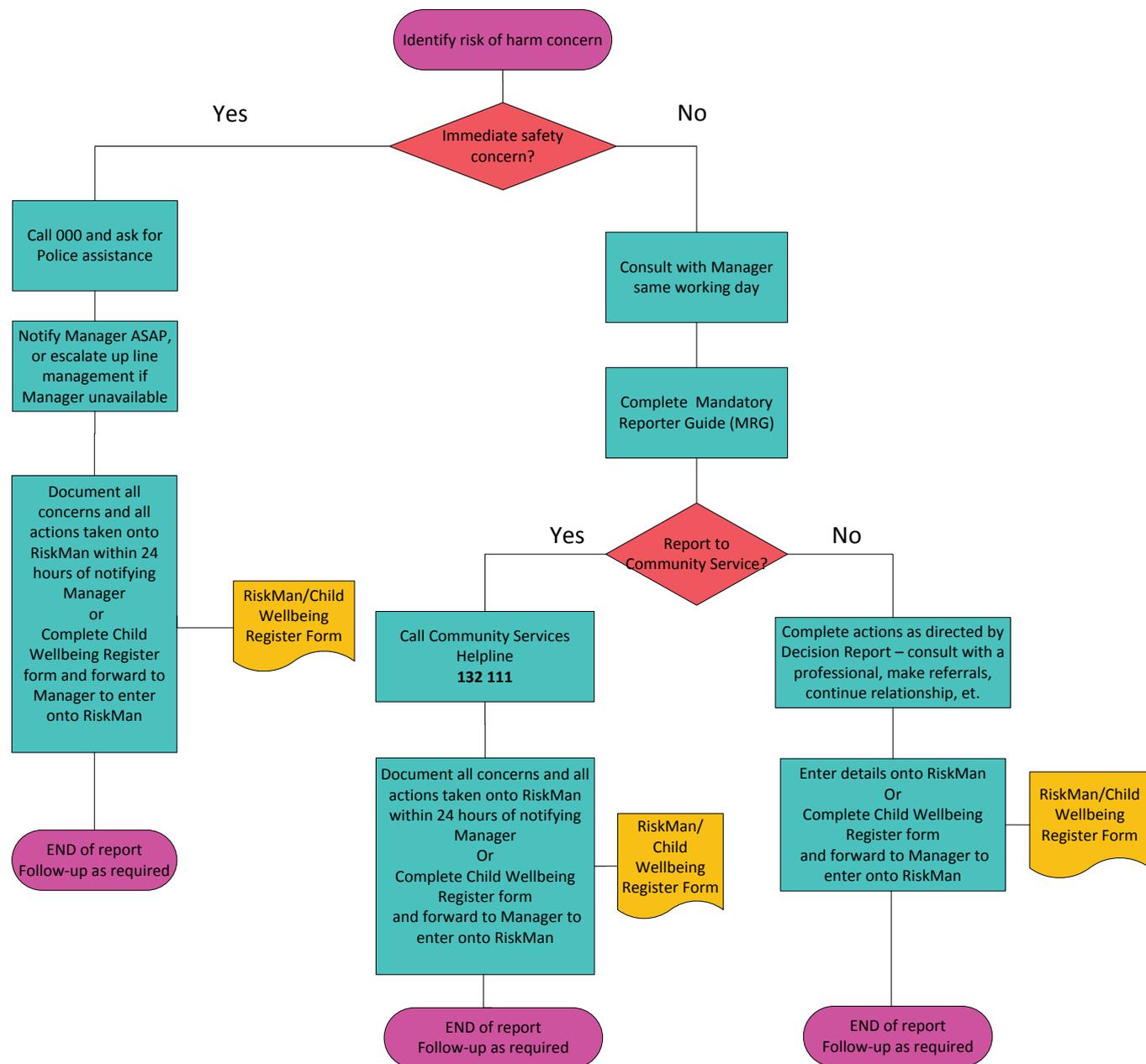
- Refer to [Probity Checks Policy and Procedure](#)
- Refer to [Allegations of Customer Abuse by an Employee Procedure](#)

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Flow Chart 1: ACT & NSW Staff who are not Mandatory Reporters (Voluntary reporters)



Flow Chart 2: NSW Staff who are Mandatory reporters



Where can I get help?

Organisation	Contact Details
Northcott	Manager – Prevention and Response to Abuse and Neglect abuseandneglect@northcott.com.au
Employee Assistance Program – Actevate	Counselling for staff - 1300 663 155
NSW Family and Community Services (FaCS) – Child Protection Helpline	132 111
Family Referral Services	http://www.familyreferralservice.com.au/
ACT – Care and Protection Services	<ul style="list-style-type: none"> • General Public line (24 hours): 1300 556 729 • Mandated Persons line (24 hours): 1300 556 728 • Email address: childprotection@act.gov.au

What other Northcott documents are related?

You may need to refer to these documents for more information:

[Allegations of Customer Abuse by an Employee Procedure](#)
[Child Protection Information Exchange Procedure](#)
[Privacy Policy](#)
[Probity Checks Policy and Procedure](#)
[Responding to Allegations of Adult Abuse and Neglect Policy and Procedure](#)

Related Forms

[Child Wellbeing Register Form](#)
[Incident Report Form](#)

Who is responsible?	What are they responsible for?
Chief Executive	<ul style="list-style-type: none"> • Final review and approval of this policy and procedure.
General Manager People and Culture	<ul style="list-style-type: none"> • Make sure that all staff are appropriately trained in child protection by providing regular training opportunities (both initial training and refresher courses).

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Who is responsible?	What are they responsible for?
	<ul style="list-style-type: none"> • Make sure that appropriate probity checks, including Working With Children Check (WWCC) verification, are carried out for prospective employees and volunteers prior to offer of employment. • Make sure that WWCC renewals for all employees and volunteers are completed prior to their expiry date. • Notify the CEO immediately if the renewal of a WWCC for a current employee or volunteer shows a result of “Barred” or “Interim Barred”. • Manage allegations involving employees
Level 2 Manager	<ul style="list-style-type: none"> • Maintain this policy and procedure and its related documents. • Manage allegations involving employees.
Manager – Prevention and Response to Abuse and Neglect	<ul style="list-style-type: none"> • Make sure any changes or developments in best practice regarding Child Protection are forwarded to staff as required and liaise with Human Resources to identify new and emerging training needs. • Provide support to Northcott staff regarding child protection legislation and promote best practice. • Provide advice and support on how to respond to allegations and disclosures of abuse including reporting requirements • Monitor RiskMan entries to identify trends and any situations where customers have been re-reported to Family and Community Services multiple times.
Level 3 and 4 Manager	<ul style="list-style-type: none"> • Make sure the procedure is effectively implemented in their services. • Make sure staff follows the procedure.
Supervisor	<ul style="list-style-type: none"> • Make sure staff have read and understand the procedure, and have sufficient skills, knowledge and ability to meet the requirements.
All Employees	<ul style="list-style-type: none"> • Follow the requirements of the procedure. • Maintain a level of knowledge and training appropriate to their position

Definitions, Legislation and Standards Compliance

For Definitions, refer to the Northcott Policy Dictionary
 For Legislation and Standards Compliance, refer to the Rights Policy.



Authorised by:
Kerry Stubbs, Chief Executive Officer

Appendix A: Risk Factors of Abuse

- The following risk factors (either by themselves or together) are associated with increased risk of harm for children and young people:
 - Social or geographic isolation of the child, young person or family, including lack of access to extended family
 - Previous abuse or neglect of a brother or sister
 - Family history of violence including domestic violence
 - Physical or mental health issues for the parent or caregiver affecting their ability to care for the child or young person
 - The parent or caregivers' abuse of alcohol or other drugs affecting their ability to care for the child or young person

Indicators:

- The signs below are only possible signs of neglect, physical, sexual or psychological abuse
- The presence of these signs does not necessarily mean neglect has been or is, occurring.
- The child or young person's circumstances and their age or other vulnerabilities, for example disability or chronic illness, also need to be taken into consideration.
- If you have concerns apply the Mandatory Reporter Guide, where appropriate contact the Child Protection Helpline or consult your manager/supervisor for advice

Possible signs of neglect

Signs in children

- Low weight for age and/or failure to thrive and develop
- Untreated physical problems, e.g. sores, serious nappy rash and urine scalds, significant dental decay
- Poor standards of hygiene, i.e. child consistently unwashed
- Poor complexion and hair texture
- Child not adequately supervised for their

Signs in parents or caregivers

- Unable or unwilling to provide adequate food, shelter, clothing, medical attention, safe home conditions
- Leaving the child without appropriate supervision
- Abandons the child
- Withholding physical contact or stimulation for prolonged periods
- Unable or unwilling to provide

Possible signs of neglect

<p>age</p> <ul style="list-style-type: none"> • Scavenging or stealing food and focus on basic survival • Extended stays at school, public places, other homes • Longs for or indiscriminately seeks adult affection • Rocking, sucking, head-banging • Poor school attendance 	<p>psychological nurturing</p> <ul style="list-style-type: none"> • Has limited understanding of the child's needs • Has unrealistic expectations of the child
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Possible signs of physical abuse

<p>Signs in children</p> <ul style="list-style-type: none"> • Bruising to face, head or neck, other bruising and marks which may show the shape of the object that caused it, e.g. belt buckle, hand print • Lacerations and welts • Drowsiness, vomiting, fits or pooling of blood in the eyes, which may suggest head injury • Adult bite marks and scratches • Fractures of bones, especially in children under three years old • Dislocations, sprains, twisting • Burns and scalds (including cigarette burns) • Multiple injuries or bruises • Explanation of injury offered by the child is not consistent with the injury • Abdominal pain caused by ruptured internal organs, without a history of major trauma 	<p>Signs in parents or caregivers</p> <ul style="list-style-type: none"> • Frequent visits with their child or children to health or other services with unexplained or suspicious injuries, swallowing of non-food substances or with internal complaints • Explanation of injury offered by the parent is not consistent with the injury • Family history of violence • History of their own maltreatment as a child • Fears injuring their child • Uses excessive discipline
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Possible signs of physical abuse

- Swallowing of poisonous substances, alcohol or other harmful drugs
- General indicators of female genital mutilation e.g. having a special operation

Possible signs of sexual abuse

Signs in children

- Bruising or bleeding in the genital area
- Sexually transmitted diseases
- Bruising to breasts, buttocks, lower abdomen or thighs
- Child or child's friend telling you about it, directly or indirectly
- Describing sexual acts
- Sexual knowledge or behaviour inappropriate for the child's age
- Going to bed fully clothed
- Regressive behaviour e.g. sudden return to bed-wetting or soiling
- Self-destructive behaviour e.g. drug dependency, suicide attempts, self-mutilation
- Child being in contact with a known or suspected paedophile
- Anorexia or over-eating
- Adolescent pregnancy
- Unexplained accumulation of money and gifts
- Persistent running away from home
- Risk taking behaviours - self harm, suicide attempts

Signs in parents or caregivers

- Exposing a child to prostitution or pornography or using a child for pornographic purposes
- Intentional exposure of a child to sexual behaviour of others
- Previous conviction or suspicion of child sexual abuse
- Coercing a child to engage in sexual behaviour with other children
- Verbal threats of sexual abuse
- Denial of adolescent's pregnancy by family

Possible signs of sexual abuse

- Effort to make oneself less attractive

Possible signs of psychological abuse

All types of abuse and neglect harm children psychologically, but the term 'psychological harm' or 'emotional abuse' applies to behaviour which damages the confidence and self-esteem of a child or young person, resulting in serious emotional deprivation or trauma.

Signs in children

- Constant feelings of worthlessness about life and themselves
- Unable to value others
- Lack of trust in people
- Lack of people skills necessary for daily functioning
- Extreme attention-seeking behaviour
- Is obsessively eager to please or obey adults
- Takes extreme risks, is markedly disruptive, bullying or aggressive
- Is highly self-critical, depressed or anxious
- Suicide threats or attempts
- Persistent running away from home.

Signs in parents or caregivers

- Constant criticism, belittling, teasing of a child, or ignoring or withholding praise and attention
- Excessive or unreasonable demands
- Persistent hostility and severe verbal abuse, rejection and scapegoating
- Belief that a particular child is bad or 'evil'
- Using inappropriate physical or social isolation as punishment
- Domestic violence

Appendix B: For staff in the ACT

- The risk factors of abuse outlined in this procedure (Appendix A) are applicable for ACT staff.
- Northcott staff (ACT) who are not mandatory reporters are to follow instruction in [flow chart 1](#).

Stage	What needs to be done?	Who does it?
Suspecting risk of harm	<ol style="list-style-type: none"> 1. Discuss situation with your manager, or if they are unavailable the next available line manager. <ul style="list-style-type: none"> • If it's an immediate concern for the wellbeing of a child or young person call 000 immediately • If the child or young person you are concerned about is currently in the ACT but resides interstate, you need to report to Care and Protection Services in the ACT. Care and Protection Services will notify the interstate authority if the child or young person is to return to their state of origin. 2. Call Care and Protection Services Centralised Intake Service as soon as possible if you suspect or believe on <i>reasonable grounds</i> that a child or young person is experiencing abuse or neglect or you wish to discuss your concerns about a child or young person. Mandated Persons line (24 hours) 1300 556 728 	Mandatory Reporter
Notify Manager	<ol style="list-style-type: none"> 3. Notify manager of outcome of the call 	
Document Incident	<ol style="list-style-type: none"> 4. Complete Northcott Child Wellbeing Register Form and complete a Riskman Child Wellbeing entry 	
Follow up	<ol style="list-style-type: none"> 5. Follow up as required 	

Care and Protection Services Centralised Intake Services

General Public line (24 hours) 1300 556 729

Mandated Persons line (24 hours) 1300 556 728

Mandated Persons fax line (24 hours) 02 6205 0641

Email address: childprotection@act.gov.au

Flow Chart 3: A.C.T. Mandatory Reporters

