



Hospice Waikato Policy

Child Protection

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1 Purpose

Hospice Waikato is committed to the prevention and management of suspected child and young person abuse and/or neglect, and to the protection of children/tamaiti and young people/rangatahi.

This policy provides Hospice Waikato staff with a framework to identify and manage actual and/or suspected child abuse and neglect. It recognises the important role and responsibility staff have in the accurate detection and appropriate referral of suspected child abuse and/or neglect, and the early recognition of children at risk of abuse and adults at risk of abusing children.

Hospice Waikato supports the role of statutory agencies (the NZ Police and the Ministry of Vulnerable Children Oranga Tamariki [MVCOT]) in the investigation of suspected abuse and/or neglect, and shall report such cases to these agencies.

When any decision is made about a child/tamaiti or young person/rangatahi suspected of being abused or neglected, the interests and welfare of the child/tamaiti or young person/rangatahi will be the prime consideration.

This policy acknowledges the principles of the Treaty of Waitangi in that the Māori child/tamaiti or young person/rangatahi has the right to be, and feel, empowered as a valued and unique individual, and as an integral member of whānau, hapū, iwi and the society of Aotearoa overall.

2 Scope

This policy applies to all Hospice Waikato employees, which for the purposes of this policy includes: all volunteers, contractors, agency and external personnel, including joint appointments and those people with honorary or unpaid staff status, undertaking work for or on behalf of, Hospice Waikato.

The scope of this policy includes children/tamaiti and young people/rangatahi who are under the age of 18 years and not married or in a civil union¹, and includes the unborn child².

3 Policy

The Hospice Waikato policy for child protection is that:

- Hospice Waikato is committed to protecting and cherishing children/tamaiti and young people/rangatahi
- The rights, welfare and safety of the child/tamaiti and young person/rangatahi are our first and paramount consideration
- Staff must follow the processes set out in this policy and notify all suspected,
 witnessed or disclosed cases of child abuse and/or neglect to a statutory agency

¹ From the Vulnerable Children's Act 2014

² From the Waikato DHB policy 'Family violence – child protection'

(MVCOT and/or police) even when the child/tamaiti or young person/rangatahi is not their primary client. Any person making a notification about suspected child abuse or neglect in good faith to MVCOT and police is protected from any criminal or civil proceedings. (See Sections 15 &16 Children, Young Persons, and their Families Act 1989)

- Wherever possible (and appropriate) the family/whānau, hapū and iwi participate in the making of decisions affecting that child/tamaiti or young person/rangatahi
- All staff are to recognise and be sensitive to other cultures
- Hospice Waikato provides an integrated service and works with statutory and other community agencies to provide an effective and coordinated approach to child/tamaiti or young person/rangatahi protection
- Legal requirements for documenting and referring suspected, witnessed, or disclosed cases of child abuse and/or neglect must be met
- A consultative team approach must be used in child protection because the work can be complex
- Hospice Waikato can access the Waikato District Health Board (DHB) Child Advisory Protection Education (CAPE), who can assist with advice and support for all Hospice Waikato staff with child protection concerns
- Hospice Waikato Chief Executive Officer (CEO) will ensure relevant clinical staff are trained to identify, assess, manage and refer all victims of child abuse and/or neglect
- All staff and volunteers must maintain confidentiality at all times and only share relevant information within the multi-disciplinary team and other health/support organisations

3.1 Responsibilities and training

3.1.1 Responsibilities

Organisational responsibilities

- Ensuring there is an organisation-wide policy for the management of child abuse and/or neglect
- Regular training for staff on the policy
- Ensuring there are processes to ensure the policy is adhered to such as clinical audit, and adequate support and supervision for staff
- Worker safety checks will be undertaken by Hospice Waikato as required by Part 3 of the Vulnerable Children Act 2014 for all employees and volunteers employed or engaged in work that involves regular or overnight contact with children
 - All new employees and volunteers will have a worker safety check before commencing employment

- All current employees and volunteers will have a worker safety check
- All employees and volunteers will have a repeat worker safety check within three years after the date of their last safety check
- HR will confirm that agency staff have had the necessary worker safety checks
- The organisation will ensure that students on placement have had the safety check done by their training provider
- Business Services Manager will confirm with contracting businesses that they have adequate child protection processes in place
- Where suspicion exists of child abuse perpetrated by a Hospice Waikato employee or volunteer, the matter will be dealt with in accordance with the disciplinary policy (Pom11.8)

Employee and volunteer responsibilities

- Be conversant with, and adhere to, the processes that are set out in this child protection policy
- Attend training and regular updates appropriate to their area of work
- Access specialist health services when required

These may include:

- Ministry for Vulnerable Children Oranga Tamariki
- Hamilton Children's Team
- Cultural assessments
- Interpreting services
- Mental health assessments
- Diagnostic medical assessments
- Social work services
- Paediatric medical assessment
- Child Advisory Protection Education (CAPE) see section 5

Employees have these responsibilities in all cases where child abuse or neglect is suspected or identified even if the child/tamaiti or young person/rangatahi is not their primary client.

If a staff member is concerned that a child/tamaiti or young person/rangatahi is being abused or is at risk of abuse, they should discuss it with their manager. This includes any behaviour by colleagues that raises concern.

The child's general practitioner (GP) or paediatrician must be informed, including of any referrals that have been made to MVCOT

If there is urgent or immediate danger the employee must contact the police on 111

Manager responsibilities

- Ensure all employees in their unit are released as appropriate to attend training
- Support their employees and ensure there is access or formal referral to professional supervision and/or EAP services where appropriate

3.1.2 Training and education

Employees and volunteers who are employed or engaged in work that involves regular or overnight contact with children shall receive education on identifying and reporting suspected child abuse or neglect and the relevant legislation, including the Vulnerable Children Act 2014 and the Children, Young Persons, and Their Families Act 1989.

Employees and volunteers will be provided with training on maintaining professional boundaries, and avoiding behaviour or situations that might be misinterpreted by others.

3.2 Child protection processes

3.2.1 Identify abuse

You may be worried about the wellbeing of a child or young person, but feel unsure about whether to let someone know. Every family is different, and signs of neglect or abuse can be hard to categorise. If you notice a pattern forming, it could be that something is wrong. Some of the signs of abuse are as follows:

Physical signs such as:

- Unexplained bruises, welts, cuts and abrasions
- Unexplained fractures or dislocations
- Burn marks

Other signs:

- No clear explanation for any of the above
- Behavioural concerns such as emotional withdrawal, aggression or anxiety
- Developmental delays, changes or signs
- The child talking about or subtly mentioning things that may indicate abuse
- Parents seeming stressed or not coping on the money they have
- Drug or alcohol problems
- Parents not having friends or family to help
- Adults hitting or yelling
- Mental health problems
- Children are left home alone or seem to be neglected
- Children routinely not going to school

Ask yourself these questions:

- Is the child's behaviour a sign of abuse or neglect, or are there other things going on in the family that could affect them?
- How is the child's behaviour?
- How is the child's development?
- Has the child or family hinted at, or said that something is wrong?
- Are there signs of family violence?
- Do I sense the family is struggling, or the child is at risk in some way?

Risk indicators include, but are not limited to:

- Any history of previous abuse or suspected abuse
- Family violence
- Disabilities, both physical and mental
- Parent indifferent, intolerant view child/tamaiti as particularly troublesome
- Severe social stress
- Severe isolation and lack of support
- Parents abused as children
- Alcohol and drug abuse
- Mental illness, including post-natal depression
- Parent very young
- · Frequent changes of address, more than two over last year

 An "at risk" family may actively avoid contact with health care providers or family support agencies

3.2.2 Notify authorities

If a child or young person is in immediate danger call NZ Police on 111.

Otherwise, if you suspect abuse call MVCOT on 0508 326 459 (the lines are open 24/7) or email MVCOT at contact@mvcot.govt.nz

3.3 Documentation

If child abuse is suspected, the circumstances that gave rise to your concerns should be fully documented as soon as possible. This includes recording word for word anything the child tells you, with the date and time, and who was present.

All documentation may be classed as evidence in the court of law and can be called upon at any given time. If evidence is required to be given in court, a disposition statement will usually be obtained from the child/tamaiti's or young person/rangatahi's documentation. If you are asked to provide evidence, you must discuss this with your manager.

Full documentation is required to alert others to the current situation, with the notation "child protection alert" recorded in the child's/tamaiti or young person's/rangatahi PalCare record. If recording in PalCare use the risk management alert icon so the issue can be easily identified.

If the child/tamaiti or young person/rangatahi of concern is not under Hospice Waikato care, then all documentation will be kept under the relevant patient, child/tamaiti or young person/rangatahi's clinical record in the Family Network section of PalCare.

All forms of communication, such as phone calls, faxes, emails and texts, need to be recorded. All discussions with managers, team leaders or outside agencies must also be documented.

Protecting yourself from allegations of abuse

While a strict policy preventing one-on-one contact is the best way to protect against false claims, it is not always feasible when caring for a child in IPU or providing counselling.

One solution is to install a video monitoring system in Rainbow Place and the dedicated paediatric room in IPU. However, this is impossible in areas where cameras are not allowed, such as bathrooms. For young children who still need help, doors should be kept open. Older children can go to the bathroom alone.

Counselling should only take place in rooms fitted with windows in the door so that interactions between children and adults can be observed from the outside.

If healthcare workers notice situations or behaviours in one of their colleagues that are potentially leaving them vulnerable to false abuse allegations, they should speak to their manager.

4 Definitions

Child abuse	Child abuse means the harming (whether physically, emotionally or sexually), ill treatment, abuse, neglect or deprivation of any child or young person (Children, Young Persons and Their Families' Act 1989)
Child emotional and psychological abuse	The lack of provision of emotional, physical and social support so that a child/tamaiti or young person's/rangatahi development is seriously affected, e.g. failure to provide with adequate food, clothing and health care.
Child sexual abuse (CSA)	This is any act or acts that result in the sexual exploitation of a child/tamaiti or young person/rangatahi, whether consensual or not.
Failure to thrive (FTT) or poor growth	Failure to thrive describes an infant who shows a decline from a previously established growth pattern or who falls well below the expected weight gain for their age. If there is no medical reason, then either the parents have a poor understanding of feeding requirements or it is highly likely that neglect is the cause. Sometimes a child/tamaiti or young person/rangatahi that is not wanted or is rejected fails to thrive.
Family violence	Violence or abuse of any type that occurs between those persons connected by relationships (non–strangers). It includes child abuse, partner abuse, parent abuse and older person or dependent adult abuse. It can be physical, psychological/emotional, sexual, financial, material. Includes acts of violence that may result in pain, injury, impairment or disease. This may include hitting, choking or in any way assaulting another person, and also under/over medication. There is usually visible evidence of physical abuse (bruising, fractures, burns, lacerations, etc.) though the differences between accidental injury and abuse can be slight and require a consultative approach and expert investigation.
Home alone	Parents/guardians/caregivers are liable if they leave children/tamaiti under the age of 14 years unsupervised, without making reasonable provision for the supervision and care of the child/tamaiti, for a time that is unreasonable or under conditions that are unreasonable.
Inflicted injury	This is any act or acts that may result in inflicted injury to a child/tamaiti or young person/rangatahi. Has been referred to in the past as a non- accidental injury (NAI).
Multiagency safety plan (MASP)	Ministry of Vulnerable Children Oranga Tamariki (MVCOT) leads this process in collaboration with health services.

Primary client	Multiagency safety plans ensure the safety of the child/tamaiti or young person/rangatahi, but also provide for the child/tamaiti or young person's/rangatahi ongoing health and recovery and the wellbeing needs of the family. Includes • Who will care for the child/tamaiti or young person/rangatahi • How safety issues will be addressed • How health needs of the child/tamaiti or young person/rangatahi will be responded to • What and how support will be provided to the child/tamaiti or young person/rangatahi and family • The roles and responsibilities of family and professionals • How monitoring and review will occur. If the child/tamaiti or young person/rangatahi is the subject of court orders, a copy of the safety plan should be filed with the court plan or review of the child/tamaiti or young person/rangatahi.
Primary client	This is the client or patient for whom Hospice Waikato is directly responsible
Report of concern (RoC)	Sometimes called a "notification to MVCOT". Sent to the MVCOT National Contact Centre when staff have serious concerns about the care and protection of a child/tamaiti or young person/rangatahi.
Statutory agency	For the context of our child protection policy we refer to 2 statutory agencies Ministry of Vulnerable Children Oranga Tamariki (MVCOT) and Police.

5 Referral and Advice Agencies

5.1 Ministry of Vulnerable Children Oranga Tamariki (MVCOT)

A national statutory agency responsible for the investigation of suspected child abuse and/or neglect.

- 1. Phone 0508 FAMILY (0508 326 459) and talk to one of the Social Workers (+64 9 912 3820 from outside New Zealand)
- 2. Follow up phone call with an email to contact@mvcot.govt.nz with the subject line 'Report of Concern'

MVCOT will email a confirmation that they have received your correspondence. Keep this on record.

All contacts, correspondence and emails must be recorded in PalCare.

5.2 Child Advisory Protection Education

Child Advisory Protection Education at Waikato DHB (CAPE)

Phone: (07) 839 8899

5.3 Vulnerable Kids Information System

Vulnerable Kids Information System (ViKI) enables secure information sharing between professionals and practitioners working in children's teams

To sign up or arrange training, contact Hamilton Children's Team at hamilton.childrensteam@MVCOT.govt.nz

To make a referral, either phone 0800 FOROURKIDS (0800 367 687) or refer online at https://viki.govt.nz/

6 References and Related Documents

Waikato District Health Board policy, Violence intervention – child protection

Hospice West Auckland - Child Protection Policy

Vulnerable Children Act 2014. Available from:

http://www.legislation.govt.nz/act/public/2014/0040/latest/DLM5501618.html

Children's worker safety checking under the Vulnerable Children Act 2014. Available from: https://www.mvcot.govt.nz/assets/Uploads/Documents/Childrens-Workforce-Safety-Checking-VCA.pdf

Children, Young Persons, and Their Families Act 1989. Available from: http://www.legislation.govt.nz/act/public/1989/0024/latest/DLM147088.html

The White Paper for Vulnerable Children. Available from:

http://www.msd.govt.nz/documents/about-msd-and-our-work/work-programmes/policy-development/white-paper-vulnerable-children/white-paper-for-vulnerable-children-volume-1.pdf

Ministry for Vulnerable Children Oranga Tamariki (MVCOT). Available from: https://www.mvcot.govt.nz/

New Zealand Police child protection guidelines. Available from:

http://www.police.govt.nz/advice/personal-and-community-advice/school-portal/information-and-guidelines/child-protection

Safer recruitment, safer children. Available from:

http://www.childmatters.org.nz/file/Resources-page/safer-recruitment-safer-children-fa-2.pdf

Hospice Waikato policy Pom11.8 Disciplinary policy

7 Document Control

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