

DOCTOR DAN CRAIG

Child Protection Policy

as at May 2020

1. PURPOSE OF THE POLICY

- 1.1. The purpose of the Doctor Dan Craig Child Protection Policy ('the Policy') is to provide written processes about the appropriate conduct of Board members, employees, contractors and volunteers that accord with and are bound to both Federal and State child protection legislation and principles established through common law.
- 1.2. In Tasmania, the protection of children and young people is covered by the Children, Young Persons and their Families Act 1997.

2. SCOPE OF THE POLICY

- 2.1. The policy applies to all Board members, employees, contractors and volunteers of Doctor Dan Craig.

3. DEFINITIONS

- 3.1. In this Policy, unless the context otherwise requires, the following terms have the following meanings:
 - (a) **Abuse** means:
 - (i) Sexual abuse; or
 - (ii) Physical or emotional injury or other abuse, or neglect, to the extent that:
 - A. the injured, abused or neglected person has suffered, or is likely to suffer, physical or psychological harm detrimental to the person's wellbeing; or
 - B. the injured, abused or neglected person's physical or psychological development is in jeopardy (section 4 of the Children, Young Persons and their Families Act 1997).
 - (b) **Abuse** in relation to a Child means (section 4 of the Family Law Act 1975) means:
 - (i) an assault, including a sexual assault, of the child; or
 - (ii) a person (the first person) involving the child in a sexual activity with the first person or another person in which the child is used, directly or indirectly, as a sexual object by the first person or the other person, and where there is unequal power in the relationship between the child and the first person; or
 - (iii) causing the child to suffer serious psychological harm, including (but not limited to) when that harm is caused by the child being subjected to, or exposed to, family violence; or
 - (iv) serious neglect of the child.
 - (c) **Abused** has a corresponding meaning to Abuse.
 - (d) **Board** means the body charged with management of Doctor Dan Craig Incorporated by virtue of the Associations Incorporation Act 1964.
 - (e) **Bullying** means repeated behaviour directed to a person or persons which a reasonable person, having regard to all the circumstances, would expect to victimise, humiliate, undermine or threaten the person or persons, and which creates a risk to their health and safety. Where it involves the use of information and communication technologies, it is often called cyberbullying. It can include:
 - (i) making derogatory, demeaning or belittling comments or jokes about someone's appearance, lifestyle, background, or capability;
 - (ii) communicating in an abusive manner;

- (iii) spreading rumours or innuendo about someone or undermining in other ways their performance or reputation;
- (iv) dismissing or minimising someone's legitimate concerns or needs;
- (v) ignoring, or excluding someone from information or activities;
- (vi) touching someone threateningly or inappropriately;
- (vii) invading someone's personal space or interfering with their personal property;
- (viii) teasing, or making someone the brunt of pranks or practical jokes;
- (ix) displaying or distributing written or visual material that degrades or offends.

Behaviour which is not bullying includes:

- (i) respectfully disagreeing with or criticising someone's beliefs or opinions;
 - (ii) setting reasonable performance goals, standards or deadlines;
 - (iii) giving reasonable directives, feedback or assessments of performance or behaviour;
 - (iv) taking legitimate disciplinary action.
- (f) **Child** means a person who has not attained the age of 18 years;
- (g) **Child Exploitation Material** means material that describes or depicts a person who is or who appears to be a child:
- (i) engaged in sexual activity; or
 - (ii) in a sexual context; or
 - (iii) as the subject of torture, cruelty or abuse (whether or not in a sexual context) in a way that a reasonable person would regard as being, in all the circumstances, offensive. Child exploitation material can include any film, printed matter, electronic data, computer image and any other depiction.
- (h) **Child Pornography** means sexually explicit or suggestive material depicting children. Child pornography is a form of child exploitation material.
- (i) **Child Protection Agency Official** means a person authorised by the Children, Young Persons and their Families Act 1997 to act with respect to allegations of any allegation of Harm, Abuse or Neglect under the Act.
- (j) **Emotional Abuse** means acts or omissions that have caused, or could cause emotional Harm or lead to serious behavioural or cognitive disorders. It includes:
- (i) subjecting a person to excessive and repeated personal criticism;
 - (ii) ridiculing a person, including the use of insulting or derogatory terms to refer to them;
 - (iii) threatening or intimidating a person;
 - (iv) ignoring a person openly and pointedly; and
 - (v) behaving in a hostile manner or in any way that could reasonably result in another person feeling isolated or rejected.
- (k) **Freedom of Information Request** means a request for information under the Right to Information Act 2009.

- (l) **Grooming** means the manipulative cultivation of a relationship in order to initiate or hide sexual abuse of an adult or a child. In the case of child sexual abuse, an offender may groom not only the child, but also the child's parents or guardians, teachers, clergy and church workers.
- (m) **Harm** 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:
 - (i) Physical, psychological or emotional neglect; or
 - (ii) Sexual abuse or exploitation.
- (n) **Harassment** means unwelcome conduct, whether intended or not, in relation to another person where the person feels with good reason in all the circumstances offended, belittled or threatened. Such behaviour may consist of a single incident or several incidents over a period of time. It includes:
 - (i) making unwelcome physical contact with a person;
 - (ii) making gestures or using language that could reasonably give offence including continual and unwarranted shouting;
 - (iii) making unjustified or unnecessary comments about a person's capacities or attributes;
 - (iv) putting on open display pictures, posters, graffiti or written materials that could reasonably give offence;
 - (v) making unwelcome communication with a person in any form (for example, phone calls, email, text messages); and
 - (vi) stalking a person (unwanted or obsessive attention by an individual or group towards another person).
- (o) **Neglect** means the failure to provide the basic necessities of life where a child's health and development are placed at risk of harm. It includes being deprived of
 - (i) food;
 - (ii) clothing;
 - (iii) shelter;
 - (iv) hygiene;
 - (v) education;
 - (vi) supervision and safety;
 - (vii) attachment to and affection from adults; and
 - (viii) medical care.
- (p) **Offensive Language** includes verbal harassment, racial and other forms of vilification, personal insult or comment and obscene words.
- (q) **Paedophilia** means:
 - (i) offences of a sexual nature committed in relation to children; or
 - (ii) offences relating to obscene material depicting children.
- (r) **Physical Abuse** means any intentional or reckless act, use of force or threat to use force causing injury to, or involving unwelcome physical contact with, another person. This may take the form of

slapping, punching, shaking, kicking, burning, shoving or grabbing. An injury may take the form of bruises, cuts, burns or fractures. It does not include lawful discipline by a parent or guardian.

- (s) **Prohibited Material** means:
- (i) publications, films and computer games that have been classified by the Office of Film and Literature Classification as being unsuitable for a child to read, see or play;
 - (ii) any other images or sounds not subject to classification by the Office of Film and Literature Classification that are considered with good reason to be unsuitable for a child to see or hear; and
 - (iii) any substance or product supplied to or used by children prohibited by law, such as alcohol, tobacco products, illegal drugs and gambling products.
- (t) **Prohibited Substance** means any substance banned or prohibited by law for use or consumption by adults.
- (u) **Restricted Material** means:
- (i) publications, films, and computer games that have been classified as Category 1 or 2 restricted, X or RC classification by the Office of Film and Literature Classification; and
 - (ii) any other images or sounds not subject to classification by the Office of Film and Literature Classification (for example, internet material) that are considered with good reason as being offensive on the grounds of violence, sex, language, drug abuse or nudity.
- (v) **Sexual Abuse** includes sexual behaviour involving the relevant person and another person in the following circumstances:
- (i) The other person bribes, coerces, exploits, threatens or is violent toward the relevant person;
 - (ii) The relevant person has less power than the other person;
 - (iii) There is a significant disparity between the relevant person and the other person in intellectual capacity or maturity.
- (w) **Sexual abuse of a Child** means the use of a child by another person for his or her own sexual stimulation or gratification or for that of others. It includes:
- (i) exposing oneself indecently to a child;
 - (ii) having vaginal or anal intercourse with a child;
 - (iii) penetrating a child's vagina or anus with an object or any body part;
 - (iv) sexually touching or fondling a child;
 - (v) kissing, touching, holding or fondling a child in a sexual manner;
 - (vi) staring at or secretly watching a child for the purpose of sexual stimulation or gratification;
 - (vii) making any gesture or action of a sexual nature in a child's presence;
 - (viii) making sexual references or innuendo in a child's presence using any form of communication;
 - (ix) discussing or inquiring about personal matters of a sexual nature with a child;
 - (x) exposing a child to any form of sexually explicit or suggestive material;
 - (xi) forcing a child to sexually touch or fondle another person;

- (xii) forcing a child to perform oral sex;
- (xiii) forcing a child either to masturbate self or others, or to watch others masturbate; and
- (xiv) forcing a child to engage in or watch any other sexual activity.

Sexual abuse of a child does not include:

- (i) sex education with the prior consent of a parent or guardian;
 - (ii) age appropriate consensual sexual behaviour between peers (i.e. the same or a similar age).
- (x) **Sexual Assault** means any intentional or reckless act, use of force or threat to use force involving some form of sexual activity against an adult without their consent. It includes:
- (i) having vaginal or anal intercourse with a person without their consent;
 - (ii) penetrating another person's vagina or anus with an object or any body part without that person's consent;
 - (iii) sexually touching and fondling a person without their consent;
 - (iv) kissing another person without their consent;
 - (v) holding another person in a sexual manner without their consent;
 - (vi) forcing a person to sexually touch or fondle another person; and
 - (vii) forcing a person to perform oral sex.
- (y) **Sexual Exploitation** refers to any form of sexual contact or invitation to sexual contact with an adult, with whom there is a supervisory relationship, whether or not there is consent and regardless of who initiated the contact or invitation. It does not include such contact or invitation within a marriage.
- (z) **Sexual Harassment** means unwelcome conduct of a sexual nature, whether intended or not, in relation to an adult where the person reasonably feels in all circumstances offended, belittled or threatened. Such behaviour may consist of a single incident or several incidents over a period of time. It includes:
- (i) asking a person for sex;
 - (ii) giving a person to understand that you would like sexual favours from them;
 - (iii) making any gesture, action or comment of a sexual nature to a person directly or making a comment of a sexual nature about them in their presence;
 - (iv) making jokes containing sexual references or innuendo using any form of communication;
 - (v) exposing a person to any form of sexually explicit or suggestive material;
 - (vi) making unwelcome physical contact such as touching, pinching, or patting;
 - (vii) making unwelcome or unnecessary inquiries about or attempts to discuss personal matters of a sexual nature;
 - (viii) deliberately intruding on an individual's personal space;
 - (ix) staring at or secretly watching a person for the purpose of sexual stimulation or gratification; and
 - (x) stalking a person.

- (aa) **Staff** includes all Board members, employees, contractors and volunteers who are providing any form of service to the organisation.
- (bb) **Working with Children Check** means the requirement for a Staff member to check the status of a person who may be working with Vulnerable People under the Registration to Work with Vulnerable People Act 2013.
- (cc) **Young Person** means a person who is between 13 to 17 years of age and participating in services provided or activities relating to Doctor Dan Craig Incorporated.
- (dd) **Young People** means the plural of Young Person as defined herein.

4. ACCESS TO POLICY

- 4.1. All Staff are to have access to an electronic copy of the Policy and have access to ongoing professional development in the area of child protection and prevention of harm.

5. STAFF

- 5.1. Staff must be carefully selected and screened. Prior to Staff commencing with the organisation the following precautions will be taken:
 - (a) All Staff will provide details of relevant past experience, positions held, details of two referees and permission to contact them.
 - (b) Referees will be checked and spoken to, using an agreed set of questions which are drafted from time to time by the Director or his appointee. The questions will seek to establish the applicant's suitability for the role or position and the conversation will be documented and retained on file.
 - (c) Short listed Staff will be interviewed by the Director or his appointee prior to being accepted as a Staff member.
 - (d) A Working with Children Check which complies with the legislative requirements of Tasmania (Registration to Work with Vulnerable People Act 2013) will be requested and received prior to Staff appointment as part of the recruiting process unless exempt under the legislation.
 - (e) Where the Working with Children Check has been declined, a person cannot be considered for any position with the organisation.

6. AWARENESS OF INAPPROPRIATE BEHAVIOUR/HARM

- 6.1. In the first instance, Staff who become aware of inappropriate behaviour or Harm are to refer to the Policy and seek the assistance of the Director in relation to mandatory reporting requirements.

7. PRINCIPLES

- 7.1. Doctor Dan Craig will uphold the following principles under this Policy:
 - (a) Staff of the organisation are expected to reflect the highest standards of care in their behaviour towards and relationships with Young People.
 - (b) Protecting Young People from Harm and the risk of Harm is fundamental to maximising their personal and academic potential.
 - (c) Doctor Dan Craig recognises that people who are subjected to abuse are harmed by it.
 - (d) The welfare and best interests of any Young Person will always be a primary consideration.
 - (e) All Staff must ensure that their behaviour towards, and relationships with, Young People reflect proper standards of care for Young People and are not unlawful.

- (f) Doctor Dan Craig expects Young People to show respect to all members of Staff, and to comply with safe practices.
- (g) Sexual acts by adult Staff with a Young Person who is a child will always be sexual abuse.
- (h) Because of the imbalance of power that exists between an adult and a Young Person, a Young Person cannot “consent” to abuse.
- (i) Staff of the organisation must not, under any circumstances, engage in physical or emotional abuse or engage in sexual conduct of any nature with a Young Person.
- (j) Doctor Dan Craig will respond to reporting of suspected or actual Harm, or risk of Harm to a Young Person.
- (k) Doctor Dan Craig will ensure that the reporting process is conducted in such a manner as to maintain the Child's dignity.
- (l) Doctor Dan Craig will act fairly and reasonably towards Staff who are the subject of allegations of improper conduct.
- (m) Anybody within the organisation who becomes aware of or reasonably suspects that a Young Person is being Harmed, must report the Harm or suspected Harm.
- (n) Doctor Dan Craig will take disciplinary action against Staff who Harm Young People – where Harm has been proven.
- (o) Doctor Dan Craig will not permit people to work in a position if, on the basis of all information available, the School believes the allegations against them were wholly or partly true and there would be an unacceptable risk that others might be harmed.
- (p) Doctor Dan Craig will cooperate with state and federal authorities in investigating allegations of harm.
- (q) Persons receiving information about Abuse or suspected Abuse should explain to the informant that the information supplied will be:
 - (i) confidential, to the extent that this is possible given the need to investigate allegations and requirements of the law, and
 - (ii) victimisation of the informant will not be tolerated.

8. GUIDELINES

8.1. In complying with these principles, Doctor Dan Craig will be guided by the following:

- (a) **Risk Management:** For the protection of both Staff and Young People, wherever practical, meetings between Young People and Staff should occur in a room with the door open (unless both the Staff member and the Young Person are clearly visible from the outside, e.g. by means of a pane of glass).
- (b) **Natural Justice:** The principles of natural justice will apply to decisions to be made under this Policy. The two fundamental principles of natural justice are:
 - (i) That those making a decision are not biased; and
 - (ii) That nobody should be condemned before they are given prior notice of the allegations against them and they have a fair opportunity to be heard.
- (c) **Process:** It is important to make the lodging of a complaint easy.
- (d) **Confidentiality:** Each person who has access to information regarding suspected or disclosed Harm has an obligation to observe appropriate confidentiality. Doctor Dan Craig is unable to promise

absolute confidentiality since its policies will require disclosing, internally and externally, certain details involved in responding to any complaint. Investigating authorities can request documentary evidence in the course of conducting an investigating a mandatory report.

- (e) **Criminal Law:** Any allegations of criminal misconduct should be referred to the police. The Director must refer all allegations of Paedophilia to the police, including those from the past.
- (f) **Defamation:** A person providing information about Harm, Abuse or Neglect, in good faith and to a person who needs to know that information, is generally excused from liability for defamation.
- (g) **Promptness:** All steps under the Policy should be carried out with due diligence without unnecessary delay. Doctor Dan Craig will keep the person who lodged the complaint and the person against whom the complaint is made, informed of the process.
- (h) **Protection:** The Director will ensure that the following are undertaken in order to reduce the chance of Abuse occurring:
 - (i) Ensure that Staff understand and fulfil their obligations under the Policy.
 - (ii) Ensure that Staff who have contact with Young People have a current Working with Children Check which complies with the legislative requirements of Tasmania unless exempt under the legislation.
- (i) **Support:** Doctor Dan Craig will provide support for someone who has suffered Abuse by providing professional counselling if it is requested, even if any allegation is not yet proved or disproved. Doctor Dan Craig will support the respondent to a complaint with professional counselling if it is requested until the matter has been resolved.
- (j) **Interviews:** There will be two representatives of Doctor Dan Craig present at interviews where this is practical. In cases of allegations of serious Harm, it is best not to interview a Young Person unless a qualified person conducts the interview (e.g. psychologist, counsellor etc).
- (k) **Public Relations:** The Director will ensure that Doctor Dan Craig is able to react quickly to allegations of Harm so that accurate and relevant information is available for Staff, Young People and their families, and for the media where necessary.
- (l) **Police Action:** It will usually be necessary to wait until the police have decided whether to charge the respondent to an allegation before taking any internal disciplinary proceedings. If the police do charge the respondent, it will be necessary to wait until the charges have been dealt with in the courts before commencing internal enquiries or disciplinary proceedings. This does not preclude the Director from seeking advice from police regarding the duty of care to existing Young People, which may involve the standing down of a Staff member during an investigation. The police are not required to inform the organisation about their investigation. Some of their materials may be acquired under a Freedom of Information Request when their work on the case is finished.
- (m) **Insurer:** Doctor Dan Craig will keep its insurer informed about developments.
- (n) **Publication:** The Director will ensure that this policy is published:
 - (i) on the website; and
 - (ii) to each new Staff member, on induction.The Director will ensure that a copy of the Policy is always available on request from the organisation.
- (o) **Review:** Doctor Dan Craig will ensure that the Policy is reviewed at least once every two years.

9. THE ROLE OF THE DIRECTOR

- 9.1. The Director should not, under any circumstances, caution the alleged victim as to the possible consequences of reporting Abuse (e.g. possible break-up of the family unit), especially if the alleged abuser is a family member.
- 9.2. On receipt of a report of Abuse other than the suspected Sexual Abuse of a Young Person by a Staff member, the Director will carry out a preliminary assessment to determine whether he reasonably suspects the Abuse has occurred.
- 9.3. There will be two representatives of the organisation present at interviews, where practical. In cases of allegations of serious Harm, it is best not to interview a Young Person unless a properly qualified person conducts the interview.
- 9.4. If the Director receives a written report from a Staff member about Sexual Abuse or suspected Sexual Abuse by another person of a Young Person, the Director will immediately provide a copy of the report to the police, and must also give a copy of the report to a member of the Board. The Director must, upon becoming aware of all allegations of Paedophilia, immediately refer that allegation in writing to the police.
- 9.5. The Director will support the Young Person by:
 - (a) offering support;
 - (b) offering to arrange professional counselling, if circumstances warrant it, even if any allegation is not yet proved or disproved;
 - (c) treating the Young Person with respect and dignity;
 - (d) being sensitive to the Young Person's needs, feelings and concerns; and
 - (e) maintaining confidentiality, to the degree possible in the circumstances.
- 9.6. The Director will contact the Young Person's parents, inform them of the allegations and explain how he intends to proceed, except where the suspected Harm is from people outside the organisation, in which event the responsibility for informing parents/caregivers rests with the investigating Child Protection Agency Official.
- 9.7. The Director will inform the respondent of the allegations and:
 - (a) if the respondent is a member of the organisation, offer support;
 - (b) treat the respondent with respect and dignity;
 - (c) arrange for professional counselling if it is requested until the matter has been resolved.
- 9.8. The Director will stand down any member of Staff if there is an unacceptable risk in leaving the member of Staff in their position.
- 9.9. When a prosecution relating to the information is completed or if there is no prosecution, the Director will investigate the information to determine whether:
 - (a) redress should be offered to the Young Person;
 - (b) disciplinary action should be taken.
- 9.10. The Director may involve independent professionals in the investigation.
- 9.11. If the Director believes disciplinary action should be taken against the respondent, the Director will initiate that action and ensure that the principles of natural justice are observed.
- 9.12. The Director will ensure that the following are undertaken in order to reduce the chance of Abuse occurring:

- (a) Ensure that each Staff member understands and fulfils their obligations under the Policy;
- (b) Ensure that each Staff member who has contact with a Young Person has a current Working with Children Check which complies with the legislative requirements of Tasmania unless exempt under the legislation.

10. SUSPICION OF ABUSE/HARM

10.1. Reasonable grounds for suspecting Abuse and/or Harm exist if:

- (a) A Young Person reports that they have been Abused/Harmed;
- (b) Someone else, for example another Young Person, a parent, or a Staff member, reports that Abuse/Harm has occurred or is likely to occur;
- (c) A Young Person reports that they know of someone who has been Abused/Harmed (it is possible that they may be referring to themselves);
- (d) Significant changes in the behaviour of a Young Person, or the presence of new unexplained and suspicious injuries are a concern;
- (e) The Abuse/Harm is observed happening.

10.2. Any disclosure of Abuse/Harm is important and must be acted upon, regardless of whether:

- (a) The Abuse/Harm to a Young Person has been caused by a person within or outside the organisation, or
- (b) The Young Person disclosing the abuse/Harm is from within or outside the organisation.

11. WHEN A DISCLOSURE IS MADE

11.1. **Mandatory Reporting:** Most professionals who provide services to children and families in Tasmania are 'mandatory reporters' of Child Abuse, under the Children, Young Persons and their Families Act 1997. This includes, but is not limited to, the following groups:

- (a) Child Care providers;
- (b) Psychologists;
- (c) Registered medical practitioners and nurses;
- (d) School principals and teachers;
- (e) Volunteers and employees of any organisation that provides health, welfare, education, care or residential services and which receive government funding.

12. INVESTIGATIONS

12.1. No investigation of allegations of Harm should be undertaken by the organisation.

12.2. Questions should be limited to those asked as to confirm the need to report the matter to the Police or the Department of Health and Human Services - Child Protection Services. The safety of the Young Person is paramount. Unnecessary questions or interviews could cause distress or confusion and interfere with any subsequent investigation undertaken by the authorities.

12.3. In the first instance, reports by the organisation of suspected Child Abuse should be made to the Department of Health and Human Services - Child Protection Services.

12.4. A report should also be made to the Director.

12.5. Doctor Dan Craig will not:

- (a) Conduct its own investigation to substantiate claims;
- (b) Hold its own internal hearing; or
- (c) Attempt to mediate a settlement of the matter instead of notifying relevant authorities

12.6. Investigations conducted by the organisation could lead to:

- (a) The destruction of evidence by an accused person;
- (b) Intimidation of the person disclosing the information; or
- (c) Intimidation of the Young Person being harmed (if the disclosure was made by someone else).

NB: When a report is made to the DHHS or Tasmania Police, reporting details are kept confidential and the identity of the reporter is strictly protected.

12.7. In summary, the following actions should be undertaken in any cases where it is known or suspected on reasonable grounds that a Young Person is or has been subjected to Abuse/Harm:

- (a) Record details of the allegations. Be careful not to taint the evidence of the Young Person or the respondent.
- (b) Mandatory report to authorities.
- (c) Provide details of the allegations to the respondent.
- (d) If there is unacceptable risk, the respondent should be stood down. In extreme cases, dismiss them summarily.
- (e) Offer counselling to the Young Person and the respondent.
- (f) Inform the Young Person's parents.
- (g) Inform the Board of Doctor Dan Craig.
- (h) Inform the organisation's insurers.
- (i) Investigate the allegations. Note: If the allegations have been reported to police, do not begin investigations until the prosecution is complete and the police inform you they have decided not to charge the respondent.
- (j) Attend to public relations (after discussion with Senior Management team).
- (k) Take disciplinary action against the respondent if the circumstances require it.
- (l) Keep the Young Person and the respondent informed as the matter proceeds.

13. PROCEDURES FOR REPORTING ABUSE/HARM

13.1. This Part applies to:

- (a) Abuse/Harm of any Young Person receiving services or support from the organisation at the time the Harm was caused; and
- (b) behaviour of a Staff member that a Young Person considers is inappropriate.

13.2. Where a Staff member has concerns or is unsure whether or not observations should be cause for concern, they should discuss their concerns with senior Staff e.g. the Director, or contact either Gateway Services: 1800 171 233 OR Department of Health and Human Services - Child Protection Services 1300 737 639.

- 13.3. Reporting to the police is mandatory where harm caused to a Young Person indicates a criminal offence may have taken place, such as a sexual assault.
- 13.4. It should be noted that the role of Staff is not an investigative one. Staff must not undertake investigations beyond satisfying themselves that they have reasonable grounds to suspect that a Young Person has been harmed or is at risk of Harm. Neither the Staff member nor the Director is obliged to obtain proof, establish the cause of Harm or assess its severity. Once a report has been made, the Staff member is not required to take further action, beyond the requirement to exercise a duty of care.

14. MEANING OF “AT RISK”

- 14.1. In accordance with section 4 of the Children, Young Persons and Their Families Act 1997, a Child is at risk if:
- (a) the Young Person has been, is being, or is likely to be, Abused or Neglected; or
 - (b) any person with whom the Young Person resides or who has frequent contact with the Young Person (whether the person is or is not a guardian of the Young Person) –
 - (i) has threatened to kill or Abuse or Neglect the Young Person and there is a reasonable likelihood of the threat being carried out; or
 - (ii) has killed or Abused or Neglected some other Young Person, child or adult and there is a reasonable likelihood of the Young Person in question being killed, Abused or Neglected by that person; or
 - (iii) the Young Person is an affected child within the meaning of the Family Violence Act 2004; or
 - (c) the guardians of the Young Person are:
 - (i) unable to maintain the Young Person; or
 - (ii) unable to exercise adequate supervision and control over the Young Person; or
 - (iii) unwilling to maintain the Young Person; or
 - (iv) unwilling to exercise adequate supervision and control over the Young Person; or
 - (v) dead, have abandoned the Young Person or cannot be found after reasonable inquiry; or
 - (vi) are unwilling or unable to prevent the Young Person from suffering abuse or neglect; or
 - (d) the Young Person is under 16 years of age and does not, without lawful excuse, attend a school, or other educational or training institution, regularly.

15. REPORTING PROCEDURE

- 15.1. Staff members at Doctor Dan Craig are expected to reflect the highest standards of care in their behaviour towards, and relationships with Young People. Staff of Doctor Dan Craig must not under any circumstances engage in physical or emotional Abuse or engage in sexual contact of any nature with a Young Person. It is irrelevant whether the conduct is consensual or non-consensual, or condoned by parents or caregivers. The age of the Young Person is also irrelevant. Failure to behave in an appropriate manner may result in criminal proceedings and/or disciplinary action, including dismissal.
- 15.2. Where a reference is made to PROVIDING A WRITTEN REPORT, the following matters are to be included in the written report:
- (a) Name of the person giving the report (the ‘first person’).
 - (b) The Young Person’s name, sex and date of birth.

- (c) Details of the basis for the first person becoming aware, or reasonably suspecting, that the Young Person has been Sexually Abused by a Staff member of Doctor Dan Craig.
- (d) Details of the Abuse or suspected Sexual Abuse.
- (e) Any of the following information of which the first person is aware:
 - (i) the Young Person's age;
 - (ii) the identity of the Staff member who has abused, or is suspected to have Abused the Young Person;
 - (iii) the identity of anyone else who may have information about the Abuse or suspected abuse OR may have witnessed the Abuse.

16. EVIDENCE

- 16.1. The investigation of these matters is a complex and sensitive process. In the course of an investigation, officers from the Child Protection Services may request permission to interview the Young Person concerned. In some cases, in order to ensure the interests of the Young Person are protected, the Young Person may be interviewed before the matter is discussed with the parent/caregiver.
- 16.2. The responsibility for informing parents/caregivers of notifications and any interviews rests with the investigating child protection agency officers, not with the Director. For this reason, any person making an inquiry or complaint concerning an investigation or an interview must be promptly referred to the Director who will refer the enquirer to the appropriate department, with the explanation that it is the responsibility of that department to answer such inquiries or complaints.

17. CONFIDENTIALITY

- 17.1. The identity of the person reporting the matter must not be revealed to any person or officer of any department without that person's consent. Child protection agencies operate under strict laws of confidentiality. This means they do not divulge the identity of the person reporting the matter except to others requiring the information to perform duties under the Child Protection Act 1999, neither do they divulge information about their investigations to the person reporting the matter.
- 17.2. Section 22 of the Child Protection Act 1999 provides for the protection from civil liability for persons who, acting honestly, notify or give information about suspected Harm to a child. It also states that merely because the person gives notification, the person cannot be held to have breached any code of professional etiquette or ethics, or departed from accepted standards of professional conduct.

18. SUPPORT FOR THE YOUNG PERSON

- 18.1. Doctor Dan Craig has a responsibility to offer a long-term, supportive environment for all Young People. The following are suggested as ways to support a Young Person who may be in need of protection:
 - (a) Treat the Young Person with respect and dignity.
 - (b) Be sensitive to the Young Person's needs, feelings and concerns.
 - (c) Monitor the situation.
 - (d) Maintain confidentiality as far as is practicable.
 - (e) Immediately notify the Director if, after the initial report, any further incidents of Harm are suspected.

19. PREVENTING HARM TO YOUNG PEOPLE

- 19.1. Many Children are Harmed by someone they know and trust: a parent, sibling, other relative, family friend or care provider.
- 19.2. Employees should be aware of the physical, emotional and behavioural indicators of risk of student Harm and of actual Harm. These indicators are more significant if they are severe and/or consistent over time.

SCHEDULE A

Indicators of Harm

- (a) Physical abuse and excessive punishment
 - (i) Young Person presents with bruises, burns or fractures at a frequency which is inconsistent with normal activity
 - (ii) Young Person offers explanations for an injury which appear inconsistent with that injury
 - (iii) Young Person or another person advises that he/she has been subjected to or threatened with physical Harm
 - (iv) reluctance/refusal to participate in swimming or other activities where getting changed or wearing more revealing clothes may show signs of Harm
 - (v) excessive absenteeism
- (b) Emotional abuse and/or deprivation
 - (i) poor peer relationships/withdrawn
 - (ii) inclined to seek adult company and/or people who are older or younger
 - (iii) avoiding going home on a regular basis
 - (iv) learning difficulties, including poor concentration
 - (v) attention seeking behaviour such as stealing, lying, running away, repeatedly disrupting sessions
- (c) Physical neglect and/or inadequate supervision or care
 - (i) Young Person appears underweight for age and body type
 - (ii) inadequate clothing
 - (iii) asking other Young People for food or money
 - (iv) excessive absences from school and/or high frequency of illness/infection
 - (v) Young Person often arrives at school early and/or leaves late
- (d) Sexual abuse
 - (i) bruises, bite marks or other injuries to breasts, buttocks, arms, lower abdomen or thighs
 - (ii) bruises, scratches or other injuries not consistent with accidental injury
 - (iii) difficulty walking or sitting
 - (iv) persistent headaches or recurrent abdominal pain
 - (v) unexplained pain in genital area
 - (vi) torn, stained or bloodied underwear
 - (vii) itching, soreness, discharge or unexplained bleeding
 - (viii) painful and recurrent urination
 - (ix) recurrent urinary tract infections
 - (x) signs of sexually transmitted diseases

- (xi) pregnancy in adolescents where the identity of the father is vague or secret.
- (e) Substance abuse: Some of the common indicators of drug use:
 - (i) In the home
 - A. loss of interest in family activities
 - B. disrespect for family rules
 - C. withdrawal from responsibilities
 - D. verbally or physically abusive
 - E. sudden increase or decrease in appetite
 - F. disappearance of valuable items or money
 - G. not coming home on time and not telling you where they are going
 - H. constant excuses for behaviour
 - I. spending a lot of time in their rooms
 - J. lies about activities
 - K. finding the following: cigarette rolling papers, pipes, roach clips, small glass vials, plastic bags, remnants of drugs (seeds, etc.).
 - (ii) At school
 - A. sudden drop in grades
 - B. truancy or always being late to school
 - C. loss of interest in learning
 - D. sleeping in class
 - E. poor work performance
 - F. not doing homework
 - G. defiant of authority
 - H. poor attitude toward sports or other extracurricular activities
 - I. reduced memory and attention span
 - J. not informing parents of meetings, open houses, etc.
 - (iii) Physical and emotional
 - A. changes friends
 - B. smell of alcohol or marijuana on breath or body
 - C. unexplainable mood swings and behaviour
 - D. negative, argumentative, paranoid or confused, destructive, anxious
 - E. over-reacts to criticism
 - F. acts rebellious
 - G. sharing few if any of their personal problems

- H. doesn't seem as happy as they used to be
 - I. overly tired or hyperactive and drastic weight loss or gain
 - J. unhappy and depressed, sloppiness in appearance
 - K. cheats, steals, always needs money, or has excessive amounts of money.
- (iv) Older teenagers and young adults: Look for a pattern of behaviour rather than a one-time instance since these symptoms can indicate other problems as well, including:
- A. difficulty learning and paying attention; poor grades
 - B. low self-esteem
 - C. aggressive behaviour
 - D. the homicidal triad and other violent outbursts
 - E. social withdrawal and poor social skills
 - F. clinginess, anxiety and bullying
 - G. psychosomatic symptoms (frequent headaches and stomach-aches)
 - H. property destruction and vandalism
 - I. reckless, risk-taking behaviour
 - J. inability to express feelings
 - K. drug/alcohol use

Source: <http://teenchallengeqld.org.au/subtle-signs-substance-abuse/>

SCHEDULE B

Legislation and other resources

- (a) Family Law Act 1975
- (b) Children, Young Persons and their Families Act 1997
- (c) The Registration to Work with Vulnerable People Act 2013
- (d) Child Protection Act 1999
- (e) Family Violence Act 2004
- (f) http://www.dhhs.tas.gov.au/children/child_protection_services/information_sheets_and_resources
- (g) http://www.dhhs.tas.gov.au/children/child_protection_services
- (h) <http://teenchallengeqld.org.au/subtle-signs-substance-abuse>
- (i) www.thelaw.tas.gov.au
- (j) www.childcomm.tas.gov.au

Useful Contact Numbers

- (a) Department of Health and Human Services -Child Protection Services. please ring 1300 737 639 at any time.
- (b) Contact number for Gateway Services: 1800 171 233 (From 9am-5pm Monday – Friday, this number will divert you to your regional Gateway Services office).
- (c) Mental Health Services: 1800 332 388

Acknowledgements:

- (a) Launceston Church Grammar School Child Protection Policy
- (b) Brisbane Boys' College Child Protection Policy 2012
- (c) The Southport School Child Protection Policy 2011