

Child Protection Policy and Procedure

The Children's Act 2014 was part of a series of comprehensive measures brought in to protect and improve the wellbeing of vulnerable tamariki.

The legislation includes:

- 1 new stand-alone Act, the Children's Act 2014
- amendments to the Children, Young Persons, and Their Families Act 1989

The heads of 6 government departments are now accountable for protecting and improving the lives of vulnerable tamariki.

The New Zealand Police, the Ministries of Health, Education, Justice, Social Development and Oranga Tamariki - Ministry for Children have new, legislated responsibilities.

Child protection policies have been adopted as standard by the agencies above along with the Ministry of Business, Innovation and Employment (Housing), District Health Boards and school Boards of Trustees.

Safety checking (screening and vetting) of every person in both central and local government children's workforce has now been introduced and people with serious convictions are prohibited from working closely with tamariki, unless they are granted an exemption.

These changes are about creating a better life for the most vulnerable tamariki in Aotearoa New Zealand.

Summary

Ensuring the wellbeing and safety of children, including prevention of child abuse or maltreatment, is a paramount goal of Coromandel Youth Mentors. This policy provides guidance to staff on how to identify and respond to concerns about the wellbeing of a child, including possible abuse or neglect.

The interests of the child will be the paramount consideration when any action is taken in response to suspected abuse or neglect.

Coro Youth Mentors commits to support the statutory agencies (Oranga Tamariki and the New Zealand Police (the Police)) to investigate abuse and will report suspected cases and concerns to these agencies as per the process in this policy.

Our Designated Person for Child Protection, Georgie Parry, will be responsible for the maintenance and annual review of this policy, in addition to carrying out the responsibilities outlined in this policy.

Staff will not assume responsibility beyond the level of their experience and training. Our organisation commits to ensure staff have access to the training they need.

It is the policy of the Coro Youth Mentors that all staff, mentors, and other representatives of the program must report any suspected child abuse and/or neglect of Coro Youth Mentors or students or program participants immediately.

It is mandatory that our organisation escalates this to the appropriate authorities. Predominantly this will be police and/or Oranga Tamariki . A report to Oranga Tamariki is known as a "Report of Concern" (ROC). Anyone is able to submit a Report of Concern. There are details at the end of this document of how this can be done.

The following policies and procedures and information are based on strong government and community agency guidelines to facilitate the desire to protect all as prescribed above.

Definitions

- **Child** – any child or young person aged under 17 years and who is not married or in a civil union.

- **Child protection** – activities carried out to ensure that children are safe in cases where there is suspected abuse or neglect or are at risk of abuse or neglect.

- **Designated person for child protection** – the manager/supervisor or designated person responsible for providing advice and support to staff where they have a concern about an individual child or who want advice about child protection policy.

- **Disclosure** – information given to a staff member by a child, parent or caregiver or a third party in relation to abuse or neglect.

- **Oranga Tamariki (previously known as CYFS child youth and family)**– the agency responsible for investigating and responding to suspected abuse and neglect and for providing care and protection to children found to be in need.

- **New Zealand Police** – the agency responsible for responding to situations where a child is in immediate danger and for working with Child, Youth and Family in child protection work and investigating cases of abuse or neglect where an offence may have occurred.

- **Physical abuse** – any acts that may result in physical harm of a child or young person. It can be, but is not limited to: bruising, cutting, hitting, beating, biting, burning, causing abrasions, strangulation, suffocation, drowning, poisoning and fabricated or induced illness.

- **Sexual abuse** – any acts that involve forcing or enticing a child to take part in sexual activities, whether or not they are aware of what is happening. Sexual abuse can be, but is not limited to:

- o **Contact abuse:** touching breasts, genital/anal fondling, masturbation, oral sex, penetrative or non-penetrative contact with the anus or genitals, encouraging the child to perform such acts on the perpetrator or another, involvement of the child in activities for the purposes of pornography or prostitution.

- o **Non-contact abuse:** exhibitionism, voyeurism, exposure to pornographic or sexual imagery, inappropriate photography or depictions of sexual or suggestive behaviours or comments.

• **Emotional abuse** – any act or omission that results in adverse or impaired psychological, social, intellectual and emotional functioning or development. This can include:

- o Patterns of isolation, degradation, constant criticism or negative comparison to others. Isolating, corrupting, exploiting or terrorising a child can also be emotional abuse.
- o Exposure to family/whānau or intimate partner violence.

• **Neglect** – neglect is the most common form of abuse and although the effects may not be as obvious as physical abuse, it is just as serious. Neglect can be:

- o **Physical** (not providing the necessities of life like a warm place, food and clothing).

- o **Emotional** (not providing comfort, attention and love).

- o **Neglectful supervision** (leaving children without someone safe looking after them).

- o **Medical neglect** (not taking care of health needs).

- o **Educational neglect** (allowing chronic truancy, failure to enrol in education or inattention to education needs).

Identifying Neglect and Abuse in Children/ Youth and Young Adults

The following information is an in-depth guideline into how a person working with or supporting young people might identify some signs of abuse and or neglect.

It cannot be overemphasised within our organisation that if any adults, whether staff or volunteers feel uncomfortable in certain observed behaviours with a young person or have concerns about a young person's physical appearance or immediate circumstances with our youth that the appropriate people/ authorities are notified as outlaid below and order of urgency is strictly adhered to.

Below is an overview of some of the things that we may be concerned with in regard to our youth in terms of their behaviour, physical appearance and relational interactions with others.

It is important to note that even though a young person maybe exhibiting concerning behaviour or altered demeanour – this may not necessarily be due to direct abuse or neglect.

For example - a child, youth or young adult maybe be exhibiting a negative emotional disposition due to loss of a loved one, a relationship breakup or the separation of parents or personal sickness or mental health.

Some signs of behaviour below can also be heightened for neurodiverse children/ youth/ young adults such as those on the Autistic Spectrum.

Regardless! We want you share any worries or concerns you may have with any of our young people with your programme co-ordinator as soon as possible.

There is no such thing as a stupid or over “overreacting” question!

Some key indicators of potential child abuse and neglect

Physical signs: the child has unexplained injuries including broken bones, sprains, fractures, cuts, burns and poisoning.

It seems likely the injuries were not accidental, such as unexplained head injuries.

The child/ youth and or parent/caregiver is evasive or vague when questioned on how it happened

Or the explanation given seems unlikely/ impractical or fictitious.

The parent/caregiver can't explain or recall when the injury happened.

Behavioural signs: the child/ youth shows signs of distrust in adults/parents/caregivers or is excessively friendly and trusting of adults who are strangers. They may show excessive concern and fear when they hear other children crying. They wear clothing that covers their body in hot weather (noting that this may simply be a cultural choice). They may be passive and withdrawn or may bully others. They may appear hyperactive, unable to settle or concentrate, or engage in inappropriate play or conversation.

Neglect: the child may show signs of malnourishment. They may steal and/or hoard food, wet the bed, have poor hygiene (clothes/ body) and/or unmet medical needs, wear inadequate or inappropriate clothing for the weather, use alcohol and drugs, have poor relationships with other children, be regularly absent from school, be aggressive, be alone for long periods without adult supervision, run away from home and/or school. Is very demanding of affection or attention. Has no understanding of basic hygiene

Emotional abuse: the child may have low self-esteem, high levels of anxiety, be aggressive or demanding, withdrawn or fearful, behave in ways appropriate to children much younger than their actual age; their speech and/or communication skills may be delayed.

They may be fearful of the caregiver or excessively try to please the caregiver. Bed-wetting or bed soiling that has no medical cause. Frequent psychosomatic complaints (e.g. headaches, nausea, abdominal pains). Dressed differently from other children in the family.

Has deprived physical living conditions compared with other children in the family.

Sexual abuse: the child/ youth may relate specific things that they have been made to do, such as sexual activity, viewing pornography or engaging in prostitution. They may display sexual knowledge and sexualised behaviour not appropriate to their age.

Other signs of related emotional distress can include stomach pains, difficulty sleeping or relating to adults and/or other children of their own age. Torn, stained or bloody underclothing. Bruises, lacerations, redness, swelling or bleeding in genital, vaginal or anal area blood in urine or faeces. Sexually transmitted disease. Unusual or excessive itching or pain in the genital or anal area.

Eating disorders. Overt flirting with older children/adults and inappropriate age promiscuity. Tries to make self as unattractive as possible

Medical Neglect: the child/ youth is clearly unwell and when asked – declares no medical attention has been offered by carers/family/ whanau. The child is known to need medication or prescribed medical attention but this is being neglected or withheld. Note: This could be financial restraints within family/whanau.

Holistic signs of neglect/ abuse: Can include many points as outlaid above as well to include

sudden severe symptoms of self-destructive behaviour – self-harming, suicide attempts, engaging in drug or alcohol abuse. May become extremely aggressive or extremely withdrawn.

Severe symptoms of depression, anxiety, withdrawal or aggression. Sudden disengagement inschool/sports – community groups/ hobbies or previously liked friends/ relatives – immediate family/whanau

Taking Action on Concerns and/or Disclosures Policy

The following is required when there is a concern as outlaid above. This also applies to child/ youth/ young adults telling you information about themselves or others that constitutes neglect or abuse.

The following process is to be followed if there is a care or concern for a young person.

Is the child or young person of concern at immediate risk of harm? If **YES, call **111** immediately.**



Contact Programme Co-ordinator as soon as is possible (by phone Preferably)

Your Program Coordinator is : **Georgie Parry** Contact: **02041005085**
Secondary CYM Person to contact is : _____ Contact: _____



If appropriate, contact Parent or Guardian as soon as possible (for example young person has been in an accident, has been assaulted or self-harmed)

Note: If not immediately urgent – your Program Coordinator will contact parents/ carers if needed



**If the young person has disclosed harm or abuse, undertake the following as best as possible
recording written notes as best as possible**



Recording Information after disclosures or conversations with youth on neglect/ abuse/ harm/self-harm and how to respond.



- **Do Not Put The Moment off**
- **Don't make decisions alone**
- **Take action immediately**
- **Believe the child**
- **Find a place of privacy**
- **Respond briefly, slowly and gently**
- **Do not assume there is only one child involved**
- **Keep calm, reassure, don't judge**
- **Do not ask leading questions or over question**
- **Re-engage the child in a activity if appropriate**
- **Don't promise confidentiality**
- **find support**
- **inform the child what will happen next**
- **be kind**

Recording Information after disclosures or conversations

The following is based on guidelines when contacting Oranga Tamariki or Police to identify a child, young person or adult of concern and also, for them to better understand your concern(s). The more detail you are able to provide the more effective your report becomes.

1. Date Day and time of recording – as well as date and time known incident and where the incident took place. (if known)

2. Write down as best possible (can be hand written or typed. Take care when printing or saving information being mindful of the young person confidentiality).

Name of child or young person:

If known, date of birth or approximate age If own, address or place of residence:

If known, contact phone numbers:

Name(s) of any other children in household/whanau/group/team Name(s) of parent/caregiver

Name(s) of any other adults in household/whanau/group/team

Name(s) of adult you are concerned about and their relationship or connection to the child School, Early Childhood Centre or group(s) attended

Record as best as possible:

- What are you concerned about? What have you seen or heard?
- Who was present when you noticed something? When did it happen?
- What did the child say? Use speech marks.
- What did the adult say or do that concerned you? Use speech marks. Is it a one-off incident or always occurring?
- If injury is present or disclosed, provide detail of where on the body. If you have one, use or sketch a body map and indicate left and right hand sides.

Using the child or adult's own words, record how the injury/ harm happened and any other details disclosed. (Use speech marks).

Provide details of any questions you have asked and the response given (Use speech marks).

What have you done to safeguard or protect the child?

Who else is aware of or shares your concern(s)?

Have you spoken to the child's family of your concern(s)? If not, detail why. For example, fear of child's or own safety.

Note: Unless urgent and clearly needed – we ask that you contact Program coordinator first hand leave them to contact parents/ carers/ family/ whanau.

Submitting a formal Report of Concern to Oranga Tamariki Child Services or Police

Over and above contacting CYM in regards your concern – anyone is able to make a formal **“Report of Concern”** to authorities. The recommend guidelines (external) are as follows.

If you believe a child or young person is in immediate danger, please call the Police on 111.

Contact Oranga Tamariki if you think a child or young person may be:

- suffering from ill-treatment, abuse or neglect
- experiencing abuse but you're not sure if you should be concerned, and want advice, or just to talk things through.

Call freephone **0508 326 459** (open 24/7) or email contact@ot.govt.nz

The information you provide is known as a report of concern. For guidance on making an effective report of concern, download Safeguarding Children's free resource [here](#).

Report Tip If you phone Oranga Tamariki:

- Keep a written record of what you report
- Ask the representative to repeat your report back to you to ensure accuracy
- Note the name of the representative you spoke with ANYONE who is worried about a child or young person can make a report of concern.

The quality of the information you share can make the difference between an individual of concern receiving the help they need or not.

When making a Report of Concern we recommend you take time to plan the information you intend to include.

Key questions to consider include:

Will the person receiving the report be able to easily understand your concerns?
Ask a trusted friend or colleague to read it before submitting it - are your concerns clear?

What is your plan regarding follow up with the agency you filed the report with ensure your concerns are being addressed?

Safeguarding Children has compiled a list of information useful for Oranga Tamariki or Police to identify a child, young person or adult of concern and also, for them to better understand your concern(s). The more detail you are able to provide the more effective your report becomes.

Oranga Tamariki Report Of Concern

Name of child or young person

If known, date of birth or approximate age If own, address or place of residence

If known, contact phone numbers

Name(s) of any other children in household/whanau/group/team Name(s) of parent/caregiver

Name(s) of any other adults in household/whanau/group/team/school

Name(s) of adult you are concerned about and their relationship or connection to the

Name of GP or Plunket nurse

What are you concerned about? What have you seen or heard?

Who was present when you noticed something? When did it happen?

What did the child say? Use speech marks.

What did the adult say or do that concerned you? Use speech marks. Is it a one-off incident or always occurring?

If injury is present or disclosed, provide detail of where on the body. If you have one, use a body map and indicate left and right hand sides.

Using the child or adult's own words, record how the injury happened and any other details disclosed. Use speech marks.

Provide details of any questions you have asked and the response given. Use speech marks.

What have you done to safeguard or protect the child?

Who else is aware of or shares your concern(s)?

Have you spoken to the child's family of your concern(s)? If not, detail why. For example, fear of child's or own safety. Do the family know you are making a Report of Concern? If yes, what was their response?

If you have any reason to believe that a child will be at increased risk of harm as a result of submitting the Report of Concern, please ensure you highlight this concern

Include your full name, job title or relationship to child or young person. Also, your contact number and name of organisation.

We encourage you not to remain anonymous and to include your details in the report.

This provides the agency you file the report with the option to contact you for more detail or clarification if necessary.

If you wish to remain anonymous, please indicate this in your report and clearly state the reason why. Ensure you have included as much detail as possible as the agency will be unable to contact you for more detail or clarification.

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