



Child Safety – Health Professionals Capability Requirements and Reporting Responsibilities

Human Resources Policy

Effective Date: April 2008

1 PURPOSE

To ensure that all health professionals are aware of their roles and responsibilities in recognising, reporting and responding to children and young people who have been harmed or who are at risk of harm.

2 APPLICATION

This policy applies to all health professionals. More specifically, it applies to those health professionals who as part of their normal duties are likely to engage with or deliver services to children and young people and/or adults who have parental/carer roles and responsibilities in relation to children and young people.

3 GUIDELINES

Guidelines may be developed to facilitate implementation of this policy. The guidelines must be consistent with this policy.

4 DELEGATION

The “delegate” is as listed in the Queensland Health Human Resource Delegations Manual as amended from time to time.

5 REFERENCES

- *Health Act 1937*
- *Child Protection Act 1999*
- *Public Health Act 2005*
- Recruitment and Selection policy
- Circular 44/05 – Child Safety – Mandatory Requirements for Health Professional’s Capability (Skills and Knowledge Maintenance) and Reporting

6 SUPERSEDES

- IRM 3.19 Child Safety – Health Professionals Capability Requirements and Reporting Responsibilities

7 POLICY

7.1 Background

Queensland Health is committed to the protection of children and young people from harm. In 2004, the Crime and Misconduct Commission (CMC) Inquiry into Abuse of Children in Foster Care made recommendations specific to Queensland Health.

The recommendations were in relation to:

- Registered nurses and medical staff developing and maintaining an appropriate level of individual competence in the area of child safety and the recognition and reporting of suspected or likely child abuse and neglect.
- Mandatory reporting requirements where reasonable suspicions of abuse or neglect are identified.

In accordance with the CMC recommendations, the *Public Health Act 2005* has been amended to require all Registered Nurses and Medical Officers to immediately report any reasonable suspicion of child abuse and neglect directly to the Department of Child Safety.

This policy requires all health professionals, who in the course of their normal duties formulate a reasonable suspicion that a child or young person has been abused or neglected in their home/community environment, to immediately report their suspicion to the Department of Child Safety. This reflects the requirements of Section 22 of the *Child Protection Act 1999* and also the duty of care principle

Section 22 of the *Child Protection Act 1999* provides protection from liability for any person, acting honestly, who notifies or gives information about suspicions of abuse or neglect to a child.

7.2 Mandatory Reporting Requirements

Health Service Districts are to ensure that all relevant health professionals are aware of the requirements to report all reasonable suspicions of abuse and neglect of a child to the Department of Child Safety.

Contact details for Local Child Safety Service Centres of the Department of Child Safety are available through the intranet site at <http://qhps.health.qld.gov.au/csu>

The reporting format (form SW 010) is contained in "Report of a Reasonable Suspicion of Child Abuse and Neglect" booklet available in all Health Service Districts. Advice or support for clinicians on reporting reasonable suspicion of child abuse and neglect can be obtained from Line Managers, District Child Protection Advisors or Child Protection Liaison Officers. Contact details for District Child Protection Advisors and Child Protection Liaison Officers is available through the intranet site at <http://qhps.health.qld.gov.au/csu/districtcpacplo.htm>

A flowchart of the reporting process is outlined in Attachment One.

7.3 Capability Requirements – Skills and Knowledge Maintenance

The reporting requirements are an important part of the role of health professionals. It is recognised that many Queensland Health employees may not be experienced in recognising indicators of actual or potential child abuse or neglect. All relevant health professionals are required to complete a self assessment of capability tool to assess their own capability to identify actual or potential child abuse or neglect.

The outcome of the self assessment of capability tool indicates to a health professional if they should undertake further education and training to fulfil the reporting responsibilities. The Self Assessment of Capability tool and the self directed education program can be accessed through the Queensland Health Maternity, Child Health and Safety Branch intranet site at <http://qhps.health.qld.gov.au/csu/edumodule.htm>.

7.4 Capability Requirements – Education and Training Programs

The education and training program involves two target groups.

7.4.1 New Health Professional Staff

All newly employed health professionals are provided with introductory information on child safety and the reporting of suspected child abuse and neglect.

This information is provided in the Child Safety Orientation DVD, as well as through local district based processes. It is mandatory for the following staff to view the Orientation DVD:

- Doctors and Registered Nurses;
- all health professionals who are involved in the provision of services to children and young people; and/or
- all health professionals who are involved in the provision of services to adults who have parental/carer roles and responsibilities in relation to children and young people.

This is managed through the inclusion of a broad overview of child protection as a mandatory component in all District clinical induction programs. The Queensland Health Maternity, Child Health and Safety Branch has made available a suite of appropriate documents and resource materials suitable for inclusion in local induction programs. Further details of the resource materials are available by contacting the Queensland Health Maternity, Child Health and Safety Branch.

7.4.2 Existing Health Professional Staff

All existing relevant health professionals who are likely to engage with, or provide care to children and young persons in the normal course of their duties within Queensland Health may be required (if indicated by their self assessment of capability) to complete a self-directed education package that outlines the expected levels of knowledge, practical skill and attitudinal behaviours that need to be achieved.

The self-directed education program has been designed by Queensland Health to provide employees with the appropriate skills and knowledge to fulfil their responsibilities.

The self-directed program provides employees with:

- An understanding of their legal responsibilities.
- The skills and knowledge to recognise abuse and neglect indicators.
- An understanding of the reporting process if the staff member considers that a reasonable suspicion exists.

The “Child Abuse and Neglect” education module and Participants Guide are available through the Queensland Health Maternity Child Health and Safety Branch intranet site. The content of this educational resource is also made available to interested tertiary education facilities for inclusion in the relevant undergraduate/pre-registration programs.

7.5 Capability Requirements – Role Descriptions

The following statement on child safety responsibilities and mandatory requirements was approved for inclusion in the Primary Duties sections of role descriptions for any health professional role where part of normal duties may involve the delivery of a service to children and young people:

All relevant health professionals (including registered nurses and medical officers) who in the course of their duties formulate a reasonable suspicion that a child or young person has been abused or neglected in their home/community environment, have a legislative and a duty of care obligation to immediately report such concerns to the Department of Child Safety.

All relevant health professionals are also responsible for the maintenance of their level of capability in the provision of health care and their reporting obligations in this regard.

7.6 Ongoing Capability Assessment

Relevant health professionals are to complete the capability self assessment process at least yearly. Managers are encouraged to consider the assessment process as a component of the health professional’s performance appraisal and development plan.

Each health professional is:

- Personally accountable for their self assessment against the capability statements as outlined in the “Child Abuse and Neglect” education module and Participants Guide.
- Responsible for maintaining their level of capability in relation to these obligations. This is to occur by revisiting the level one training resource where they identify any need for refreshing their skill levels.
- On completion of their self assessment staff are required to complete Lattice form (HRO39) ‘Child Abuse and Neglect Self Assessment and Capability’ with their line manager. The completed form is forwarded to District Human Resource services, to enable the data to be placed on the Lattice database. A

report from this database is provided to maternity Child Health and Safety Branch annually.

If additional training needs are identified, either through the individual's performance appraisal and development plan or the self assessment process, details for ongoing training and education sessions should be accessed through the Queensland Health Child Safety Unit.

8 APPLYING THE POLICY

8.1 Reports of Reasonable Suspicion of Child Abuse and Neglect

When a report of reasonable suspicion of child abuse and neglect form is forwarded to the Department of Child Safety, a copy of the report is to be forwarded to the nominated Health Service District Child Protection Advisor or Child Protection Liaison Officer.

9 HISTORY

This policy dated April 2008 was developed as a result of HR Policy Framework consolidation.

How to report a reasonable suspicion of Child Abuse and Neglect

Health Professional Suspects Child Abuse and Neglect

Health Professionals are encouraged to consult with the District Child Protection Expert / Liaison Officer and other health professionals to assist in forming a reasonable suspicion of Child Abuse and Neglect. Through a process of consultation decide if the matter reaches the threshold of being reasonable.

(Please note: if you have a suspicion that an unborn child may be at risk of harm after birth you **MUST** consult with a Child Protection Expert before reporting)

YES

If you have formed a reasonable suspicion of Child Abuse and Neglect you **MUST** immediately report to the Department of Child Safety (DChS)

When reporting you **MUST** immediately complete the QH form 'Report of a Reasonable Suspicion of Child Abuse and Neglect' (SW 010 v1.00 July 05)

You **MUST** telephone your local DChS Service Centre* (details available on the QH Child Safety Unit QHEPS site)

The original form **MUST** be filed in the correspondence section of the child's record

The original form **MUST** be faxed to your local DChS Service Centre*

The self carbonated copy **MUST** be forwarded to the nominated Child Protection Expert (CPE) / Liaison Officer in your District

NO

Document your decision making process in the child's record

Disagreement about the need to report should not prevent the staff member reporting their reasonable suspicion to DChS

It is your responsibility to document all actions and conversations in relation to this report in the child's record

* Please note if after hours you must contact the DChS Crisis Care service.