



CHILD SAFE STANDARDS



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A COMPULSORY VICTORIAN GOVERNMENT FRAMEWORK THAT SUPPORTS ORGANISATIONS TO PROMOTE SAFETY OF CHILDREN

CODE OF CONDUCT – GUIDELINES SPELLING OUT THE TYPES OF BEHAVIOURS THAT ARE APPROPRIATE OR INAPPROPRIATE AROUND CHILDREN.

REPORTABLE CONDUCT IS ANY BEHAVIOUR BREACHING THESE GUIDELINES.

20% OF STUDENTS ARE UNDER THE AGE OF 18, THEREFORE CONSIDERED CHILDREN.

THE CHILD SAFE STANDARDS COVERS STUDENTS WHO ARE NOT ONLY ENROLLED IN COURSES AT SOUTH WEST TAFE, BUT THOSE WHO MAY BE VISITING CAMPUS FOR ANY REASON.

VULNERABLE COHORTS
CHILDREN WITH DISABILITIES,
CULTURALLY AND LINGUISTICALLY DIVERSE CHILDREN,
LGBTIQA+ YOUTH,
KOORI CHILDREN.

DEFINITIONS

ABUSE

PHYSICAL ABUSE: any non-accidental form of injury or serious physical harm inflicted on a child by any person

SEXUAL ABUSE: any sexual encounter that involves a child outside the age of consent
(12-15 years are able to consent if the people involved give consent and have less than a 2 year age gap)
(16-17 years are able to consent as long as the person does not hold a position of power)

PSYCHOLOGICAL OR EMOTIONAL ABUSE: occurs when a child is repeatedly rejected, isolated, frightened by threats or is experiencing family violence.

NEGLECT: Failure on the part of the caregiver to provide sufficient attention, responsiveness and protection that is appropriate to the basic needs of a child.





INDICATORS OF ABUSE

Physical
&
Behavioural

PHYSICAL INDICATORS

INCONSISTENT WITH EXPLANATION OFFERED

- Bruises, welts, cuts/grazes or burns
- Internal injuries or bone fractures
- Unattended health problems and lack of medical routine

Children presenting as

- Dirty, unwashed
- Inappropriately dressed for the weather conditions
- Constantly hungry, tired or listless





BEHAVIOURAL INDICATORS

Non verbal disclosures of abuse
Drawing or writing which depicts violence
and abuse

Unusual changes in behaviour
Withdrawal, hyperactivity, aggression

Substance misuse

Suicidal behaviours and/or ideations

Self Harming



BEHAVIOURAL INDICATORS

Inconsistent or unlikely explanations for injuries or absences

Reluctance or wariness surrounding home or carer

Unusual fear of physical contact with adults

Persistent and age-inappropriate sexual activity or discussion

Poor self-care and personal hygiene

Unusually close connection with an older person

OTHER ADULTS ***(OUTSIDE OF THE FAMILY)***

- Touching a child inappropriately
- Bringing up sexual material or personal disclosures into conversations with a child
- Inappropriate contact with the child
- Obvious or inappropriate preferential treatment of the child
- Giving inappropriate or expensive gifts to a child
- Inappropriate social boundaries
- Befriending the parents/carers of the child and making visits to their home undermining the child's reputation



COMMON INDICATORS OF ADULTS ABUSING CHILDREN

- Attempts by one parent to alienate their child from the other parent
- Overprotective or volatile relationships
 - Reluctance by the child to be alone with family members
 - A child and a sibling behaving like boyfriend and girlfriend or in a parental style role



MANDATORY REPORTING

Some professions are legally required to report child abuse. Including, registered teachers, principals, police, nurses, and social workers.

As a SWTAFE staff members you **must** act as soon as you witness an incident, receive disclosure or form a **reasonable** belief that a child has, or is at risk of being abused

WHEN TO REPORT

When you form a **reasonable** belief or suspicion

- When you receive a disclosure
- When you witness abuse towards a young person
- If you **reasonably** believe a staff member has breached the code of conduct towards a child or you feel a child is unsafe within the organisation
- If you have **reasonable** belief a staff member is acting inappropriately towards a young person, within or outside of the organisation

IF IN DOUBT TALK IT OUT



HOW TO REPORT

Four critical actions plan



1.

RESPOND TO THE EMERGENCY

If a child is at immediate risk of harm you **must** ensure their safety by:

separating alleged victims and others involved
administering first aid

calling **000 for urgent medical and/or police assistance**
to respond to immediate health or safety concerns
identifying a contact person in your organisation for
future liaison with Police.

The Manager of Student Services- Bryan Amarant

PH: 0403 390 480

*Where necessary you may also need to maintain the integrity of
the potential crime scene and preserve evidence*

If there is no risk of immediate harm go to Action 2.



2. REPORTING TO AUTHORITIES

Within the organisation

You must report all instances of suspected child abuse to Victoria Police.

You must also report internally to:

The Manager of Student Services -Bryan Amarant

Within the family or community

You must report to DFFH Child Protection if a child is considered to be:

In need of protection from child abuse

At risk of being harmed (or has been harmed) and the harm has had, or is likely to have, a serious impact on the child's safety, stability or development.

VICTORIA POLICE

You must also report all instances of suspected sexual abuse (including grooming) to Victoria Police.

You must also report internally to: The Manager of Student Services -Bryan Amarant

If you believe that a child is not subject to abuse, but you still hold **significant concerns** for their wellbeing you must still act.

This may include making a referral or seeking advice from Child FIRST (in circumstances where the family are open to receiving support), or to DFFH Child Protection or Victoria Police.

3. CONTACTING PARENTS/CARERS

The relevant unit/staff member must consult with DFFH Child Protection or Victoria Police to determine what information can be shared with parents/carers.

They may advise:

Not to contact the parents/ carer (e.g. in circumstances where the parents are alleged to have engaged in the abuse, or the child is a mature minor and does not wish for their parent/carer to be contacted)

To contact the parents/carers and provide agreed information (this must be done as soon as possible, preferably on the same day of the incident, disclosure or suspicion)

4. PROVIDING ONGOING SUPPORT

SWTAFE's Well-Being team will provide support for children impacted by abuse.

This will include a Student Support Plan developed in consultation with our team and professional/Counselling staff.

Strategies may include development of a safety plan, direct support and referral to other wellbeing professionals.

QUESTIONS?

