

**IN THE MATTER OF THE ROYAL COMMISSION
INTO FAMILY VIOLENCE**

ATTACHMENT GC-16 TO STATEMENT OF GILLIAN ANNE CALLISTER

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This is the attachment marked 'GC-16' produced and shown to **GILLIAN ANNE CALLISTER** at the time of signing her Statement on 4 August 2015.

Before me:



An Australian legal practitioner
within the meaning of the
Legal Profession Uniform Law (Victoria)

Attachment GC-16





INTRODUCTION

The Department of Education and Training (DET) is committed to increasing the capacity of all school staff to respond effectively to children and young people whose safety and wellbeing may be at risk, or who are in need of protection.

This *Protecting Children - Mandatory Reporting and other Obligations* module provides school staff with information about their legal obligations and the processes for reporting.

Guidance in this module refers generally to all children and young people, although some legal obligations apply to children in specific age groups.

To achieve the best results from this training, staff members are strongly encouraged to participate in discussions around the material in this module, and about the importance of their role in protecting children.

IMPORTANT UPDATE

As part of the Victorian Government's commitment to implementing the recommendations of the *Betrayal of Trust* report on institutional responses to child abuse, new criminal offences have been introduced to protect children, which significantly impact on the reporting duties of all staff.

This module has been updated as at July 2015 to provide important information about these changes in the law.

Staff members who have undertaken this training prior to this date should update their child protection professional knowledge by completing this revised module.

[1]

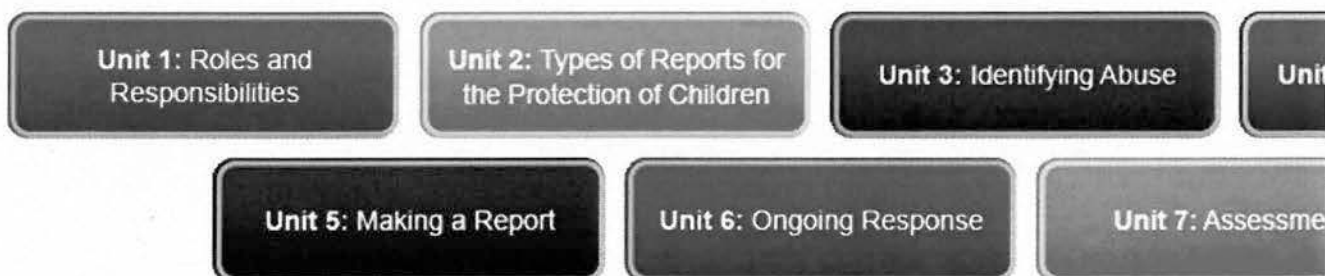
ABOUT THIS MODULE

This module has been developed to provide you with an understanding of the roles and responsibilities for protecting the safety and wellbeing of children.

Specifically, it will discuss how to identify types of concerns for the health, safety and wellbeing of a child that should be reported, and how to report those concerns, as the circumstances may require, to:

- the Department of Health and Human Services (DHHS) Child Protection
- Victoria Police Sexual Offences and Child Abuse Investigation Teams (SOCIT), or
- Child FIRST.

This module has been divided into seven Units as follows:



The module will take about an hour to complete, and ideally should be completed in one continuous sitting. If for any reason you are not able to complete the module in one sitting, you can log in at another time to complete it.

===== NOTES =====

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Tip

TIP:

The best results from this training will be achieved if staff participate in a structured discussion around the content once they have completed the module.

[*]

Note

NOTE:

Mandatory reporters and chaplains in government schools must undertake this professional learning module every 12 months. However, all school staff should undertake this module and are strongly encouraged to do so.

[2]

UNIT 1: ROLES AND RESPONSIBILITIES

Protecting children is everyone's responsibility; parents, communities, governments and businesses all have a role to play.

Most children are protected and cared for within their own families. However, there are times when parents, carers or guardians may have difficulty providing care for, or are unwilling or unable to protect their children from harm. In these circumstances, it becomes the responsibility of the wider community to ensure the safety and wellbeing of the child.

ROLE OF SCHOOL STAFF

As a professional who works with children, you play a vital role in protecting children from harm. You are well placed to observe signs or behaviours that may indicate risks of child abuse, neglect or exploitation.

Although some school staff are mandatory reporters and must report risks of physical or sexual abuse of children, all staff should make a report about any type of child abuse to the relevant authorities as part of their legal duty of care obligations ([link](#)).

In fulfilling your duty of care, you must take reasonable steps to protect your students from risks of reasonably foreseeable harm. This requires you to take positive action.

There are also obligations under the new criminal offences of 'Failure to Protect' and 'Failure to Disclose', which are outlined in this module.



===== NOTEs =====

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Duty of care obligations

Duty of care obligations:

Exercising your duty of care means:

- acting on concerns quickly and in the child's best interests
- protecting the safety, health and wellbeing of the children in your care
- seeking appropriate advice or consulting when unsure
- reporting concerns to the relevant authorities
- supporting a child at an interview*
- providing ongoing support to a child and their family
- attending DHHS Child Protection Case Planning and Student Support Group meetings.

You may breach your duty of care towards a student if you fail to act in the way a reasonable / diligent professional would in the same situation.

* Government school staff should also refer to specific advice on supporting a child at interview as outlined in the DET School Policy and Advisory Guide (available in Resource Library).

[3]



FAILURE TO PROTECT

IMPORTANT UPDATE

Under the new criminal offence of 'Failure to Protect', people in positions of authority such as principals must take action to protect children where they know that a person associated with their organisation poses a substantial risk of sexually abusing children under the age of 16.

As soon as a person in authority becomes aware of a risk of child sexual abuse posed by someone associated with their organisation (e.g. an employee, contractor or volunteer) they will be under duty of care obligations to take steps to remove or reduce that risk. An individual who falls short of the standard of care that a reasonable person would exercise in the circumstances will be found guilty of the offence.

For example, a person in authority who knows someone associated with their organisation poses a risk to children and moves them from one location in an organisation to another where they still have contact with children would be committing an offence.

More information about the 'Failure to Protect' offence is available on the [Department of Justice and Regulation webpage](#).

===== NOTES =====

[*]

Failure to Protect

Failure to Protect:

The *Crimes Act 1958* has been amended to include a new offence, 'Failure to Protect', which came into effect on 1 July 2015.

[*]

Persons in positions of authority

Persons in positions of authority:

This offence applies to persons in positions of authority in organisations that exercise care, supervision or authority over children. However, all staff should familiarise themselves with these new reporting obligations.

In line with their duty of care, all staff should report any concerns they may have to the principal or member of the leadership team, to enable those persons in authority to take any necessary steps to discharge their duty of care obligations under this offence.

[4]



ROLES OF RELEVANT AUTHORITIES

DHHS CHILD PROTECTION

Under the *Children Youth and Families Act (CYFA) 2005* the Department of Health and Human Services (DHHS) has a responsibility to provide child protection services for all children and young people under the age of 17 years, or where a protection order is in place, for children under the age of 18.

The main functions of DHHS Child Protection are to:

- receive reports from people who believe that a child is in need of protection or have significant concerns about the wellbeing of a child
- provide consultation and advice to people making reports
- investigate matters where it is believed that a child is at risk of significant harm
- refer children and families to services that assist in providing for the ongoing safety and wellbeing of children.

DHHS Child Protection will also intervene and bring cases before the Children's Court if a child's safety cannot be managed without intervention. DHHS Child Protection has a responsibility to provide adequate supervision, care and protection for children in accordance with orders granted by the Children's Court.

[5]



Child FIRST

Child and Family Information, Referral and Support Teams (Child FIRST) were introduced to give families an opportunity to obtain family services earlier at their own request or following a referral from others, including school staff.

Child FIRST ensures that vulnerable children, young people and their families are linked effectively to relevant services.

Child FIRST is staffed by family services practitioners who are experienced in assessing the needs of vulnerable children and their families. Child FIRST teams work closely with community-based DHHS Child Protection workers.

The role of Child FIRST includes:

- providing a point of entry to a local network of family services
- receiving reports about vulnerable children where there are significant concerns about their wellbeing

- undertaking an initial identification and assessment of the risks to the child and the child's needs in consultation with DHHS Child Protection and other services
- identifying appropriate service responses for families.



===== NOTEs =====

[*]

Vulnerable

Vulnerable:

A child is considered vulnerable if any of the following factors affect the child's safety, stability or development, including:

- significant parenting problems
- serious family conflict, including family breakdown and / or family violence
- families under pressure due to a family member's physical or mental illness, substance abuse, disability or bereavement
- young, isolated and / or unsupported families
- significant social or economic disadvantage that may adversely impact on a child's care or development.

[*]

Answer

Answer:

You should make a referral to Child FIRST if:

- there is a significant concern for a child's wellbeing
- your concerns have a low-to-moderate impact on the child
- the child's immediate safety is not compromised
- the school has discussed a referral to Child FIRST and the family is supportive of the referral.

[6]



VICTORIA POLICE - SOCIT

Both DHHS and Victoria Police have statutory responsibilities under the *CYFA* in relation to the protection of children. DHHS Child Protection is the lead agency responsible for the care and protection of children, while Victoria Police is responsible for criminal investigations into alleged child abuse.

Victoria Police Sexual Offences and Child Abuse Investigation Teams (SOCIT) have been established to ensure that appropriately trained and qualified police officers are available to respond to and investigate allegations of child abuse and sexual assault.

Protocols between DHHS Child Protection and Victoria Police require that all reports received by DHHS Child Protection relating to physical abuse, sexual abuse or serious neglect must be reported to Victoria Police SOCIT, as these reports may also constitute reports of criminal offences.

All allegations of sexual assault or child abuse should be reported to DHHS Child Protection or Victoria Police SOCIT for investigation. Under no circumstances should school staff investigate an allegation themselves. School staff should only enquire sufficiently to form a reasonable belief that a child may be in need of protection.

[7]



UNIT 2: DIFFERENT TYPES OF REPORTS FOR THE PROTECTION OF CHILDREN

This Unit explains the various child protection reports that must / can be made, to whom these reports should be made, and who should make them.

In summary, this Unit will cover the following reports:



[8]



'FAILURE TO DISCLOSE' OFFENCE

REPORTING SEXUAL OFFENCES AGAINST CHILDREN TO VICTORIA POLICE

The Victorian *Crimes Act 1958* has been amended to include the criminal offence of '*failing to disclose a sexual offence committed against a child under the age of 16 years*'.

The new offence imposes a legal obligation upon **all adults** to report to Victoria Police where they form a reasonable belief that a sexual offence has been committed by an adult against a child under the age of 16. Failure to disclose the information to police is a criminal offence, with some limited exceptions.

A person does not have a reasonable excuse for failing to disclose a sexual offence committed against a child if they are only concerned for the interests of the perpetrator or any organisation. 'Perceived interests' includes reputation, legal liability or financial status. For example, a principal's concern for the reputation of a school or a teacher's worry about missing out on a promotion is not regarded as a reasonable excuse.

This new reporting obligation is in addition to mandatory reporting obligations and other child reporting provisions in the *CYFA*.

===== NOTEs =====

[*]

Some limited exceptions

Some limited exceptions:

Reasonable excuse for not reporting:

A person will not be guilty of the offence if he or she has a reasonable excuse for not disclosing the information. A reasonable excuse includes:

- where a person does not disclose the information because he or she has a reasonable fear for their own safety or the safety of another person (such as a child or another family member)
- where a person believes on reasonable grounds that the information has already been disclosed to police (e.g. a mandatory report has already been made to DHHS Child Protection) and they have no further information to add.

However, Victorian government school staff should note that it is a Department policy requirement that the concerns be reported to both Victoria Police and DHHS Child Protection.

[*]

Where the victim is 16 years or over and requests confidentiality

Where the victim is 16 years or over and requests confidentiality:

The new offence respects the position of a victim who does not want the offending disclosed and who is sufficiently mature to make that judgment. The obligation to report therefore does not apply where the information comes from a person aged 16 years or over and this person requests that the offence not be reported.

A person will still be required to disclose information to police if:

- the victim requesting confidentiality is a child under 16 years of age
- the victim who requested confidentiality has an intellectual disability and does not have the capacity to make an informed decision about a disclosure, and the person who received the information is reasonably aware of these facts
- where the information is a confidential communication disclosed to a counsellor or registered medical practitioner.

[*]

Confidential communications disclosed to counsellor / registered medical practitioner

Confidential communications disclosed to counsellor / registered medical practitioner:

A counsellor or registered medical practitioner who is providing treatment and assistance to a child victim for the effects of a sexual offence is not required to report confidential communications to police that are disclosed by the child to the counsellor / medical practitioner in the course of that confidential relationship.

In a school context, this exemption may apply to a psychologist or a social worker who engages in a counselling relationship with the victim of a sexual offence.

[9]



MANDATORY REPORTING OF A CHILD IN NEED OF PROTECTION

Certain classes of professionals are deemed to be 'mandatory reporters' under the *CYFA*.
Mandatory reporters include:

- all Victorian Institute of Teaching (VIT) registered teachers (including principals)
- staff who have been granted permission to teach by the VIT
- registered nurses.

A mandatory reporter must make a report to DHHS Child Protection as soon as practicable if they form a belief on reasonable grounds that:

- the child has suffered or is likely to suffer, significant harm as a result of **physical injury and / or sexual abuse** and the child's parents have not protected, or are unlikely to protect, the child from harm of that type, **AND**
- the reasonable belief is formed in the course of practising their profession or carrying out the duties of their office, position or employment.

Mandatory reporters must make a report as soon as practicable after forming the belief. It is a criminal offence to fail to report in these circumstances.

===== NOTES =====

[*]

Important

IMPORTANT:

All staff, regardless of whether they are mandatory reporters, have a duty of care to take active and reasonable steps to protect children and young people in their care from risks of reasonably foreseeable harm. Such active steps should include reporting their concerns to the relevant authorities and to the school leadership team.

School staff should also take note of guidelines and processes provided for other forms of reporting that are not mandatory, which are outlined in more detail in this module.

[10]

OTHER REPORTING OF A CHILD IN NEED OF PROTECTION (NON-MANDATED)

In addition to reports that must be made by mandatory reporters, any person can make a report to DHHS Child Protection that a child is in need of protection under the *CYFA*.

PHYSICAL INJURY AND SEXUAL ABUSE

A person who is not a mandatory reporter should make a report to DHHS Child Protection that a child is in need of protection from significant harm as a result of physical injury or sexual abuse and the child's parents have not protected, or are unlikely to protect the child from harm of that type.

OTHER GROUNDS ON WHICH A CHILD IS IN NEED OF PROTECTION

Although it is not mandatory to do so, any person should make a report to DHHS Child Protection on the basis of their reasonable belief that a child is in need of protection on the following, other grounds:



===== NOTEs =====

[*]

Not a mandatory reporter

Not a mandatory reporter:

Staff who are not mandatory reporters under the *CYFA* include psychologists, social workers, speech pathologists, education support officers (ESO), non-teaching staff and administrative staff.

Staff members other than mandatory reporters are still subject to duty of care obligations towards students. If you are a not a mandatory reporter and have concerns that a child may be in need of protection, you should notify a member of the school leadership team immediately to discuss your concerns.

Where school staff form a reasonable belief that a child is in need of protection, they should ensure that a report is made by the school to DHHS Child Protection.

[*]

Abandonment

Abandonment:

The child has been abandoned by his or her parents and after reasonable inquiries, the parents cannot be found, and no other suitable person can be found who is willing and able to care for the child.

[*]

Death or incapacity

Death or incapacity:

The child's parents are dead or incapacitated and there is no other suitable person willing and able to care for the child.

[*]

Emotional or psychological harm

Emotional or psychological harm:

The child has suffered, or is likely to suffer, emotional or psychological harm that is likely to significantly damage the child's emotional or intellectual development, and the child's parents have not protected, or are unlikely to protect, the child from this harm.

[*]

Harm to physical development or health

Harm to physical development or health:

The child's physical development or health has been or is likely to be significantly harmed, and the parents have not provided, or are unable or unlikely to provide, basic care, effective medical, surgical or remedial care for the child.

[*]

Note

NOTE:

Although the *CFYA* defines a 'child' as a person under the age of 17 years, school staff still have a duty of care for all their students, including those who are aged 17 years and over.

If a student is 17 years of age or over, you should still report any concerns about their safety or wellbeing to Victoria Police.

[11]



CASE STUDY: 'FAILURE TO DISCLOSE' AND MANDATORY REPORTING

A 15-year-old student discloses to you, a teacher, that she is being sexually abused by her father, but requests that you do not report the offence to police.

What should you do?



===== NOTES =====

[*]

Answer 1

<input checked="" type="checkbox"/>	<p>Correct:</p> <p>In this case, you are required to report to both DHHS Child Protection AND Victoria Police. Under the 'Failure to Disclose' criminal offence, you must report the matter to Victoria Police.</p> <p>Additionally, as mandatory reporters, teachers must report a reasonable belief to DHHS Child Protection that a child is in need of protection from physical or sexual abuse, where the parents are unable or unwilling to protect the child.</p>
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[*]

Answer 2

<input type="checkbox"/>	<p>Incorrect:</p> <p>In this case, you are required to report to both DHHS Child Protection and</p>
--------------------------	---

Victoria Police. Under the 'Failure to Disclose' criminal offence, you must report the matter to Victoria Police.

The 'Failure to Disclose' offence would only not apply if the student had turned 16 years of age, did not have an intellectual disability and requested that the information not be disclosed. However, even in these circumstances, government school staff would still be required to report this matter to Victoria Police under DET policy.

Additionally, as mandatory reporters, teachers must report a reasonable belief to DHHS Child Protection that a child is in need of protection from physical or sexual abuse, where the parents are unable or unwilling to protect the child.

[12]

CASE STUDY: SCHOOL STAFF WHO ARE NOT MANDATORY REPORTERS

A grade 5 female student at Cruise Primary School has an intellectual disability and is supported by an Education Support Officer (ESO).

During playtime the female student discloses to the ESO that her 12-year-old brother has been coming into her bedroom at night and getting into the bed with her and touching her private parts.

The student subsequently gets upset and tells the ESO that it isn't true and that she made it up, and that she doesn't want the ESO to tell anyone.


What should the ESO do?



===== NOTES =====

[*]

Answer 1

	<p>Correct:</p> <p>The ESO is not a mandatory reporter, and so is not subject to mandatory reporting</p>
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requirements. The 'Failure to Disclose' offence is not applicable in this case as the alleged perpetrator of the sexual abuse is not an adult.

However, as the ESO still has duty of care obligations he / she should make a report that the child is in need of protection. It is also important for the ESO to inform the school leadership team of any suspected child abuse and potential criminal behaviour as soon as possible so that the ESO can be supported in reporting the student's disclosure to DHHS Child Protection and Victoria Police.

[*]

Answer 2

Incorrect:

Children with disabilities are more vulnerable to abuse, and it is very unlikely that a child would make up an allegation of abuse.

(X)

The ESO has duty of care obligations. It is important to inform the school leadership team of any suspected child abuse as soon as possible so that the ESO can be supported to report the incident to DHHS Child Protection and Victoria Police.

[*]

Answer 3

Incorrect:

It is not appropriate for the ESO to contact the mother. The ESO should inform the school leadership team to receive support in making a report to DHHS Child Protection and Victoria Police.

(X)

Any contact with the mother will be initiated by the school leadership team and / or DHHS Child Protection or Victoria Police.

[13]



REPORTING A CHILD DISPLAYING SEXUALLY ABUSIVE BEHAVIOURS

The *CYFA* makes provision for reporting a child exhibiting sexually abusive behaviours who, as a result, may be in need of therapeutic treatment.

Any person who believes on reasonable grounds that a child who is over 10 but under 15 years of age may be in need of therapeutic treatment should report their belief and the reasonable grounds for it to DHHS Child Protection.

Staff must also report any sexual assault of a student to Victoria Police.

A child may exhibit sexually abusive behaviours by using their power, authority or status to engage another party in sexual activity that is:

- unwanted, or
- where, due to the nature of the situation, the other party is not capable of giving informed consent (this may include sexual behaviour with a family pet or other animal, or sexual behaviour involving another child who is younger or who has a cognitive impairment).

Physical force or threats may sometimes be involved but this is not a required feature. Sexual activity may include exposure, peeping, fondling, masturbation, oral sex, penetration of a vagina or anus using a penis, finger or object, or exposure to pornography. This list is not exhaustive.

[14]

REPORTING CONCERNS ABOUT THE WELLBEING OF A CHILD

Any person who has a significant concern for the wellbeing of a child (or unborn child) may report these concerns to DHHS Child Protection or refer the matter to Child FIRST.

A significant concern for the wellbeing of a child may arise, for instance, where any of the following factors may have a negative impact on a child's care or development:

- significant parenting problems
- family conflict or family breakdown
- pressure due to a family member's physical / mental illness, substance abuse, or disability
- vulnerability due to youth, isolation or lack of support
- significant social or economic disadvantage.

You can consider referring your concerns to Child FIRST where:

- your concerns have a low-to-moderate impact on the child
- the child's immediate safety is not compromised
- the family is supportive of a referral and open to assistance from community-based family services.

If there are immediate safety or welfare concerns for the child and / or the family is likely to be uncooperative in seeking assistance, then your concerns should be reported to DHHS Child Protection.

In cases where you are unsure about which agency or authority to make a report to, you can refer the matter to either DHHS Child Protection or Child FIRST for further advice.

[15]

UNIT 3: IDENTIFYING ABUSE

PHYSICAL ABUSE

Physical abuse or injury may consist of any non-accidental form of injury or serious physical harm inflicted on a child by any person. Physical injury and significant harm to a child may also result from the failure of a parent, carer or guardian to adequately ensure the safety of a child by exposing the child to extremely dangerous or life-threatening situations. Examples of physical abuse may include:

- beating, shaking or burning
- assault with implements
- fabricated illness syndrome
- female genital mutilation (FGM).

Mandatory reporters are legally required to make a report to DHHS Child Protection where they form a reasonable belief that:

- a child has suffered, or is likely to suffer, significant harm as a result of physical injury, and
- the child's parents have not protected, or are unlikely to protect, the child from that harm.

All staff members have a duty of care. All staff, regardless of whether or not they are mandatory reporters, should make a report to DHHS Child Protection if they form a reasonable belief that a child is in need of protection from physical abuse. A report should also be made to Victoria Police as the physical abuse may constitute a criminal offence. All school staff should also inform the school principal or a member of the leadership team of their concerns.

Move your cursor over the boxes (right) for examples of common physical and behavioural indicators of physical abuse.



===== NOTES =====

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Fabricated illness syndrome

Fabricated illness syndrome:

Previously known as Munchausen's syndrome by proxy, this syndrome is a label for a pattern of behaviour in which caregivers deliberately exaggerate, fabricate, and / or induce physical, psychological, behavioural, and / or mental health problems in others.

[*]

Female genital mutilation (FGM)

Female genital mutilation (FGM):

Female genital mutilation (FGM) comprises all procedures that involve partial or total removal of the female external genitalia and / or injury to the female organs for cultural or any non-therapeutic reasons.

It is important to remember that while FGM is not perceived by some communities as harming or abusing a child, this practice is illegal in Australia and can have very significant physical and psychological repercussions for a child.

[*]

Physical indicators

Physical indicators:

Indicators of physical abuse may include:

- bruises or welts on facial areas and other areas of the body, including back, bottom, legs, arms and inner thighs
- bruises or welts in unusual configurations, or those that look like the object used to make the injury, e.g. fingerprints, handprints, buckles, iron or teeth
- burns that show the shape of the object used to make them, e.g. iron, grill, cigarette
- burns from boiling water, oil or flames
- fractures of the skull, jaw, nose and limbs, especially those not consistent with the explanation offered, or the type of injury possible at the child's age of development
- cuts and grazes to the mouth, lips, gums, eye area, ears and external genitalia
- human bite marks
- bald patches where hair has been pulled out
- multiple injuries, old and new
- effects of poisoning
- internal injuries.

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Behavioural indicators

Behavioural indicators:

Behavioural indicators of physical abuse may include:

- disclosure of an injury inflicted by someone else (parent, carer or guardian), or an inconsistent or unlikely explanation or inability to remember the cause of injury
- unusual fear of physical contact with adults
- wearing clothes unsuitable for weather conditions to hide injuries
- wariness or fear of a parent, carer or guardian
- reluctance to go home
- no reaction or little emotion displayed when being hurt or threatened
- habitual absences from school without explanation
- overly compliant, shy, withdrawn, passive and uncommunicative
- unusually nervous, hyperactive, aggressive, disruptive and destructive to self and / or others
- regressive behaviour (e.g. bed-wetting)
- poor sleeping patterns, fear of the dark or nightmares
- drug or alcohol misuse, suicide or self-harm.

[16]

SEXUAL ABUSE

A child is sexually abused when another person uses their authority or power over the child to engage in sexual activity.

Sexual activity may include fondling genitals, masturbation, oral sex, vaginal or anal penetration by a finger, penis or any other object, voyeurism and exhibitionism. It can also include exploitation through pornography or prostitution.

Mandatory reporters are legally required to make a report to DHHS Child Protection where they form a reasonable belief that:

- a child has suffered or is likely to suffer, significant harm as a result of sexual abuse, and
- the child's parents have not protected, or are unlikely to protect, the child from that harm.

All staff members have a duty of care. All staff, regardless of whether or not they are mandatory reporters, should make a report to DHHS Child Protection if they form a reasonable belief that a child is in need of protection from sexual abuse.

Move your cursor over the boxes (right) for examples of common physical and behavioural indicators of sexual abuse.

IMPORTANT UPDATE

Under the 'Failure to Disclose' criminal offence, any adult must report to Victoria Police if they reasonably believe that a sexual offence has been committed by an adult against a child under the age of 16.

All school staff should also inform the school principal or a member of the leadership team of their concerns.



===== NOTES =====

[*]

Physical indicators

Physical indicators:

Physical indicators may include:

- injury to the genital or rectal area (e.g. bruising, bleeding, discharge, inflammation or infection)
- injury to areas of the body such as breasts, buttocks or upper thighs
- discomfort in urinating or defecating
- presence of foreign bodies in the vagina and / or rectum
- sexually-transmitted diseases
- frequent urinary tract infections
- pregnancy, especially in very young adolescents
- anxiety-related illnesses (e.g. anorexia or bulimia).

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Behavioural indicators

Behavioural indicators:

Behavioural indicators may include:

- disclosure of sexual abuse
- persistent and age-inappropriate sexual activity (e.g. excessive masturbation or rubbing genitals against adults)
- drawings or descriptions in stories that are sexually explicit and not age-appropriate
- fear of home, specific places or particular adults
- poor / deteriorating relationships with adults and peers
- poor self-care or personal hygiene
- complaining of headaches, stomach pains or nausea without physiological basis
- sleeping difficulties
- regressive behaviour (e.g. bed-wetting or speech loss)
- depression, self-harm, drug or alcohol abuse, prostitution or attempted suicide
- sudden decline in academic performance, poor memory and concentration
- promiscuity
- wearing layers of clothing to hide injuries and bruises.

[17]

GROOMING

'Grooming' is now a criminal offence under the *Crimes Act 1958*. This new offence targets predatory conduct undertaken to prepare a child for sexual activity at a later time.

Grooming occurs when an adult communicates (by words or conduct) with a child under 16 years of age, with the intention of facilitating the child's engagement in sexual conduct.

It is also an offence for an adult to communicate with a person who has responsibility for care, supervision or authority over a child with the intention of grooming the child in their care. Such persons can include parents, stepparents, legal guardians, carers, teachers, employers and sports coaches.

Grooming includes actions deliberately undertaken with the intention of befriending and establishing an emotional connection with a child, to lower their inhibitions and facilitate sexual conduct with the child. Communication technologies such as online gaming, instant messaging, email, voice over internet protocol, social media and mobile phones can also be used in the grooming process. In these cases, the grooming process may continue for months before the offender arranges a physical meeting.

Move your cursor over the box (right) for examples of common behavioural indicators of a child subjected to grooming.



IMPORTANT UPDATE

Under the new 'Failure to Disclose' criminal offence, ANY adult must report to Victoria Police if they reasonably believe that a sexual offence has been committed by an adult against a child under the age of 16.

In line with obligations under the 'Failure to Disclose' offence and duty of care, any staff member who suspects a child is being groomed by an adult should report their concerns to Victoria Police. All school staff should also inform the school principal or a member of the leadership team of their concerns.

===== NOTES =====

[*]

Behavioural indicators

Behavioural indicators:

Behavioural indicators of a child subjected to grooming may include:

- developing an unusually close connection with an older person
- displaying mood changes (hyperactive, secretive, hostile, aggressive, impatient, resentful, anxious, withdrawn, depressed)
- using street / different language; copies the way the new 'friend' may speak; talking about the new 'friend' who does not belong to his / her normal social circle
- possessing jewellery, clothing and expensive items given by the 'friend'
- possessing large amounts of money which he / she cannot account for
- using a new mobile phone (given by the 'friend') excessively to make calls or send text messages
- being excessively secretive about their use of communications technologies
- frequently staying out overnight, especially if the relationship is with an older person
- being dishonest about where they've been and whom they've been with
- using drugs; physical evidence includes spoons, silver foil, 'tabs', 'rocks', etc., hidden in bedroom
- assuming a new name; being in possession of a false ID, stolen passport or driver's licence provided by the 'friend' to avoid detection
- being picked up in a car by the 'friend' from home / school or 'down the street'.

[18]

EMOTIONAL ABUSE

Emotional abuse occurs when a child is repeatedly rejected, isolated or frightened by threats or by witnessing family violence. It also includes hostility, derogatory name-calling and put-downs, and persistent coldness from a person, to the extent that the behaviour of the child is disturbed or their emotional development is at serious risk of being impaired. Emotional abuse may occur with or without other forms of abuse.

The **cumulative harm** caused by repeated emotional abuse can have a profoundly damaging impact on a child's sense of self-worth, safety, stability and wellbeing. For example, if a child is told on a daily basis that he / she is stupid, ugly, unlovable, unwanted, and has ruined someone's life, the child may develop personality or behavioural disorders, and have difficulty in forming sustained and intimate relationships.

Move your cursor over the boxes (right) for examples of common physical and behavioural indicators of emotional abuse.

Emotional abuse should be reported to DHHS Child Protection on the grounds that:

- the child has suffered, or is likely to suffer, emotional or psychological harm that has, or is likely to, significantly damage the child's emotional or intellectual development, and

- the child's parents have not protected, or are unlikely to protect, the child from that harm.

All staff members have a duty of care to their students. Staff should make a report to DHHS Child

Protection if they form a reasonable belief that a child is in need of protection from emotional abuse.

All school staff should also inform the school principal or a member of the leadership team of their concerns.



===== NOTES =====

[*]

Physical Indicators

Physical indicators:

Physical indicators of emotional abuse may include:

- speech disorders such as language delay, stuttering or selective mutism (only speaking with certain people or in certain situations)
- delays in emotional, mental or physical development
- failure to thrive (without an organic cause).

[*]

Behavioural Indicators

Behavioural Indicators:

Behavioural indicators of emotional abuse may include:

- overly compliant, passive and undemanding behaviour
- extremely demanding, aggressive and attention-seeking behaviour
- anti-social and destructive behaviour
- low tolerance or frustration
- poor self-image and low self-esteem
- unexplained mood swings, depression, self-harm and suicidal thoughts
- behaviours that are not age-appropriate (e.g. overly adult, or overly infantile)
- fear of failure, overly high standards, and excessive neatness
- poor social and interpersonal skills
- attempts at running away

- violent drawings or writing
- lack of positive social contact with other children.

[19]

NEGLECT

Neglect includes a failure to provide the child with an adequate standard of nutrition, medical care, clothing, shelter or supervision to the extent that the health or physical development of the child is significantly impaired or placed at serious risk.

A child is neglected if he / she is left uncared for over long periods of time or is abandoned. The two types of neglect include:

- **serious neglect:** situations where a parent consistently fails to meet the child's basic needs for food, shelter, hygiene or adequate supervision to the extent that the consequences for the child are severe
- **medical neglect:** when a parent's refusal or failure to seek treatment or agree to a certain medical procedure, leads to an unacceptable

deprivation of the child's basic rights to life or health.

Neglect of a child may be reported to DHHS Child Protection on the grounds that:

- the child's physical development or health has been, or is likely to be, significantly harmed, and
- the child's parents have not provided or are unable or unlikely to provide or arrange for basic care, effective medical, surgical or remedial care for the child.

Move your cursor over the boxes (right) for examples of common physical and behavioural indicators of neglect.

All staff members have a duty of care to their students. Staff should make a report to DHHS Child Protection if they form a reasonable belief that a child is in need of protection from neglect.

All school staff should also inform the school principal or a member of the leadership team of their concerns.



===== NOTES =====

[*]

Types of neglect

Types of neglect:

Examples of serious or medical neglect may include situations where:

- the child's home environment is filthy or hazardous and poses a threat to the child's immediate safety or development including, for example, the presence of animal or human faeces or urine, decomposing food, syringes or other dangerous items
- the child is consistently not provided with adequate food or nourishment for healthy development
- the child has a serious medical condition for which the parent has consistently failed to obtain treatment or dispense prescribed medication
- the parent consistently leaves the child unattended or exposed to neglect, or in the care of strangers who may harm the child.

[*]

Physical indicators

Physical indicators:

Physical indicators may include:

- appearing consistently dirty and unwashed
- being consistently inappropriately dressed for weather conditions
- being at risk of injury or harm due to consistent lack of adequate supervision from parents
- being consistently hungry, tired and listless
- having unattended health problems and lack of routine medical care
- having inadequate shelter and unsafe or unsanitary conditions
- showing signs of failure to thrive (without an organic cause).

[*]

Behavioural indicators

Behavioural indicators:

Behavioural indicators may include:

- gorging when food is available or inability to eat when extremely hungry
- begging for or stealing food
- appearing withdrawn, listless, pale and weak
- aggressive behaviour, irritability
- delinquent acts (e.g. vandalism, drug and alcohol abuse)
- little positive interaction with parent, carer or guardian
- poor socialising habits
- excessive friendliness towards strangers
- indiscriminate acts of affection
- poor, irregular or non-attendance at school
- staying at school for long hours and refusing or being reluctant to go home
- self-destructive behaviour
- taking on an adult role of caring for parent.

[20]

FAMILY VIOLENCE

Family violence is behaviour by a person towards a family member that may include:

- physical violence or threats of violence
- verbal abuse, including threats
- emotional or psychological abuse
- sexual abuse
- financial and social abuse.

Acts of family violence may give rise to concerns that:

- a child is in need of protection
- criminal offences are being committed.

Move your cursor over the boxes (right) for examples of common physical and behavioural indicators of family violence.

All staff members have a duty of care. If there are indicators that children are being exposed to family violence, school staff should report these concerns to DHHS Child Protection and Victoria Police.

All school staff should also inform the school principal or a member of the leadership team of their concerns.



===== NOTEs =====

[*]

Physical Indicators

Physical Indicators:

Physical indicators of family violence may include:

- speech disorders
- delays in physical development
- failure to thrive (without an organic cause)
- bruises cuts or welts on facial areas, and other parts of the body including back, bottom, legs, arms and inner thighs
- any bruises or welts (old or new) in unusual configurations, or those that look like the object used to make the injury (such as fingerprints, handprints, buckles, iron or teeth)
- internal injuries.

[*]

Behavioural Indicators

Behavioural indicators:

Behavioural indicators of family violence may include:

- extremely demanding, attention-seeking behaviour
- overly compliant, shy, withdrawn, passive and uncommunicative behaviour
- anti-social, destructive behaviour
- aggressive or inappropriate behaviour with other children or adults
- low tolerance or frequent frustration
- wariness or distrust of adults
- demonstrated fear of parents, carers or guardians, and of going home
- depression
- anxiety
- involvement in criminal activity.

[21]



MANAGING A DISCLOSURE

If a child or young person makes a disclosure to you, it is important you respond in an appropriate and supportive manner. It is also important to inform the child that there are some things you cannot keep a secret or confidential.

When managing a disclosure, you should:

- stay calm and not display expressions of panic or shock
- state clearly that the abuse is not the child's fault, no matter what the circumstances are
- listen to the child
- be patient and allow the child to talk at their own pace
- use the child's language and vocabulary
- not pressure the child into telling you more than they want to
- reassure the child you believe them and that disclosing the matter was the right thing to do
- avoid going over the information time and time again; you are only gathering information to help you form a belief on reasonable grounds that you need to make a report to the relevant authority
- remember that you are not investigating the allegation. It is the role of the relevant authority to investigate the allegation once it is reported to them
- tell the child you are required to report to the relevant authority to help stop the abuse.

Follow the link to access a detailed [Guide to Managing a Disclosure of Child Abuse](#).

===== NOTES =====

[*]

Confidential

Confidential:

Do not make promises you cannot keep. Some disclosures cannot be kept secret or private.

If a student approaches you and wants to tell you a secret, tell him / her that there are some things that you cannot keep secret or confidential, especially if someone needs help.

For example: "If you are going to tell me that you are going to hurt yourself, someone is hurting you or you are going to be involved in hurting someone, I need to talk with someone who can help".

[22]



UNIT 4: DECIDING TO REPORT

This Unit will discuss the steps you must take when deciding whether to make a report to either DHHS Child Protection, Child FIRST or Victoria Police SOCIT (as the case may be).

Specifically, this Unit will look at:



[23]



FORMING A REASONABLE BELIEF

Most of the reporting provisions in the *CYFA* and *Crimes Act* prompt persons to report where they have formed a 'reasonable belief' or 'a belief on reasonable grounds':

- Under the 'Failure to Disclose' offence, any adult that forms a **reasonable belief** that a sexual offence has been committed by an adult against a child under 16 years must report to Victoria Police.
- A mandatory reporter must report to DHHS Child Protection where they form a **belief on reasonable grounds** that a child is in need of protection from sexual or physical abuse.
- Any person who **believes on reasonable grounds** that a child is in need of protection from any form of abuse should report to DHHS Child Protection.
- Any person who **believes on reasonable grounds** that a child over 10 but under 15 years may be in need of therapeutic treatment because they are exhibiting sexually abusive behaviours, should report this belief to DHHS Child Protection.

A belief is considered to be more than a suspicion. It results in a person being more inclined to accept, rather than reject, the particular idea they are contemplating. It is important to understand that proof is not required to support your claim.

It is not the responsibility of school staff to determine or investigate whether child abuse, neglect or a criminal offence has actually occurred.

[24]



REASONABLE GROUNDS

Examples of reasonable grounds for forming a belief may include:

- a child states they have been abused
- a child states they know someone who has been, or is being, abused
- someone who knows the child states that the child has been abused, is being abused, or is at risk of abuse
- you observe a child's behaviour, actions or injuries that may place them at risk of harm, or may lead you to suspect that abuse is occurring
- you are aware of persistent family violence, parental substance misuse, psychiatric illness or disability that is impacting on the child's safety, stability or development
- you observe signs or indicators of abuse, including non-accidental, unexplained injury, persistent neglect, poor care or lack of appropriate supervision
- you become aware of possible harm via your involvement in the community, external to your professional role.

School staff should make sufficient enquiries to form a belief. However, once a belief has been formed, it is not the role of school staff to conduct an investigation into child protection concerns or criminal offences. It is for DHHS Child Protection or Victoria Police to determine whether the report should be investigated.

If a child discloses abuse to you, you should only ask appropriate questions to obtain any further necessary information in order to form a belief on reasonable grounds (see Examples). Is it important not to use leading questions which may influence the child's answers. You should maintain written records including all observations, disclosures and other details that led you to suspect the abuse.

===== NOTES =====

[*]

Appropriate questions

Appropriate questions:

Tips for responding to a child who has disclosed abuse include the following:

- allow the child to have their say in their own words
- use a neutral tone with no urgency
- avoid repeated accusations
- be patient and non-judgmental throughout
- stay calm and listen
- do not ask leading questions, but instead, gently ask, "What happened next?" rather than "Why?"
- use verbal facilitators such as, "Okay, I see", restate the child's previous statement, and use non-suggestive words of encouragement, which are designed to keep the child talking in an open-ended way.

[*]

Maintain written records

Maintain written records:

School staff should keep clear and comprehensive notes on all observations, disclosures and other details that led them to suspect the abuse. These notes should include dates, times and places. Staff should record facts, actual words spoken and not make judgements or state opinions when recording the details. These records will be helpful in assisting you to make a report of the abuse to the relevant authorities.

School staff should also keep detailed written records of all actions taken in responding to their belief that abuse is occurring, including:

- reports to external agencies
- consultations with other school staff
- consultations with external agencies
- any discussions with the child's family (where relevant)
- supports provided to the student.

This information may be later sought if the matter is the subject of Court proceedings. Your notes may also later assist school staff if they are required to provide evidence to support their decisions.

[*]

Examples

EXAMPLES:

Some examples of appropriate questions may include:

- When did this happen?
- What did the person do?

- Have you told anyone else?
- Where did this happen?
- How do you feel when this happens?
- Has this happened more than once?
- What do you mean by that?
- Would you like to tell me anything else?

These questions should be asked in a gentle, patient, non-confrontational manner, with the aim of providing an opportunity for the child or young person to disclose information in a safe environment. It is important that the child or young person does not feel they are being interrogated or accused of any wrongdoing. If they become upset during the conversation, it may be appropriate to seek additional help or support to ensure the child or young person's wellbeing.

[25]



WHAT IF ANOTHER PERSON HAS ALREADY MADE A REPORT?

Once a school staff member forms a belief on reasonable grounds that they should make a report to protect a child, their obligation to report is separate from the reporting obligations or actions of other people.

This means that you should make a report to protect a child even if:

- DHHS Child Protection, Child FIRST, or Victoria Police were previously involved or are already involved with the child and / or their family
- you are aware that another party, such as a family member, has already raised concerns with the relevant authorities.

Regardless of whether the report is mandated by the *CYFA* or *Crimes Act*, all school staff owe a duty of care to their students. Making a report is consistent with this duty.

You should also bear in mind that other people may not have access to the specific information held by school staff. The information you provide through your report may assist the relevant authority to take further action to protect the child.

[26]



REPORTING FURTHER REASONABLE GROUNDS FOR BELIEF

School staff should make a new report after each occasion on which they become aware of any further reasonable grounds for the belief.

This means that although a report has already been made to the relevant authorities, if new information comes to light that constitutes new grounds for reporting a reasonable belief that warrants a report being made to protect a child, then a new report should be made.

EXAMPLE

A classroom teacher receives a disclosure from a student that he is being physically abused by his father, and forms a reasonable belief that the child is in need of protection. The teacher makes a mandatory report to DHHS Child Protection.

The next week the same teacher observes new bruising to the student's face. The teacher decides that this observation forms further reasonable grounds for their belief that the child is in need of protection. The teacher therefore must make a new report to DHHS Child Protection.

[27]



CASE STUDY: DIFFERING OPINIONS

Christine and George are teachers at a local primary school and both teach 6-year-old Kayla. Christine notices that Kayla has been wearing the same unwashed clothes all week and has bruises on her arms and legs. Some are yellow and fading, while others are dark and recent. Kayla often appears upset and distances herself from the other children.

George dismisses Christine's concerns and attributes Kayla's behaviour to a shy personality. George states that he believes the bruising is consistent for an active child of 6.

Christine is worried about Kayla's changing behaviour and doesn't believe the bruising is accidental. In fact, she suspects that the bruising may have been caused by physical violence that has probably occurred at home although she can't be completely sure about this.

Which of the following statements is correct?



===== NOTES =====

[*]

Answer 1

<input checked="" type="radio"/>	<p>Incorrect:</p> <p>Even though Christine has a different opinion to George, if she has formed a reasonable belief that Kayla is in need of protection from physical abuse, and that her parents are unwilling or unable to protect Kayla, Christine must make a mandatory report to DHHS Child Protection.</p> <p>Kayla's behaviour and physical indicators are sufficient for Christine to form a reasonable belief that Kayla is in need of protection. Christine is not required to investigate further.</p> <p>Christine is a mandatory reporter and therefore a failure to report in these circumstances may amount to a criminal offence.</p>
----------------------------------	---

[*]

Answer 2

<input checked="" type="radio"/>	<p>Correct</p> <p>Even though Christine has a different opinion to George about what may be happening with Kayla, if she has formed the reasonable belief that Kayla is in need of protection from physical abuse, and that her parents are unwilling or unable to protect Kayla, Christine must make a mandatory report to DHHS Child Protection.</p> <p>Christine is a mandatory reporter and therefore a failure to report in this circumstance may amount to a criminal offence.</p>
----------------------------------	--

[28]



CASE STUDY: DECIDING TO REPORT

You overhear 10-year-old Mary telling her friend, "Daddy said if I tell my secret to anyone about our special games, then he will go to jail and I will never see him again."

As Mary's teacher, you are concerned about Mary because she has changed recently from being a confident, cooperative girl to being moody, defiant and tearful.

On your own or with colleagues, answer the following questions:

1. Are there reasonable grounds to form a belief that Mary is in need of protection?
2. What kind of report would you make, and to whom?

Move your cursor over the boxes below to check your answers:



===== NOTES =====

[*]

Forming a belief

Forming a belief:

The disclosure from Mary to her friend would be sufficient information to form a belief on reasonable grounds that she is in need of protection from sexual abuse.

Your observations of Mary's behaviour provide further grounds to form a reasonable belief.

You are not required to have proof that Mary is being abused.

[*]

Reporting

Reporting:

Because teachers are **mandatory reporters**, if you have formed a belief on reasonable grounds that a child is in need of protection from sexual abuse you must make a report to DHHS Child Protection.

You should inform the school leadership about what you have heard and observed and that you will be making a mandatory report to DHHS Child Protection. The school leadership will be able to support you to complete the notification. Schools have policies and procedures in place to support staff in making a mandatory report.

Under the new 'Failure to Disclose' criminal offence any adult, whether a mandatory reporter or not, who forms a reasonable belief that a sexual offence has been committed by an adult against a child under 16, must report that information to Victoria Police.

By law, if you have already made a report to DHHS Child Protection, you are not required to make a second report to Victoria Police. However, Victorian government school staff should note that it is a DET policy requirement that you report your concerns to both DHHS Child Protection and Victoria Police.

[29]



OBTAINING ADVICE OR SUPPORT

If you have a concern but are unsure if you should make a report to DHHS Child Protection or Victoria Police or a referral to Child FIRST, you should discuss this with your school principal, the school leadership team, or welfare staff.

However, if you form and continue to hold a belief on reasonable grounds, even if other staff members do not agree with you, you should still make a report to the relevant authorities.

In the event that you are not sure whether to make a report, it is better to err on the side of caution and make a report.

You can also seek advice and support from any of the following:

- the local Victoria Police Sexual Offences and Child Abuse Investigation Team (SOCIT)
- the local Department of Human Services, Child Protection
- local DHHS Child FIRST provider.

===== NOTES =====

[*]

Note

NOTE:

Government schools may also contact the following for advice and assistance:

- the DET Student Critical Incident Advisory Unit (SCIAU) on 03 9637 2934 or 03 9637 2487
- the DET Legal Division on 03 9637 3146 .

[30]



UNIT 5: MAKING A REPORT

IMMEDIATE ACTIONS

Schools must take immediate action in relation to concerns about potential child abuse. Staff should take steps to ensure the immediate safety of the student involved and ensure an appropriate level of care and supervision is provided for the student.

In the case of an emergency, staff should contact Emergency Services on 000.

Depending on what kind of abuse is alleged, staff must report the abuse to DHHS Child Protection and / or Victoria Police.

For Victorian government schools, the allegations must also be reported to the:

- school leadership team
- DET Security Services Unit on (03) 9589 6266
- relevant DET Regional Office
- DET Student Critical Incident and Advisory Unit on (03) 9637 2934 or (03) 9637 2487.

[31]



SUPPORTING STAFF TO MAKE A REPORT

The school leadership team should support and empower staff to make a report to DHHS Child Protection, Victoria Police or a referral to Child FIRST by having clear policies and procedures about:

- from whom staff can seek advice if they have concerns when considering whether to make a report about a child in need of protection
- what arrangements are in place to relieve staff while you are making or deciding to make a report as soon as practicable
- what strategies are in place to support staff through the process of making a report
- maintaining written records about the disclosure, the internal consultation process and the report.

For government school staff, the following sections of the DET School Policy and Advisory Guide (SPAG) provide guidance on policies for responding to child abuse:

- [Child Protection – Reporting Obligations](#)
- [Responding to Student Sexual Assault](#).

It can be stressful for staff involved in responding to situations and supporting students affected by abuse. Victorian government school staff requiring wellbeing support can contact the DET Employee Assistance Program (EAP).

[32]

STEP-BY-STEP GUIDE TO MAKING A REPORT

Click on the boxes below for information about the process you should follow for making a report.



IMPORTANT UPDATE

Under the 'Failure to Disclose' offence, if you know or reasonably believe that a sexual offence has been committed by an adult against a child under 16 years of age you must make a report to Victoria Police SOCIT. By law, if you have already made a report to DHHS Child Protection, you are not required to make the same report to Victoria Police.

Note that for Victorian government school staff it is a DET policy requirement that you report concerns to both DHHS Child Protection and Victoria Police.

[33]

WHAT INFORMATION SHOULD BE PROVIDED IN A REPORT?

When making a report to Child FIRST, DHHS Child Protection or Victoria Police, you should aim to provide as much information as possible. This may include specific information about the child and other members of the child's family, or people living with the child whose behaviour has an impact on the child, as outlined in the table below.

Child	Family	Alleged Ab
<ul style="list-style-type: none"> • Name / gender / age • Any disabilities, mental or physical health issues • Current location and safety status (e.g. is the child safe now or in immediate danger?) • Social and economic background • Previous history or indicators of abuse • Cultural status • Language(s) spoken • Religion • Any other significant factors • Positive relationships with family member or carer 	<ul style="list-style-type: none"> • Composition (e.g. parenting or care arrangements) • Parent / carer information • Presence of extended family • Siblings - names / ages • Disability or illness in family • Language(s) spoken at home • Other people living with the child • History of school involvement with family • Other agencies involved • Likely reaction to DHHS Child Protection • Family awareness of report 	<ul style="list-style-type: none"> • Times / da • Nature of i • Any patter behaviour concerns l • to the alleg • History of • Previous ii • Previous a involveme

[34]



CONFIDENTIALITY OF REPORTER'S IDENTITY

Under the *CYFA*, the identity of a person who makes a report to DHHS Child Protection or Child FIRST should remain confidential.

The *Crimes Act* also provides that the identity of persons who report their reasonable belief that a sexual offence has been committed by an adult against a child under the age of 16 years to Victoria Police should remain confidential.

This will usually mean that if there are court proceedings in relation to the child, your identity as a reporter will not be disclosed, unless:

- the Court specifically permits your identity to be disclosed, or
- you consent in writing to the disclosure of your identity.

In practice, it is best to maintain this confidentiality by not disclosing to any other person (including a child's parents), that you have made a report. If the family knows the school that has made the report, it may have a negative effect on the school's relationship with the family.

[35]



LEGAL PROTECTION FOR REPORTERS

The *CYFA* provides protection against legal liability to persons who make a report to DHHS Child Protection or Child FIRST. In the same way, the *Crimes Act* provides protection against legal liability to persons who make a report to Victoria Police about sexual offences committed by an adult against a child under the age of 16.

In all cases, a report made in good faith to DHHS Child Protection, Child FIRST or Victoria Police:

- does not for any purpose constitute unprofessional conduct or a breach of professional ethics on the part of the person making the report; and
- does not make the person making the report subject to any liability.

PRIVACY LAWS

Making any of the reports detailed in this module does NOT constitute a breach of Victorian privacy laws. Staff are allowed to disclose personal or health information in cases where this disclosure is permitted by laws, such as the *CYFA* or the *Crimes Act*.

[36]



CASE STUDY: REPORTING

James is a bright outgoing 12-year-old. However, over the last couple of weeks, you notice that James' behaviour has changed. He is consistently nervous, no longer participates in lunchtime activities with his friends and has begun to stay later at school in the afternoons.

During the maths class that you teach, you notice a dark bruise on James' arm. You ask if everything is OK. James tells you that he doesn't want to go home because he is afraid that his mother's new boyfriend will beat him again.

Which of the following statements is correct?



===== NOTEs =====

[*]

Answer 1

Correct:

- You form a belief on reasonable grounds that James is at risk of physical abuse and his parents are unable or unwilling to protect him from that abuse, based on your observations and his direct statement about the physical abuse.

It is your legal responsibility as a mandatory reporter to immediately make a report to DHHS Child Protection. You may also consult with your school leadership or welfare team who can provide advice and support when making the notification, but it is important you take immediate action on James' disclosure.

Staff who are not mandatory reporters are also able to report these concerns to DHHS Child Protection, and in line with their duty of care to their students they should make a report and speak to the school's leadership or welfare team about these observations.

Note that for Victorian government schools it is a DET policy requirement that all staff undertake these actions. James' safety and wellbeing is at risk and it is your legal responsibility as a mandated reporter to immediately make a report to DHHS Child Protection.

[*]

Answer 2

Incorrect:

In the course of undertaking your professional duties as a mandatory reporter, you are required to report a reasonable belief that a child is in need of protection from significant harm as a result of sexual or physical abuse and their parents are unable or unwilling to protect them from that abuse. This abuse does not need to take place in the school environment for a mandatory reporter to be required to make a report.



Staff who are not mandatory reporters are also able to report these concerns to DHHS Child Protection, and in line with their duty of care to their students they should make a report and speak to the school's leadership or welfare teams about these observations. Note that for Victorian government schools it is a DET policy requirement that all staff undertake these actions.

[37]



CASE STUDY: DHHS CHILD PROTECTION

Paul is a Grade 2 teacher. He notices that one of his students, Adam, is displaying challenging behaviours and has difficulty expressing himself. Adam also puts down his classmates by calling them derogatory names.

When Paul asks Adam why he does this, Adam replies, "My mum and dad call me names all the time, and my dad hits me with his belt, and sometimes punches me. Dad says he is sorry later and that he hits me because I make him angry when I don't do what he says".

Paul realises that he must report his concern but he is unsure who the relevant authority is.

Which of the following statements is correct?



===== NOTES =====

[*]

Answer 1

Correct:

Physical injury is one of the grounds to make a mandatory report to DHHS Child Protection. Paul's observations of Adam's behaviour and Adam's disclosure to him are grounds for Paul to form a reasonable belief that Adam is being physically abused and his parents are unable or unwilling to protect him from that abuse.

- Paul must make a report to DHHS Child Protection who will decide on the necessary course of action. There are also grounds for Paul to form a belief that Adam is being emotionally abused.

While emotional abuse is not subject to the mandatory reporting requirement, under duty of care obligations, Paul should also advise DHHS Child Protection of this concern.

[*]

Answer 2

Incorrect:

- Under no circumstances should school staff confront any parties involved. Paul is not required to investigate Adam's allegations, but merely to form a reasonable belief that Adam is in need of protection from significant harm because of physical or sexual abuse.

Paul must make a mandatory report to DHHS Child Protection. There are also

grounds for Paul to form a belief that Adam is being emotionally abused.

While emotional abuse is not subject to the mandatory reporting requirement, under duty of care obligations, Paul should also advise DHHS Child Protection of this concern.

[38]



CASE STUDY: Child FIRST

A family of five children attends a local primary school where two of the children receive extra support for developmental delay. The children's teachers have observed that they often come to school in the same dirty, unwashed clothes and often smell of urine. The children rarely bring lunch and if they do, it usually consists of two slices of stale bread with cheese. Their mother has met with school staff several times, and while she appears willing to make the necessary changes, she seems unable to carry them out.

The principal also has concerns as one child has complained of a toothache for some time, but the mother has not sought the necessary medical attention. In these circumstances, the principal must take action to protect the children.

On your own or with colleagues, think about which action below would be most appropriate before checking the answers.



===== NOTES =====

[*]

Answer 1

Answer:

The principal may decide to report to Child FIRST or DHHS Child Protection. Either action may be correct depending on the circumstances.

In some cases there are better outcomes for the family if they engage with family support voluntarily through Child FIRST. The mother has expressed willingness to take action, but may need support to do so.

A referral to Child FIRST should be considered if, after consideration of the available information, you are more inclined to form a view that the concerns currently have a low-to-moderate impact on the children, and the immediate safety of the children is not being compromised.

[*]

Answer 2

Answer:

The principal may decide to report to Child FIRST or DHHS Child Protection. Either action may be correct depending on the circumstances.

If a report is made to DHHS Child Protection on the grounds that the mother is unable to protect the children, DHHS Child Protection may refer the family to Child FIRST so that the family can voluntarily participate in family support services. Child FIRST can refer the matter back to DHHS Child Protection if further action is needed.

A report to DHHS Child Protection should be made if you form a belief that a child is in need of protection from abuse or neglect, and the parents are unable or unwilling to protect the child.

[*]

Important

IMPORTANT:

All school staff must act to ensure the safety and wellbeing of children.

[39]

UNIT 6: ONGOING RESPONSE

This Unit will consider the involvement of school staff in the ongoing response to child abuse allegations after they have reported their concerns to the relevant authorities. Specifically, this Unit will look at:

- provision of wellbeing support for students
- information sharing.

PROVIDING WELLBEING SUPPORT FOR THE AFFECTED STUDENT

In line with their duty of care, school staff must continue to take steps to ensure that the student feels safe and supported at school. This may include the following actions:

- Coordinating allied health and wellbeing supports and services for the affected student.
- Developing and implementing an individual management plan for the student.
- Where appropriate, establishing regular communication between staff and the student's parent / guardian / carer.
- Ensuring ongoing monitoring and follow-up of the student's health and wellbeing.

[40]

INFORMATION SHARING

INFORMATION SHARING BETWEEN STAFF

It is legally allowable for school staff to share certain information about a student with other relevant staff members. This does not constitute breach of privacy laws. The consent of the child's parents is not required for such information to be shared. Staff need to have sufficient information to support the student at school.

INFORMATION SHARING BETWEEN SCHOOL STAFF AND AUTHORITIES

Requests for information may be made by authorities in the following instances:

- An authorised DHHS officer who has received a protective intervention report about a child may seek information relevant to the protection or development of the child from specified 'information holders'. Information holders include teachers, principals, registered psychologists and all employees of DET.
- Victoria Police may seek information from school staff as part of investigating an allegation that a child is the victim of a sexual offence. This may include requests for staff to provide documents, witness statements or to attend interviews.

If an officer from DHHS or Victoria Police makes a request for information, a school staff member can provide this information, but is not legally obliged to do so. However, it is important for staff to bear in mind that the information requested may be of assistance to DHHS or Victoria Police in taking action to protect the child.

It is important to check the authority / credentials of the person identifying him / herself as an officer from the DHHS or Victoria Police prior to providing the information.

If government school staff receive a request for information from an authorised DHHS or Victoria Police officer, they can contact the DET Legal Division for advice and assistance.

===== NOTEs =====

[*]

Privacy laws

Privacy laws:

Privacy laws allow for staff to share a student's personal and health information to enable the school to:

- provide and support the education of the student, plan for individual needs and address any barriers to learning
- support the social and emotional wellbeing and health of the student
- fulfil duty of care obligations to the student, other students, staff and visitors
- make reasonable adjustments if the student has a disability, including a medical condition or mental illness
- provide a safe and secure workplace.

[*]

Sufficient information to support the student

Sufficient information to support the student:

Sharing information about a student who is involved in an investigation by DHHS or Victoria Police with other relevant staff in order to support the student may include:

- making staff aware that the child is in a difficult situation
- informing them that the child should be monitored and may need support
- providing staff with information about what to do if the child seems stressed or how the child can be supported
- advising what management plans and strategies have been put in place
- advising of any potential risks to other students
- providing staff with a contact person for any additional concerns / observations made about the student or his / her family.

Note, this generally does not include specific details of the abuse or the investigation.

[41]



SUMMARY

This module has discussed the various reporting obligations and responsibilities of school staff for the protection of children.

You should now be familiar with your obligations and responsibilities and what actions you should take if you believe a child is in need of protection.

If you have ANY concerns about the safety and wellbeing of a child, you should take action immediately. This may include one or a combination of the following actions:

- seeking advice and support from the principal or the leadership team
- making a report to DHHS Child Protection
- making a referral to Child FIRST
- contacting Victoria Police.

[42]



UNIT 7: ASSESSMENT

To confirm your understanding of the topics covered in this module you will now need to complete a short assessment.

Once you start the assessment you will not be able to return to the module to review information without having to restart the assessment. Therefore, if you would like to review any of the topics covered in the module you should use the menu button to navigate to that particular topic prior to commencing the assessment.

The assessment contains 10 multiple-choice questions. Each question has only one correct answer.

To pass the assessment you will need to achieve a mark of 90%.

[Click to begin](#)

[43]
