

#### PROCEDURE - CHILD PROTECTION

Aligned with Child Protection Policy: NAG 5

# This procedure document details practices which support the Child Protection Policy.

#### 1. Responsibilities:

Any member of staff, paid or voluntary, may directly witness child abuse or have allegations, made by a child or an adult, relayed to them. There may also be disclosures of abuse prior to attending Sir Keith Park School. *All staff* have responsibilities in ensuring the safety of students at all times.

#### Each staff member must:

- > Be aware of, and alert to, potential indicators of abuse and neglect
- Record a factual account of any concerns they have, or that are bought to their attention
- Appropriately seek advice and support from the Principal or Deputy who will then contact external agencies if appropriate
- Work in co-operation with the parents / caregivers, unless this compromises the safety of the child.

#### It is the primary responsibility of staff to:

- be vigilant,
- have knowledge and awareness of the indicators of neglect, potential or actual abuse.
- report any concerns, suspicions, or allegations of suspected abuse immediately
- ensure that the concern is taken seriously and reported.

The statutory responsibility to investigate allegations of child abuse rest with Ministry for Vulnerable Children: Oranga Tamariki (MVCOT), and the Police.

At Sir Keith Park School, the Principal is the Designated Person for Child Protection. In the unavailability of the Principal, the person deputising for the Principal will assume the role.

#### The role of the Principal is to:

- Ensure the needs and rights of students come first i.e. the safety and wellbeing of each student is paramount
- ➤ Receive information that suggests potential or actual risk of harm current, past or likely to occur to a student.
- Advise and support staff
- Make referrals to the SWIS or MVCOT as appropriate
- Ensure all allegations are managed appropriately
- ➤ Ensure that allegations or complaints are appropriately referred to the Education Council of Aotearoa New Zealand (EDUCANZ).
- Ensure all staff are informed of, and have access to, Child Protection policy and procedures.
- Ensure that all staff recruited and employed are safe to work with children.

The role of the Board of Trustees is to:

- Ensure the needs and rights of students come first i.e. the safety and wellbeing of each student is paramount
- Support the Principal to ensure all allegations are managed appropriately
- ➤ Inform the Principal immediately should any member of the Board of Trustees be aware of a concern for the wellbeing and safety of a student who attends Sir Keith Park School.
- > The Chair of the Board of Trustees will be directly informed of any allegations of abuse against the Principal.

#### 2. Identification of Abuse:

See Appendix for examples

# 3. Handling Disclosures From a Student:

If a student makes a verbal disclosure to a member of staff it is important that staff take what the students says seriously, and responds in a calm and confident manner. Facial expressions and tone of voice are as important as what is actually said. This applies irrespective of the setting, or the member of staff's own opinion on what the student is saying.

#### <u>Do:</u>

- Listen allow the student to say as much as they want without interrupting (no questioning)
- Respond reassuringly but do not make any promises unable to be kept
- Believe what is said
- Record in writing all conversations and actions taken as soon as possible (same day) and give to Principal – see SKP Reporting Form in Appendix
  - ✓ record facts and observations. Include date, time, place and who was present.
  - ✓ word for word what was said by whom using the person's words
  - ✓ what action was taken, by whom and when.

#### Do Not:

- Question in a way that introduces words, phrases, people's names or concepts
- ☑ Indicate that you disbelieve the student
- ☑ Try to correct, confront, change, challenge, or influence what they say
- Respond by saying "Why did you let him / her do that?" or "You should have told me sooner".

Under no circumstances should a member of staff attempt to conduct an investigation or deal with concerns regarding child abuse alone. Any incidents, concerns, or suspicions must be reported.

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#### Child-on-child Harmful Behaviours

Children can harm other children through bullying, violence or sexual assault. Therefore, when a student alleges inappropriate harmful behaviour by another students then the child protection procedures must be considered for both students.

#### Suicidal Concerns or Self-Harming Behaviours

When a student identifies thought of suicide, or self-harming behaviour, this must be immediately notified to the Principal.

#### Keeping Whanau informed and involved

Although the parent / caregiver of the student will usually be informed of concerns, there may be times when this may not happen initially, such as when:

- ➤ The parent / caregiver is the alleged perpetrator
- > It is possible the student may be intimidated into silence
- > There is a strong likelihood that evidence will be destroyed
- ➤ The student does not want their parent or caregiver involved and they are of an age when they are competent to make that decision.

The parent / caregiver will be informed - by the most appropriate person, at the appropriate time.

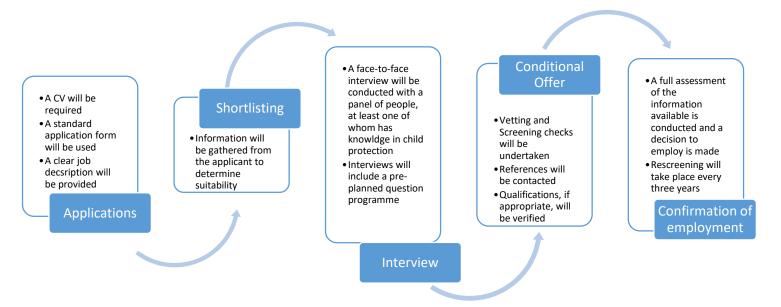
# 4. Sharing Information & Confidentiality

- ➤ Sir Keith Park School recognises that all staff must act within the legal requirements of the Privacy Act; Children, Young Persons and their Families Act; Health Information Act; and other statutes. There are provisions within each of these acts for sharing information needed to protect children and enable people to carry out their legitimate functions.
  - In general, staff will not share information if they believe that by doing so this will endanger the student.
- > Sir Keith Park School encourages the sharing of information hen appropriate steps have been taken
- Staff may be asked to provide information to provide information to MVCOT; the Police; Court or lawyers; Medical Professionals and Psychologists.
- > Information sharing will be restricted to those who have a need to know in order to protect the students.
- ➤ When any of the above contact a staff member for information that staff member must first refer to the Principal for clearance before providing the information.
- Information will only be given after the staff member has identified:
  - the person making the request
  - The actual purpose of the request
  - What use the information will be put to
  - Who will see the information
- ➤ In the case of a social worker or Counsel for Child wishing to interview a student while in the care of Sir Keith Park School, the staff member must consult the Principal to be certain that such an interview will be undertaken legally and in the best interests of the student. Document and file all steps in the process.

A student's records will be kept as factual as possible, and nothing will be recorded as a fact without evidence to back it up. This means, for example, that no entry will be made on a student's record about guardianship of a child without sighting the appropriate documentation.

#### 5. Safe Recruitment of Staff:

All appointments (permanent, fixed term, student, casual or volunteer) to positions that have direct and / or frequent contact with students will be conditional on safety checks, including a Police Vet.



Further information regarding Safety Checking is found in the Employment Policy.

## 6. Training of Staff

Sir Keith Park will ensure their staff members, paid and voluntary, are trained to recognise child abuse. Training should enable staff to:

- Identify when students are at risk
- Take thorough and effective preventive action
- Respond in the most appropriate way to students who are suspected of being abused
- Report their concerns appropriately
- Support students, staff and family members or whanau
- Recognise their responsibilities about suspected poor practice or possible abuse

Records of training are to be kept to ensure that training is appropriate and regularly updated.

All new staff will be familiar with the Child Protection Policy and Procedures as part of the induction process

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Sir Keith Park School will ensure staff have ongoing training (every three years) in recognising and responding to children affected by child abuse and family violence.

## 7. Safe Working Practices:

- A relationship between an adult and a child or young person cannot be a relationship between equals. There is a potential for exploitation and harm of vulnerable young people. Adults have a responsibility to ensure that an unequal balance of power is not used for personal advantage or gratification.
- Adults should always maintain appropriate <u>professional boundaries</u> and avoid behaviour that might be misinterpreted by others. Adults who work with children must therefore act in a way that is considered to be safe practice.
- All staff are expected to behave in manners consistent with the Sir Keith Park Code of Conduct.
- A reality of day to day practices at Sir Keith Park School means that staff and students are often in 1:1 situations, which have the potential to make students more vulnerable to harm and staff more vulnerable to unjust or unfounded allegations. Both possibilities should be recognised and sensible precautions taken.

On occasions, senior leaders will need to undertake a risk assessment in relation to the specific nature and implications of 1:1 work. Assessments should take into account the individual needs of the student and the individual worker, and any arrangements should be reviewed on a regular basis.

Staff members are required to:

- Avoid 1:1 sessions in remote, secluded areas
- Stay as visible as possible
- Ensure another staff member is informed about the 1:1 situation before it takes place – this ensures support and accountability is at hand
- Report to a senior leader any situation where a student becomes distressed or angry
- Carefully consider the needs and circumstances of the student when in 1:1 situations
- Communication between students and adults, by whatever method, should take place within clear and explicit professional boundaries. This includes communicating with students at school, home, in public settings and through the wider use of technology such as mobile phone, text messaging, emails, digital cameras, videos, web-cams, websites, social networking and blogs.

Staff members are required to:

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- Ensure their communication with the student takes place within the boundaries
  of a professional relationship, and re open to scrutiny from other adults
- Consider the appropriateness of social contact according to their role and nature of their work, and have contact approved by senior leaders
- Report to the Principal any situation which may place a child at risk or which may compromise the service of their own professional standing
- Ensure that social networking sites are set at private and that students are never listed as approved contacts
- Never use or access social networking sites of students
- Ensure that parent permission is given if communicating with students via mobile phones]
- Only display or distribute images of students when parent consent is given
- Follow Sir Keith Park School's e-safety procedures
- Decline to share any personal information with a child or young person.
- Within their professional role, staff at Sir Keith Park School, have regular <u>physical</u> <u>contact</u> with students in order to assist them with activities of daily living, to keep safe, and to learn.

When physical contact is made with a student this should be in response to their needs at the time, of limited duration and appropriate to their age, stage of development, gender, ethnicity and background.

Staff who assist students with their personal cares need to demonstrate awareness of the student's safety, privacy and dignity. Training related to personal cares will be given to all new staff as part of their induction process.

#### Staff are required to:

- Never touch a student in a manner that may be considered indecent
- Consider the way comfort and reassurance is offered to a distressed student, and deliver it in a manner which is age and culturally appropriate
- Report situations which may give rise to concern
- Follow individual students' behaviour plans and ask for clarification or support when needed.
- Obtain parent / caregiver permission to use public changing areas alongside other students and staff members at the local swimming pool.
- ➤ <u>Intimate or sexual relationships</u> between students and staff will be regarded as a grave breach of trust. Allowing or encouraging a relationship to develop in a way which might lead to a sexual relationship is also unacceptable.

Any sexual activity between an adult and a child or young person will be regarded as a criminal offence and will always be a matter for disciplinary action.

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➤ Many students attending Sir Keith Park School require medication to be administered on a daily basis. Each student should have written permission from parents / caregivers. Staff record any medication that is given. Refer to Medication Protocol.

➤ During <u>EOTC</u> such as work experience and community participation, Sir Keith Park students will not be left alone with a member of the public or and external workplace employee. In the event of an on-going placement Safety Checks must be completed on anyone having unsupervised access to students.

#### 8. Allegations again staff regarding inappropriate actions with students:

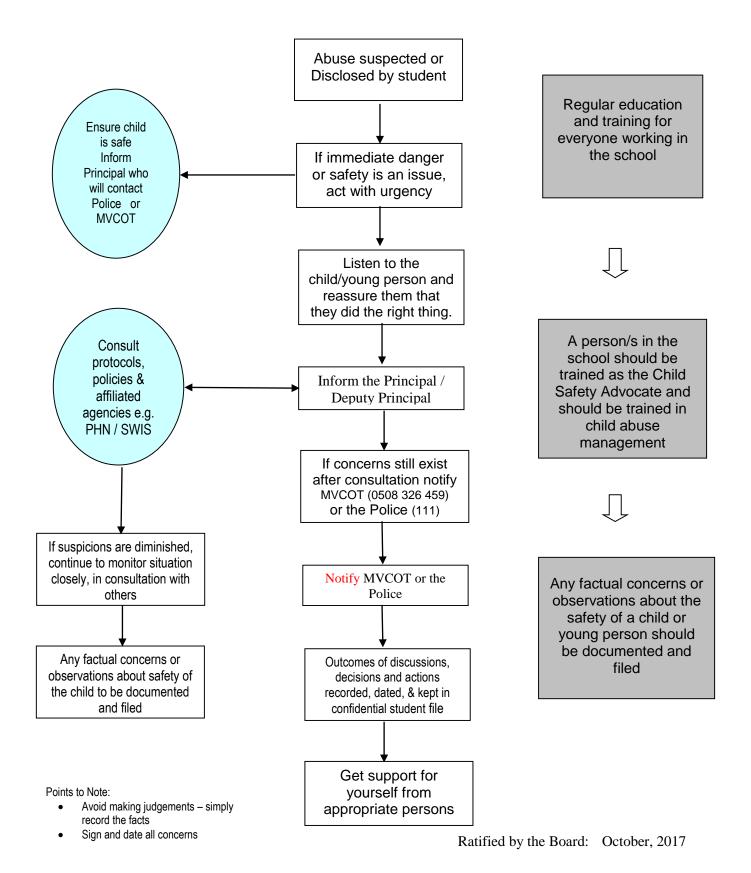
- ➤ Sir Keith Park School will respond to suspicions and allegations of child abuse by a member of staff in a manner which best ensures students' immediate and long term safety; and will treat suspicions or allegations against a staff member with same seriousness as suspicions or allegations made against any other person.
- Sir Keith Park School will not act alone, and will refer all suspected situations of child abuse to Police or MVCOT. The safety of the student will be the primary consideration, and no person in this organisation will collude to protect an adult or an organisation.
- Allegations will be treated in such a way that the rights of adults and the stress upon the staff member are also taken into consideration.
- ➤ When abuse is suspected, or an allegation made against a staff member, the first consideration will be to ensure the safety of the student.
- ➤ When abuse is suspected, or a student discloses abuse, staff will follow the Flow Chart of action included in this procedure.
- When there are suspicions of abuse by a staff member, both staff and students' rights are to be attended to. This means that the safety of the student is the first concern, and that the staff member must have access to legal and professional advice.
- ➤ The person managing the child abuse issue will not be the same person as that managing the employment issue
- ➤ The suspected staff member (or volunteer) will be prevented from having further unsupervised access to students during any investigation and will be informed fully of their rights
- Sir Keith Park School will adhere to the principles of the Employment Contract's Act and give the staff member all information regarding their rights.
- Sir Keith Park School recognises the added stress to fellow staff in such a situation, and will ensure support is available
- ➤ The Principal, as Designated Person for Child Protection, must immediately ensure that the suspected individual does not have any contact with the student making the allegation. A risk assessment must be undertaken to determine what level of access, if any, that person should have to other students.
- ➤ If the police decide to undertake a criminal investigation then the member of staff may be suspended, without prejudice, as a precautionary measure. It is important

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that no internal investigation is undertaken, and no evidence gathered that might prejudice the criminal investigation.

- ➤ If the school is aware that staff it has placed on precautionary suspension also works with children at another organisation, either as an employee or volunteer, it should ensure the other organisation is informed of the suspension and the subsequent outcome. Consultation with MVCOT and the Police will determine how this information is conveyed.
- ➤ Sir Keith Park School should liaise with MVCOT and the Police regarding the progress of the investigation.
- ➤ If there is insufficient evidence to pursue a criminal prosecution, then a disciplinary investigation may still be undertaken if there is "reasonable cause to suspect" that abuse may have occurred. The allegation may represent inappropriate behaviour of poor practice by a member of staff, which needs to be considered under internal disciplinary procedures.
- ➤ If the allegation is against the Principal then this must be reported directly to the Chair of the Board of Trustees.
- ➤ A complaint or allegation against a member of staff may require a report to the Education Council of Aotearoa New Zealand (EDUCANZ). Further information regarding the thresholds for reports to EDUCANZ is in the Appendix.
- ➤ A person tendering his or her resignation, or ceasing to provide their services, will not prevent an allegation of abuse against a child being followed up in accordance with these procedures.

# FLOW CHART OF ACTION



## APPENDIX: SIGNS AND SYMPTOMS OF STUDENT ABUSE

One of the problems in identifying abuse of students is that many commonly discussed signs and symptoms can be caused by factors other than abuse, e.g.

- injuries can be caused through accidents
- developmental delays or regression can be caused through illness or innate differences in rates of development
- some sexual play is normal for children at various stages of their development.
   Many adolescent intellectually disabled students are functioning within these lower ranges of development and may indulge in similar forms of activity.

Some signs and symptoms indicate that students <u>probably</u> have been abused and these should be reported immediately to Ministry for Vulnerable Children: Oranga Tamariki (MVCOT) for expert assessment or investigation.

Some signs and symptoms indicate that students *possibly* have been abused and these must be discussed with the Principal or Deputy Principal, who will decide what action to take.

# FIVE PRINCIPLES TO ADHERE TO WHEN CONFRONTED WITH SUSPECTED ABUSE

#### 1. Believe what children tell you - it is usually true.

Children can only describe events within their own experience. Explicit descriptions of physical or sexual abuse will not have come from books, TV or conversation.

#### 2. Believe what you see rather than what adults tell you.

Most adults try to hide abuse and neglect and their explanations of injuries may be plausible. Apparent warmth and concern in an adult does not necessarily mean that he or she is not responsible for a child's condition. There is a tendency for you to disbelieve what the facts tell you. Take note of any unease you have about the situation.

#### 3. Report and consult on every case you suspect.

Do not assume that someone else will do something about it. Follow the school procedures for reporting or notify MVCOT if this is a case outside of school.

#### 4. Recognise the dilemma you face in taking action.

Child abuse and neglect do not stop spontaneously. Inaction is not a valid option. Generally parents can accept that action is in their interests as well as the child's. In some cases, however, parents will feel angry and betrayed, and there is no way of avoiding this if action is to be taken in the best interests of the child or young person.

#### 5. Do not assume that others are taking action.

Regular communication among those involved with the child and family is essential. Review what is happening in the case on a regular basis.

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PHYSICAL ABUSE: Non-accidental act on a child that results in physical harm			
Indicators of <b>PROBABLE</b> abuse	Caregiver / Adult's Behaviour	Student's Behaviour	
<ul> <li>Bruises, welts, lacerations &amp; body marks.</li> <li>Multiple bruises at different stages of healing.</li> <li>Finger-tip bruises.</li> <li>Black eyes with bruising round the eyes rather than on the cheek.</li> <li>Grasp marks made by fingers and thumbs.</li> <li>Adult-sized bite marks.</li> <li>Marks from specific objects, eg. cords, rulers or broom handles.</li> <li>Injuries to the mouth in young babies.</li> <li>Fractures and dislocations – skull, facial bones, spinal fractures etc</li> <li>Multiple fractures at various stages of healing.</li> <li>Rib fractures in young children.</li> <li>Single fracture with multiple bruising.</li> <li>Bald patches with haemorrhages beneath the scalp (hair pulling). Burns.</li> <li>Cigarette Burns.</li> <li>Shapes of objects on the skin, eg. irons or pokers.</li> </ul>	<ul> <li>The caregiver delays seeking medical advice following a significant injury.</li> <li>"Accident" story is vague, or the account of the injury may change from time to time. The caregiver cannot tell you how the injury happened.</li> <li>An injury is explained as self-inflicted by a young child. There is an eye witness report of abuse.</li> <li>Appears unconcerned about child's wellbeing</li> <li>May state child is prone to injuries, or lie about how they occur</li> </ul>	<ul> <li>A child describes treatment which is abusive.</li> <li>Running away from home.</li> <li>Fear of caregivers.</li> <li>Vacant stare or frozen watchfulness</li> <li>May cringle or flinch if touched unexpectedly.</li> <li>When at play imitates negative behaviour / language.</li> <li>Is dressed inappropriately to hide injuries (ie long pants in summer)</li> <li>Violent to other children or animals</li> </ul>	
Indicators of <b>POSSIBLE</b> abuse	Caregiver / Adult's Behaviour	Student's Behaviour	
<ul> <li>Bruises, lacerations and body marks. Clusters of bruises and multiple bruises.</li> <li>Finger nail marks or scratches. Fractures and head injuries.</li> <li>Any head injuries that cannot be explained.</li> </ul>	<ul> <li>There is a history of abuse of the child or another child.</li> <li>The interactions between the parent and child are very negative, distant or rejecting.</li> <li>Parent displays harsh attitudes or holds unusual and excessively punitive beliefs about discipline.</li> </ul>	<ul> <li>Extremely aggressive or withdrawn.</li> <li>Extremely compliant or over eager to please.</li> <li>Fears parent or caregiver.</li> <li>Afraid / reluctant to go home</li> <li>Overall general sadness</li> </ul>	

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NEGLECT: A lack of action, emotion, or basic needs		
Indicators of <b>PROBABLE</b> neglect	Caregiver / Adult's Behaviour	Student's Behaviour
<ul> <li>There has been severe neglect of a child's physical, medical and safety needs (ie rashes / skin disorders due to lack of hygiene; extremely dirty / unbathed; dressed inappropriately for season; malnourished; lack of adequate medical or dental care; left with inappropriate caregiver – too young / old).</li> <li>Accidental injuries have been caused through lack of supervision appropriate for the child's age or level of functioning.</li> </ul>	<ul> <li>An adult fails to respond adequately to a child's injury or prolonged illness.</li> <li>Puts own needs ahead of child's</li> <li>Demonstrates little or no interest in child's life – does not attend school activities, social events</li> <li>Drug and alcohol use</li> <li>Depressed</li> </ul>	<ul> <li>A child describes a lack of supervision and care appropriate for their age.</li> <li>Demonstrates lack of attachment to parent.</li> <li>Indiscriminate attachment to other adults</li> <li>Steals food.</li> <li>Frequent absences from school.</li> <li>No understanding of basic hygiene</li> </ul>
Indicators of <b>POSSIBLE</b> neglect	Caregiver / Adult's Behaviour	Student's Behaviour
In the absence of any obvious medical reason, the child:  • fails to thrive  • shows signs of malnutrition  • has low weight for size, body type and health  • has frequent accidental injuries  • falls asleep often without being ill and not consistent with their stage of development.	<ul> <li>A caregiver fails to notice or respond to important details of a child's well-being such as feeding or changing them.</li> <li>Caregivers have very poor standards of child care, e.g. of hygiene and supervision.</li> </ul>	A child reports lack of care:  left at home alone  missed meals  lack of hygiene  Is very demanding for attention / affection.

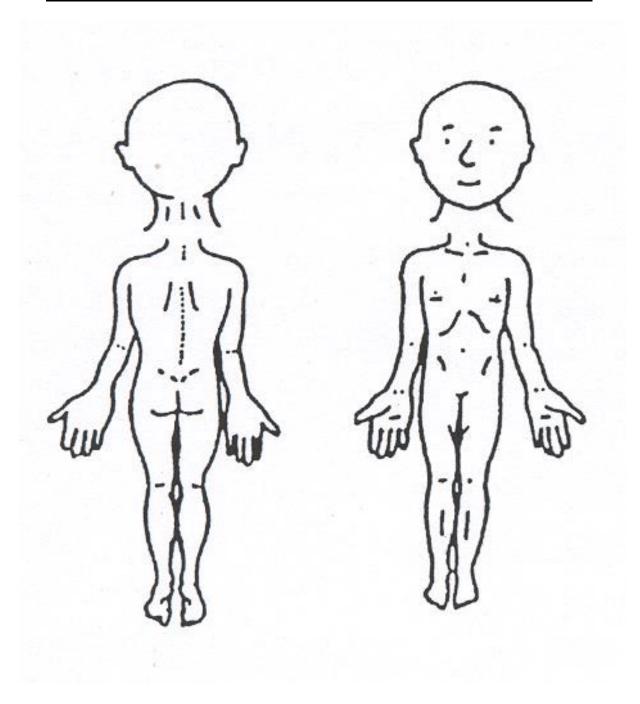
EMOTIONAL ABUSE: Persistent emotional ill treatment		
Indicators of <b>PROBABLE</b> Abuse	Caregiver / Adult's Behaviour	Student's Behaviour
<ul> <li>Children are emotionally abused whenever they are physically or sexually abused or neglected because of the damage that such abuse does to their emotional development.</li> <li>It is difficult to separate out the symptoms of emotional abuse from the symptoms caused by the other types of abuse.</li> <li>However, adult behaviours may indicate that a child is being emotionally abused.</li> </ul>	<ul> <li>Lack of interest in and consistent rejection of a child.</li> <li>Lack of any show of care and affection.</li> <li>Consistently negative attitudes to and negative interactions with a child.</li> <li>Isolates child.</li> </ul>	<ul> <li>Extreme inappropriate social behaviour.</li> <li>Extreme aggression</li> <li>Frequent psychosomatic complaints (headaches, stomach aches).</li> </ul>
Indicators of <b>POSSIBLE</b> Abuse	Caregiver / Adult's behaviour	Student's Behaviour
In the absence of any obvious medical reason, the child:  * fails to thrive  * has stunted growth  * shows developmental delay  * exhibits developmental regression	<ul> <li>Parents are uncaring or very detached or physically or emotionally remote.</li> <li>Parents have a harsh attitude towards punishment.</li> <li>Parents are profoundly critical and blaming of the child.</li> <li>Parents have grossly inappropriate expectations of the child.</li> </ul>	<ul> <li>Extremely immature or inappropriate social behaviour without intellectual retardation, e.g. lack of social responsiveness, fixed stare, rocking movement.</li> <li>Apathy and depression.</li> <li>Extreme and age-inappropriate aggression.</li> </ul>

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SEXUAL ABUSE : forcing / enticing a child / young person to take part in sexual activities		
Indicators of <b>PROBABLE</b> Abuse	Caregiver / Adult's Behaviour	Student's Behaviour
<ul> <li>The child has a sexually transmitted disease.</li> <li>The child has bruises, lacerations, redness, swelling, and/or bleeding to the genital, vaginal and/or anal area, (unless an accident explains the injury).</li> <li>Pregnancy.</li> <li>Sexually transmitted infections</li> <li>Torn, stained, or bloody underclothing</li> <li>Blood in urine or stools</li> </ul>	<ul> <li>A parent or other adult admits abuse.</li> <li>There is an eye witness report of abuse.</li> <li>Accuses the child of being sexually provocative</li> <li>Invades the child's privacy (e.g. during dressing; in the bathroom)</li> </ul>	<ul> <li>The child discloses abuse.</li> <li>Age-inappropriate sexual play or language</li> <li>Talks with another child about abuse. Abrupt change in behaviour or personality</li> <li>Bizarre, sophisticated or unusual sexual knowledge</li> </ul>
Indicators of <b>POSSIBLE</b> Abuse	Caregiver / Adult's Behaviour	Student's Behaviour
<ul> <li>Pain or discomfort in the genital area.</li> <li>Discharge or infection in the anal or genital area.</li> <li>Repeated urinary tract infections.</li> <li>Discomfort in sitting or fidgeting as unable to sit comfortably</li> <li>Unusual or excessive itching or pain in the genital or anal area</li> </ul>	<ul> <li>A known sexual offender is in frequent contact with the child through family or other contacts.</li> <li>Accuses child of being provocative.</li> <li>Is unusually protective of child.</li> <li>Discourages child from any unsupervised contact with peers.</li> <li>Misuses alcohol and / or drugs</li> <li>May favour the victim over other children</li> </ul>	<ul> <li>Knowledge of sex inappropriate to the child's age.</li> <li>Undue interest in sex and sexual play.</li> <li>Abnormal awareness of, or anxiety about touch.</li> <li>Fear of a particular adult.</li> <li>Describes sleep disorders, especially with sudden onset.</li> <li>Signs of distress.</li> <li>Unusual anxiety about toileting or changing clothes.</li> <li>Sexually active.</li> <li>Prostituting.</li> <li>Self-harming.</li> <li>Drug/Alcohol use.</li> <li>Overtly compliant</li> <li>Depression, anxiety, withdrawal, or aggression</li> <li>Refusal to go home with no apparent reason</li> <li>Eating disorders</li> </ul>

Intimate Partner Violence or Family Violence		
Perpetrator's Behaviour	Victim's Behaviour	Student's Behaviour
<ul> <li>Isolates and controls partner and children</li> <li>Threatens, criticises, intimidates, uses aggressive and physical abuse towards partner and children</li> <li>Minimises and denies own behaviour</li> <li>Blames victim for the perpetrators own behaviour</li> </ul>	<ul> <li>Physical injuries including: bruising to the chest and abdomen; injuries during pregnancy</li> <li>Depression and / or anxiety</li> <li>Inconsistent explanations for injuries</li> <li>Fearful</li> <li>Submissive</li> </ul>	<ul> <li>Physical injuries consistent with the indicators of Physical Abuse</li> <li>Absenteeism from school</li> <li>Bullying or aggressive behaviour</li> <li>Complaints of headaches or stomach aches with no apparent medical reason</li> <li>Talking or describing violent behaviours</li> </ul>

# OPTIONAL DIAGRAMS OF SIGNIFICANT FINDINGS AND INJURIES



PLEASE INDICATE ON DIAGRAM SITE SHOW: Abrasions Lacerations Areas of pain and tenderness Fractures etc



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# **Child Protection Interview Form**

Name of child:	Date:	Time:
Location:	Recorder:	
Others present:		
Recording of student's outline of the abuse or word)	neglect that may have ha	appened. (Word for
☐ Continued on another page (if necessary)		
Action Taken:		
<ul> <li>□ Principal Informed</li> <li>□ Police contacted</li> <li>□ MVCOT contacted for advice</li> <li>□ Student's family Contacted</li> </ul>	<ul> <li>□ SWIS informed</li> <li>□ Monitoring</li> <li>□ Copy kept on file</li> <li>□ Turuki Health inform</li> <li>□ Other</li> </ul>	
Recorders Summary / Notes (Nature of the concern or abuse. Be	haviours noticed, background information	n, reflections on interview)
Any other information that may be relevant:		
Recorder's Signature:		

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# Reporting Suspected or Actual Child Abuse or Neglect Of Children or Young Persons Under 17 Years Of Age

OTUDENT SEE	\!! <b>0</b>		
STUDENT DETA	AILS	0: 1:	
Surname:		Given Names:	
Date of Birth:		Ethnicity: (1)	
Address:		Ethnicity: (2)	
		Home phone:	
Who does the you	ung person live with?		
STUDENT REL			
	Name	Address/Home phone	Work/Work phone
Mother:			
Father:			
Stepmother:			
Stepfather:			
Other			
Caregiver:			
Siblings:			
Family:			
Whanau:			
	the house or on the poncerns for this young		
What other agend	cies are involved?		
What other agent	des are involved:		
DETAILS OF CO			
	nysical and/or sexua describe the incider	al abuse, state the actua nt.	al words the young
Name of Notifier:		Relationship to Chi	ld:

Time:

Date submitted:

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#### **Related Documents:**

Child Matters: Safer Recruitment, Safer Children. Guidance for choosing safe people to work with children.

http://www.childmatters.org.nz/file/Resources-page/safer-recruitment-safer-children-fa-2.pdf

Ministry of Education: Vulnerable Children Act 2014: A practical guide for Early Childhood Education Services, Nga Kohanga Reo, Playgroups, Schools, and Kura, 2015

Child Matters: How can I tell? Recognising Child Abuse, 2015

#### **Relevant Legislation:**

Education Act, 1989	State Sector Act 1988
Children, Young Persons and their Families Act, 1989	Care of Children Act. 2004
Crimes Act, 1961	Vulnerable Children's Act 2014
Domestic Violence Act, 1995	Employment Relations Act, 2000
Privacy Act, 1993	Human Rights Act 1993
Health & Safety At Work Act, 2016	National Administration Guidelines 5

# Agencies:

Ministry for Vulnerable Children: Oranga Tamariki (MVCOT)	www.mvcot.govt.nz 0800 FAMILY (0508 326 459)
Child Matters National Office: Postal Address:	P.O. Box 679 Hamilton 3240 New Zealand
General Enquiries:	Ph: (07) 838 3370 Fax: (07) 838 9950 Email: infor@childmatters.org.nz Web: www.childmatters.org.nz
Police: Local = Mangere	250 0500
OR Manukau	261 1300
Ministry of Education: Trauma Intervention	0800 848 326
NZ School Trustees Association	0800 782 4435
Mangere East Family Centre	256 0810