# Regional Processing Centre Guidelines

Service Provider Child Safeguarding and Wellbeing Protocol and Code of Conduct

## **Related Documents**

Date	Version No.	Author	Description of Change
12.11.2013	1.0	ABF Offshore Contracts	Version 1 approved by Simon Schiwy, DIBP Contract Administrator
14.10.2014	2.0	ABF Offshore Contacts	Version 2 Approved by Ben Wright, DIBP Contract Administrator

## October 2015 Version Control

Date	Version No.	Author	Organisation	Role	Description of Change
30.10.2015	0.1	Chelsey Swanson	TSL	Contract Administrator	Initial comments
10.11.2015	0.2	Claire Roennfeldt	ABF	Assistant Secretary, Child Protection and Wellbeing Branch	First comments on October 2015 version
12.11.2015	0.3	Darren Cordwell	ABF	Inspector, Offshore Contracts – Nauru	First comments on October 2015 version
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05.04.2016	0.7	Jim Nicholls	NCS	Senior Advisor	Second comments on October 2015 version
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# October 2015 Version Endorsement

Name	Organisation	Role	Date
	ABF		
	GoN		
	Connect Settlement Services		
	IHMS		

Name	Organisation	Role	Date
	BRS		



#### 1 BACKGROUND

Protecting the health, safety, wellbeing and dignity of children is an integral part of the delivery of services at the Regional Processing Centre (RPC). It is important to ensure appropriate processes are in place at the RPC to prevent and report Child Abuse, Neglect, Exploitation and Harm and to support RPC personnel raising concerns about inappropriate conduct and treatment of children at the RPC.

Accordingly, the Australian Border Force (ABF) has endorsed the Service Provider Child Safeguarding and Wellbeing Protocol (the Protocol) and Code of Conduct (the Code). The Protocol and Code set out principles that guide the conduct of the Government of Nauru, Nauru Police Force, ABF, all service providers, key stakeholders and visitors to ensure they work and engage safely and positively with children and their families throughout the RPC. In doing so, the Protocol and Code aim to create a child safe environment through the minimisation of any risks to the health, safety, wellbeing and dignity of those children who reside at the RPC. In particular, the service providers and key stakeholders play an important role in child safeguarding and wellbeing in their day-to-day work with children and their families in the RPC environment.

The Protocol and Code have been developed to ensure that to the extent possible, the best interests of the child are a primary consideration when making any decision that will affect children at the RPC. The child's best interests involve a consideration of the child's welfare as well as other factors, such as maintaining family unity.

#### 2 DEFINITIONS AND ABREVIATIONS (or GLOSSARY)

ABF: Australian Border Force.

**Child:** any person under the age of 18, regardless of whether a particular nation's laws recognise adulthood earlier.

**Child Abuse**: any act that negatively impacts on the physical, psychological or emotional wellbeing or development of a child. Child Abuse, includes sexual, physical and emotional abuse, neglect, exploitation of a child, and exposure to family violence.

**Child and Family Coordinator**: the Garrison and Welfare Services Provider (GWSP) qualified child safeguarding and wellbeing professional, who provides in-house technical advice.

**Child Protection:** the process of protecting children identified as suffering, or likely to suffer, significant Harm as a result of Child Abuse or Neglect and includes the strategies and processes used to protect children at unacceptable risk of suffering significant Harm.

**Child-Related Work**: any work where the contact with children is direct, part of a person's duties and not incidental to their work.

Child Safeguarding and Wellbeing Assessment: a comprehensive collaborative assessment and planning tool, initiated by the Child Safeguarding and Family Coordinator, that provides the focus for the family, service providers and networks to develop and implement detailed plans to build safety for children. The assessment and plan consider what has gone on in the past that is concerning, what has happened or is happening in the present to keep the child safe, and what needs to occur to build safety for the child.

**Exploitation:** the use of a child for someone else's advantage, gratification or profit often resulting in unjust, cruel and harmful treatment of the child.

**Family Violence:** a child being present (hearing or seeing) while a parent or sibling is subjected to physical abuse, sexual abuse or psychological maltreatment, or is exposed to the damage caused to persons or property by a family member's violent behaviour.

**Garrison and Welfare Services Provider:** the service provider engaged by the ABF to provide garrison services to residents at the RPC and welfare services to asylum seekers at the RPC.

GoN: the Government of Nauru.

**Guardian**: means the person with custody of a child, and the powers and duties in respect of the upbringing of that child ordinarily held by their parent, including but not limited to powers and duties to make decisions regarding residence, education, health care, medical treatment and other matters of significance for the child's health and wellbeing. The delegated legal guardian on Nauru of Unaccompanied Minors (UAMs) is the Minister for Justice and Border Control.

**Harm**: the detrimental effect on a child's safety or wellbeing caused by Child Abuse, Neglect, Exploitation or other negative conduct or circumstances.

**Health Services Provider**: the service provider engaged by the ABF to provide health and medical services at the RPC.

**Identified Support Person:** available to support and accompany children and parents whilst they undergo formal interviews including child protection investigations.

**Inappropriate Conduct and Treatment:** behaviour by RPC personnel in an official or private capacity that raise a reasonable suspicion that the standards applying to the professional/child relationship have or may be breached. Examples include inappropriate verbal, written or electronic communication and breaching of professional boundaries including intimate touching, grooming behaviour, pursuing or engaging in an inappropriate relationship, physical restraint, physical assault, punishment, sexual misconduct and sexual abuse and includes conduct that that reflects seriously and adversely on the integrity of the employer including inappropriate employee/child interaction.

**ICCC:** Integrated Case Coordination Committee of the Government of Nauru, reporting to the Minister of Home Affairs, and established to provide an integrated response to risk and safety concerns for children.

Key Stakeholders: stakeholders, that are not service providers, regularly in the RPC.

**Neglect**: any omission that impacts on the physical, psychological or emotional wellbeing or development of a child. Child Neglect includes things such as a failure to provide adequate supervision, food, clothing or shelter.

**NCPU:** Nauru Child Protection Unit [Division of Child Protection Services] of the Ministry of Home Affairs, Government of Nauru.

NPF: Nauru Police Force.

**Person of Interest:** the person alleged to have caused Harm to a child.

**Protocol and Code**: this Service Provider Child Safeguarding and Wellbeing Protocol and Code of Conduct.

**Refugee Services Service Provider**: the service provider engaged by the ABF to provide services to refugees. This includes welfare services for refugee residents residing at the RPC.

**Resident:** Any person, asylum seeker or refugee, residing in an RPC.

**RPC**: Regional Processing Centre.

**RPC Personnel**: persons employed or engaged by the GoN, NPF, ABF and/or any service providers or key stakeholders to work at or in connection with the RPC, including volunteers and subcontractor personnel.

**Service Provider**: any organisation or body, and any subcontractor of such organisation or body, engaged by the ABF to provide services at the RPC.

**Welfare Services:** the strategies and processes for coordinating and supporting services for the health, welfare and wellbeing outcomes for each resident.

**UAM:** Unaccompanied Minor – a person under the age of 18 years who when brought to Nauru was not accompanied by his or her parent or legal guardian.

#### 3 PURPOSE OF THE PROTOCOL AND CODE

The purpose of the Protocol and Code is to assist with:

- Ensuring RPC personnel engaged or employed or proposed to be engaged or employed in child-related work have the appropriate attributes, clearances, information, training and skills to deliver child safe services.
- Ensuring RPC personnel engaged or employed in child-related work have the capacity to identify Child Abuse, Harm and risk of Harm and are equipped to respond to inappropriate behaviours towards children and suspicions and disclosures of Abuse and Harm.
- Supporting RPC personnel who have contact with children by equipping them with clear instructions on working safely, appropriately and positively.
- Ensuring required standards detailed in the Protocol and the Code form part of RPC personnel supervision frameworks and are reflected through the performance management and disciplinary frameworks and processes.
- Ensuring clear requirements and processes for reporting and responding to concerns regarding the safety and wellbeing of children.
- Ensuring clear requirements and processes for reporting suspected criminal offences to the NPF.
- Promoting and sustaining a culture that supports all persons at the RPC reporting concerns of Child Abuse and Harm or risk of Harm.
- Encouraging children at the RPC to have a voice and be active participants in decisions relating to them at the RPC.
- Ensuring all service providers, key stakeholders and their personnel are committed to safeguarding children.

This commitment to the safeguarding and wellbeing of children is supported by each service provider's internal policies and protocols and training programs.

#### 4 SCOPE

The minimum standards of conduct detailed in the Protocol and Code apply to RPC personnel, including:

- all service provider and key stakeholder personnel including board members, executives,
   Nauruan based staff, contractors and consultants, volunteers and interns;
- all ABF personnel; and
- all GoN personnel.

A copy of this document will be provided to all personnel described above, who must read and sign the Protocol and Code of Conduct before the commencement of their employment or engagement at or in connection with the RPC. This is a mandatory condition of employment or engagement at the RPC.

The Protocol and Code relate to the role of the service providers and key stakeholders in child safeguarding and wellbeing only. However, this Protocol and Code recognises that neither service providers nor the ABF have the power or authority to make decisions and take action in relation to the following:

- the removal of children from their parents and guardians;
- the provision of short and long term care to, and custody of, children who must be removed from their parents or if parents relinquish guardianship;

- · the investigation of reports of children at risk of Harm; and
- any other decisions in relation to children where their parents or guardians do not provide consent.

#### 5 REVIEW OF THIS PROTOCOL AND CODE

In conjunction with the ABF, the Garrison and Welfare Services Provider (GWSP) is responsible for keeping this Protocol and Code up to date, and will conduct a formal, annual review of the Protocol and Code.

#### 6 CHILD SAFFGUARDING AND WELLBEING CORE PRINCIPLES

All service provider and key stakeholder personnel must demonstrate a commitment to child safeguarding and wellbeing that is based on the following principles:

- Zero tolerance of Child Abuse and Neglect.
- The child's welfare and best interests are paramount.
- Child safeguarding and wellbeing is a responsibility shared by all.
- The safeguarding and wellbeing of the child takes priority over any perceived or actual threat to the reputation of any service provider, key stakeholder, the ABF, the GoN or associated individuals.
- The GoN has the overarching responsibility for child protection, safeguarding and wellbeing of all residents residing at the RPC.
- Always be caring, respectful and compassionate towards children.
- A child's family has the primary responsibility for the child's upbringing, protection and development.
- Wherever possible taking into account risk of Harm, the preferred way of ensuring a child's safeguarding and wellbeing is by supporting the child's family.
- High standards of conduct are required of all RPC personnel in child related work and RPC personnel misconduct with respect to children will not be tolerated under any circumstances.
- All confirmed or suspected concerns regarding a child's safeguarding or wellbeing must be immediately reported in accordance with this Protocol and Code.
- It is essential to promote and sustain a culture that supports all persons at the RPC reporting concerns of Harm or risk of Harm.
- The NCPU is the lead agency for investigating reports of Harm or risk of Harm.
- Cooperation with any internal or external investigation regarding the safeguarding or wellbeing of a child or children is essential.
- The Protocol and Code must be complied with.
- A child will be restrained only as a last resort, provided it is reasonable, proportionate and necessary because a child's safety is in danger, and is carried out by trained and qualified personnel who have first employed verbal commands and de-escalation strategies.
- To the extent possible, force must not be used against children.
- There will be no discrimination by service providers based on ethnicity, gender, disability or status.

#### 7 ARRANGEMENTS FOR UAMS

The Nauruan Minister for Justice and Border Control (Minister) is the guardian of UAMs under section 15 of the *Asylum Seekers (Regional Processing Centre) Act 2012* (Nauru), unless the Minister has delegated that responsibility in accordance with the Act.

The Minister has delegated his guardianship responsibilities to Connect Settlement Services with the exception of the following:

- the transfer, return or resettlement of a UAM to or in another country; or
- the giving of consent for the marriage or adoption of a UAM; or
- the withholding or withdrawing of medical life support for a UAM.

The GWSP has no delegated guardianship powers for UAMs.

UAMs will be provided with supported care arrangements within designated accommodation space.

#### 8 PREVENTION AND EARLY INTERVENTION

A child's family has the primary responsibility for the child's upbringing, protection and development. A child safe environment at the RPC is everyone's responsibility; it is important to ensure all RPC personnel and other members of the RPC community are able to identify child safeguarding and wellbeing issues and report and respond to them early. Because the GoN has the overarching responsibility for child protection, safeguarding and wellbeing of residents within RPCs, the GoN is responsible for ensuring that service delivery is assessed from a child safeguarding and wellbeing perspective. ABF representatives will provide assistance to ensure that service providers and key stakeholders uphold this responsibility in line with Protocol explication.

Additionally, the GWSP and Refugee Services Service Provider will:

- Ensure that all residents, including children, will also be provided with information (using child friendly communication methods) in relation to this Protocol and Code and other relevant materials. This will include displaying a child-friendly translated reporting flow chart.
- Ensure that children who are involved in programmes and activities receive a clear explanation
  of the rules for participating in those activities and who they should contact if they are ever
  concerned for their safety or the safety of another child. This should also cover rules for childchild contact.

#### 9 WORKING WITH CHILDREN

#### 9.1 Recruitment and Selection Process

All service providers must ensure all personnel employed or engaged in child-related work (including volunteers and subcontractor personnel) are of good character and comply with the high standards set out in the Protocol and Code.

All service providers must comply with the requirements in Annexure 3 - "Recruitment and Selection Process" to assist with ensuring that persons who pose a risk to children are not engaged.

The requirements relate to recruitment advertising, selection processes, interviews, referee and background checks.

#### 9.2 Working with Children Clearances, Police Checks and other relevant Character Checks

All service providers must ensure all personnel employed or engaged in child-related work (including volunteers and subcontractor personnel) hold a current, valid working with children clearance (WWCC) or exemption or police or criminal history check prior to commencing child-related work at a RPC, as set out below:

- All personnel must satisfactorily complete Annexure 4 "Declaration of Criminal Record".
- To the extent possible, all personnel must hold a current, valid Working with Children Clearance, issued by an Australian state or territory (i.e. an Australian WWCC scheme).
- Personnel, who are not able to access an Australian WWCC scheme must, to the extent that this is possible, hold a current, valid WWCC issued by their country of origin.
- Personnel whose country of origin does not have a WWCC scheme must, to the extent that
  this is possible, satisfy a police or criminal history check, which must be reviewed every two
  years.
- Personnel whose country of origin does not undertake police or criminal history record checks can be engaged in child-related work provided:
  - o they have satisfactorily completed Annexure 4 "Declaration of Criminal Record"; and
  - they are supervised by personnel who hold a current, valid WWCC or police or criminal history record check at all times.
- All Service Provider personnel employed or engaged in child-related work must immediately
  disclose any change in the status of their WWCC, police or criminal history to a person
  nominated by the relevant service provider (Nominee). In the event of a change in status, the
  Nominee must seek advice as to appropriate next steps from the relevant authority (i.e.
  Australian state or territory WWCC regulator or Australian, Nauruan or other nation's police).
  In some cases, suspension and or termination of the relevant member of personnel's
  engagement or employment may be appropriate.
- The Nominee is responsible for maintaining a written register that contains details of the WWCC or exemption or police or criminal history check or Declaration of Criminal Record of each person engaged or employed in child-related work by that service provider, in accordance with Annexure 2 "Service Provider Record Keeping Requirements".

#### 9.3 Compliance

All service providers must ensure their personnel:

- read and sign the Protocol and Code of Conduct prior to commencing any child-related work;
   and
- comply with the Protocol and Code, including (but not limited to) reporting processes and timeframes, at all times.

Each service provider must maintain a record of all personnel who have read and signed the Protocol and Code and produce evidence of such records upon request by ABF or GoN representatives.

People visiting the RPC for **less than one day** (i.e. senior service provider personnel visiting the RPC) are not required to sign the Protocol and Code, however they must be escorted by suitably cleared RPC personnel while at the RPC and their visitor's pass must be clearly displayed.

The Protocol and Code must be reinforced at each service provider's induction and training sessions, through regular internal communications and on-line and in-person training and information sessions. Failure to read the Protocol and Code does not excuse any service provider personnel engaged or employed in child-related work from the requirement to comply with it.

#### 9.4 Induction and Training

All service providers must ensure comprehensive child safeguarding and wellbeing training and information is received by personnel engaged or employed in child-related work. Training is essential to ensure:

- awareness of the relevant issues is raised;
- guidelines for behaviour are understood, in particular to ensure all persons can interact safely, respectfully and productively with children and assist with ensuring their safeguarding and wellbeing:
- each person understands their obligations in respect of child safeguarding and wellbeing; and
- awareness of any changes to the Protocol and Code of Conduct and the service provider's relevant internal policies, protocols and procedures.

All service provider child safeguarding and wellbeing training programmes for personnel engaged or employed in child-related work must include training in the following areas:

- the Protocol and Code of Conduct;
- the child protection legal context and the role and responsibilities of the GoN;
- identifying Harm and risk of Harm to children;
- the investigative, referral and disciplinary processes including any sanctions that may be taken in respect to a breach of the applicable protocols, codes and policies; and
- service provider personnel who are likely to use force on children when it is reasonable and necessary, are trained in the correct and appropriate application of force.

All training and information in respect to child safeguarding and wellbeing will require endorsement by the ABF before implementation.

Attendance at child safeguarding and wellbeing training is mandatory for all service provider personnel employed or engaged in child-related work and training must be provided as follows:

- induction training for all new personnel employed or engaged in child-related work (including volunteers and subcontractor personnel); and
- annual refresher training for all existing personnel (including volunteers and subcontractor personnel) employed or engaged in child-related work.

All service provider personnel must sign attendance records and completion certification.

#### 9.5 Performance and Misconduct

High standards of conduct are expected from all service provider personnel engaged or employed in child-related work. All service providers must ensure that staff supervision and performance frameworks include reference to child safeguarding and wellbeing.

If an incident report involves allegations against service provider personnel, the relevant service provider will conduct their own employee investigation, with reference to this Protocol and Code, and apply internal disciplinary measures as appropriate, including standing down, dismissal and termination of an employee or contractor or other disciplinary action. Service providers are responsible for ensuring that employee investigations are conducted by experienced personnel and are thorough, procedurally fair and timely.

If the alleged incident involves a suspected criminal offence, the NPF will be immediately contacted and the NPF must be consulted before any internal service provider employee HR investigation commences.

Any service provider conducting their own internal employee HR investigation must provide the ABF, and for incident reports involving child safeguarding and wellbeing concerns the Child and

Family Coordinator (or their delegate), a summary report of the findings of the employee investigation.

#### 9.6 Staff Support

All service providers must provide their personnel with the opportunity to raise and discuss child safeguarding and wellbeing concerns, seek guidance and identify training and development appropriate to their role.

#### 10 COLLABORATION, CONSULTATION AND REFERRAL

Collaboration between service providers and key stakeholders is essential for child safeguarding and wellbeing at the RPC. All service providers and key stakeholders are required to engage in collaborative processes for identifying children at risk of Harm and responding to that risk, and the ABF will also keep the service providers informed of any other information that is available to it in respect of the safeguarding and wellbeing of children that will assist with child safeguarding and wellbeing at the RPC. The following meetings are required to be held and attended by relevant service provider personnel, the GoN and ABF.

- Weekly Multi-stakeholder Child and Family Meeting [CAF] convened for complex cases relating to high risk children and families. CAFs will be chaired by a representative of the GoN, and attended by representatives of the Nauru Division of Child Protection Services, the ABF, the GWSP, the Refugee Services Service Provider, the Health Service Provider and other relevant key stakeholders and subcontractors (e.g. security). CAFs can also be convened out of session at the request of a member and/or their delegate. CAFs provide an opportunity for all key stakeholders to engage in information exchange, case planning and review.
- Weekly Resident Placement and Preventative Meeting [PPM] convened to discuss resident needs in the context of placement decisions and preventative management strategies that fall outside the parameters of the daily SME and weekly CAF meetings. The meetings will be chaired by a representative of the ABF and attended by the GoN, the GWSP, the Refugee Services Service Provider, the Health Service Provider and relevant key stakeholders and subcontractors (e.g. security). The meeting can be convened out of session at the request of a member and/or their delegate. The meeting provides an opportunity for all key stakeholders to discuss and be consulted on the commencement, management and cessation of emergency care arrangements for children.
- <u>Support, Monitoring and Engagement Meeting</u> [SME] this is a Health Services Provider led multi-stakeholder meeting for RPC residents presenting with mental health needs. The meetings are attended by ABF, the GoN, the GWSP, the Refugee Services Service Provider, and relevant subcontractors (e.g. security).

#### 10.1 Collaboration with the Integrated Case Coordination Committee [ICCC]

This Protocol respects the importance to child safeguarding and wellbeing of sharing relevant information with the GoN and its services and providers.

Where a case involving a resident of the RPC is included in the scope of the Government of Nauru Integrated Case Coordination Committee [ICCC]; information requested by the ICCC from the CAF and PPM shall be furnished by the respective chairperson and include:

- Details of the concerns;
- Details of the family members;
- Why the ICCC process is required; and
- All necessary information including case notes, file notes, medical and other pertinent information.

Alternatively, a case open to the CAF or PPM, can at the request of the GoN, be transferred to the ICCC. Cases accepted by the ICCC for a coordinated response, shall be closed to the CAF/PPM when the receiving ICCC Coordinator confirms receipt of all relevant documents including the items listed above plus copies of the relevant CAF meeting case minutes and a report of outstanding case actions.

All information communicated to the ICCC is subject to the ICCC protocols protecting confidentiality. Although a case may be closed to the CAF/PPM, each stakeholder can continue to share information outside the CAF/PPM as required in accordance with their respective roles and information sharing responsibilities.

#### 11 ROLE OF THE GWSP CHILD AND FAMILY COORDINATOR

The Child and Family Coordinator (or their delegate) has primary responsibility under the Protocol and Code for making decisions in relation to how asylum seeker child safeguarding and wellbeing concerns shall be dealt with, including case referrals to the NCPU, and the conduct of Child Safeguarding and Wellbeing Assessments. The Child and Family Coordinator will refer any refugee child safeguarding and wellbeing concerns to the nominated Refugee Services Service Provider personnel.

#### 12 REPORTING CONCERNS REGARDING CHILD SAFETY AND WELLBEING

It is **mandatory** for RPC personnel to report **all** concerns relating to child safeguarding and wellbeing to the Child and Family Coordinator (or their delegate) via agreed processes (12.4).

In addition, the Government of Nauru has a policy of mandatory reporting that identifies certain professionals, including those engaged by service providers and key stakeholders, who are required to make a report to government authorities of a reasonable suspicion of significant harm or risk of significant harm resulting from Child Abuse, Neglect, exposure to Family Violence and all cases of Sexual Abuse. Mandated reporters include:

- Medical practitioners;
- Nurses hospital and health;
- Teachers/education department staff; and
- Counsellors.

For the purposes of mandatory reporting at the RPC, the correct application of the reporting processes set down in this Protocol and Code fulfil the requirements of the GoN Mandatory Reporting Policy. The requirement to comply with the Mandatory Reporting Policy does not preclude a mandatory reporter, from making a report if they have concerns for the safety and wellbeing of a child that do not fall within mandatory reporting requirements.

#### 12.1 What should be reported?

Any knowledge or suspicion of any risk, act or omission that negatively impacts on the physical, psychological or emotional wellbeing or development of a child <u>must be reported</u>. This includes, but is not limited to, sexual, physical or emotional abuse, neglect, exploitation of a child, or exposure of a child to violence, including family violence, bullying and self-harm.

#### **Examples of what should be reported:**

[Note: this is not an exhaustive list.]

- Knowledge or suspicion that a child is being Harmed or is at risk of being Harmed by any person within the RPC environment, including their parent or guardian, another resident (including by another child), a visitor or member of RPC personnel;
- Knowledge or suspicion that a child's parent or guardian is at risk of, or is, engaging in family violence in the presence of a child;
- Knowledge or suspicion that that a child is not receiving necessary medical care;
- Knowledge or suspicion that a child is being physically or emotionally neglected or is not being
  provided with adequate supervision, either by the child's parent or guardian or relevant RPC
  personnel;
- Knowledge or suspicion that a child has suicidal intent or is self-harming;
- Knowledge or suspicion of ill-treatment of a child by any person within the RPC environment;
- Knowledge or suspicion of inappropriate punishment of a child by any person within the RPC environment;
- Knowledge or suspicion of any sexual or similar activity in relation to a child, including (but not limited to) inappropriate touching, sexualised behaviour and comments towards a child, exposure to inappropriate materials such as pornography and/or grooming of a child for sexual activity;
- Knowledge or suspicion of a child exhibiting sexualised behaviours;
- Knowledge or suspicion of the possession, production or dissemination of child pornography
  or material that depicts children as victims of torture by any person within the RPC
  environment;
- Knowledge or suspicion a child has witnessed a traumatic event such as a disturbance or food and fluid refusal strike;
- Knowledge or suspicion that a child's parent or guardian is unable to carry out their parental responsibilities due to a mental or physical health issue;
- Knowledge or suspicion of inappropriate behaviour between a member of RPC personnel and a child:
- Knowledge or suspicion that an unborn child may be at risk of Harm after birth; and
- Any other concern for the safeguarding or wellbeing of a child.

Any matters of the nature above must be reported even if:

- they are historical irrespective of where and when these arose;
- the child concerned may have "consented" to the alleged conduct; and/or
- there is insufficient detail about either the alleged person of interest or the affected child.

#### 12.2 Initial Steps

Depending on the circumstances, it may be necessary to contact security personnel to bring a situation giving rise to a reportable concern under control. If this is the case, security personnel must be alerted **immediately**.

To the extent possible all reasonable action must be taken to ensure any immediate risk to a child is mitigated and the child placed in a safe supervised environment.

If a child or other person requires (or may require) medical attention, the Health Services Provider must be **immediately** alerted in order to provide medical treatment. The medical examination and treatment of a child is a decision for the child's parent or guardian, or should it be necessary, a decision made with the authority of the GoN.

#### 12.3 Who can report?

#### Anyone at the RPC can report a concern.

There is no expectation that RPC personnel need to be child safeguarding and wellbeing experts or make a conclusive judgement about a situation before making a report.

If RPC personnel have any concerns for the safety of a child, or have knowledge of an incident occurring, then they are required to report this concern (to their line manager or the Child and Family Coordinator or their delegate).

#### 12.4 How to report?

<u>Child safeguarding and wellbeing concerns must be reported immediately</u>. No member of RPC personnel or any other person should attempt to undertake their own investigation before reporting the matter.

- Any reportable matter must be immediately verbally reported to the reporter's line manager, the Child and Family Coordinator (or their delegate) or if either of those persons are off duty, a member of Security personnel nominated by the Child and Family Coordinator (or their delegate) and approved by the ABF.
- If the incident is reported to:
  - o a line manager; or
  - o nominated Security personnel,

they must report the matter to the Child and Family Coordinator (or their delegate) as soon as is practicable. This process ensures the Child and Family Coordinator (or their delegate) is responsible for determining how a reportable concern is to be dealt with in a timely manner regardless of the risk rating.

- The reportable matter must also be reported in accordance with the Regional Processing Centre Guideline – Incident Management – Incident Reporting and any other relevant incident reporting guidelines that apply to the reporter (e.g. internal service provider protocols) and the advice of the Child and Family Coordinator (or their delegate). What constitutes a Minor, Major or Critical Incident is set down in the Regional Processing Centre Guideline – Incident Management – Incident Reporting.
- Generally speaking:
  - o all Minor, Major and Critical Incidents involving children must be the subject of an incident report; and
  - o all other concerns involving children must be notified to the relevant child's case manager, who will record it in the child's case notes, unless the Child and Family Coordinator (or their delegate) advises that an incident report must be made (for example, if there is a pattern of similar concerns).
- The RPC Control Room manages all security requirements including the recording of incidents
  then reports to the appropriate internal and external key stakeholders. Any incident reports
  relating to children and families received by the RPC Control Room must be immediately
  forwarded to the designated email address of the Child and Family Coordinator (or their
  delegate) regardless of the categorisation.
- The Child and Family Coordinator (or their delegate) must review any report relating to a reasonable suspicion of harm or risk of harm within 12 hours of the report being received in order to determine the appropriate next steps in relation to that report, e.g. whether the matter needs to be referred to the NCPU or NPF for investigation, reported to the ABF, referred to the Refugee Services Service Provider, etc. This will consider both risk and

protective factors including a situation where one parent is able and willing to provide the necessary safeguarding and wellbeing with or without additional supports.

- If the Child and Family Coordinator (or their delegate) determines the matter should be reported to the NCPU or NPF, he or she must make that report within 12 hours for asylum seeker children.<sup>1</sup> The Child and Family Coordinator (or their delegate) must also notify the ABF that a report has been made via email to the ABF Operations Lead. Referrals to NPF should be made via email to the GoN Operations Manager.
- Regardless of whether the matter is referred to the NCPU or NPF, the Child and Family Coordinator (or their delegate) must complete the Child Safeguarding and Wellbeing Triage Assessment Tool in respect of each incident report received for asylum seeker children in relation to a reasonable suspicion of harm or risk of harm in accordance with Section 14 below in order to determine what next steps should be taken to ensure the immediate safeguarding and wellbeing of the child. Reports of harm that do not involve the actions or omissions of a parent are not required under the Protocol and Code.

#### 12.5 What should be reported to the NCPU?

Generally speaking, a report is made to the NCPU where there is reason to suspect a child in the RPC is experiencing significant Harm, or is at risk of experiencing significant Harm, regardless of whether an actual or suspected criminal offence has been committed.

#### Examples of what should be reported:

[Note: this is not an exhaustive list.]

- Any report or concern that a child has been significantly Harmed or is at risk of significant
  Harm as a consequence of sexual, physical or emotional abuse, neglect, exploitation or
  exposure to family violence;
- Any report or concern that a parent or guardian has relinquished care of their child;
- Any allegations of Sexual Abuse against a child; and
- Any matter in relation to which a child's parent or guardian does not provide consent to the conduct of a Child Safeguarding and Wellbeing Assessment where that is required under the Protocol and Code.

#### 12.6 What should be reported to the NPF?

- Certain matters must also be reported to the NPF. These include: Allegations relating to suspected or actual Sexual Abuse of a child.
- Allegations relating to a suspected or actual criminal offence against a child (under the laws of Nauru) or otherwise requiring police investigation.
- Family violence.

#### **12.7** Content of the Report

The report of concerns will include information taken from the summary report of the Child Safeguarding and Wellbeing Triage Assessment Tool and include the following information:

- Reporter's details including name, role, agency and contact details;
- Subject child/ren's name, date of birth or age, gender, culture, language and address;

<sup>&</sup>lt;sup>1</sup> The Queensland Child Protection Guide (CPG) is a decision support guide developed by the Children's Research Center, USA, to assist professionals to report or refer families in a timely manner. The Online Child Protection Guide is reproduced with the kind permission of the QLD Dept of Communities, Child Safety and Disability Services.

- Parent/s, guardian/s and person of interest's details including name, date of birth or age, gender, culture, language and address;
- Details of all other persons in the household including other adults, siblings and children;
- Reasons for suspecting the child/ren have been significantly harmed or is at risk of significant harm;
- Description of harm including what happened and who was involved;
- When the incident/s of significant harm or risk of harm occurred;
- Where the incident/s of significant harm or risk of harm occurred;
- Child/ren's presentation including appearance and behaviour; and
- Parent/s presentation and response.



#### 13 SUMMARY OF REPORTING REQUIREMENTS

If you are aware of or witness any Harm to a child, or have any concerns relating to the safeguarding or wellbeing of a child you are required to:

#### **CONTACT**

- Where it is safe to do so, bring the situation under control.
- If a child's immediate safety is at risk, contact Security.
- If a child is injured, contact the Health Services Provider.
- Contact the child's parents when it is safe to do so.

#### **VERBALLY REPORT THE MATTER**

- Make the report verbally to the Child and Family Coordinator (or their delegate), your line manager or a member of Security personnel.
- If a report is made to a line manager or nominated Security personnel, they must report the matter to the Child and Family Coordinator (or their delegate) as soon as practicable.

# COMPLETE AN INCIDENT REPORT FORM OR NOTIFY THE CHILD'S WELFARE OFFICER

- Once the report has been made verbally:
  - for incidents covered by the Regional Processing Centre Guideline – Incident Management – Incident Reporting, or if the Child and Family Coordinator (or their delegate) requests, complete and submit an incident report form in accordance with required timeframes; and
  - for all other concerns, notify the child's Welfare Officer so that they can record it in the relevant case notes.

#### **NEXT STEPS FOLLOW UP**

- All reports will be provided to the Child and Family Coordinator (or their delegate) at the designated email address.
- All reports where there is a child in need of protection or a suspected criminal offence referred to the NCPU and NPF.
- The Child and Family Coordinator (or their delegate) will conduct the Child Safeguarding and Wellbeing Triage Assessment Tool in respect of all reports received in relation to a reasonable suspicion of harm or risk of harm for asylum seeker children.
- The child will be supported throughout the process.

#### 14 CHILD SAFEGUARDING AND WELLBEING ASSESSMENTS

The Child Safeguarding and Wellbeing Triage Assessment Tool will be conducted in response to each incident report concerning a reasonable suspicion of harm or risk of harm received by the Child and Family Coordinator (or their delegate) in relation to asylum seeker children. This will determine next steps and may include the development of a written Safety Plan and Partnering for Safety Assessment.

The conduct of a Child Safeguarding and Wellbeing Assessment can be necessary to ensure the immediate safety of a child, or to establish whether there are multiple episodes of Child Abuse or Neglect in the child's life that could amount to cumulative Harm.

Where cumulative Harm is established, the case will be referred to the Nauru Division of Child Protection Services for investigation.

#### 14.1 Principles for the conduct of Child Safeguarding and Wellbeing Assessments

All Child Safeguarding and Wellbeing Assessments must be conducted in accordance with the following principles:

- All concerns raised must be taken seriously, handled professionally and with regard to the best interests of the child;
- An assessment is not an investigation;
- During the Child Safeguarding and Wellbeing Assessment process, the Child and Family Coordinator (or their delegate) will take a holistic approach and collaborate and engage with all relevant service providers and key stakeholders through dedicated case conferencing and collaborative review;
- The Child and Family Coordinator (or their delegate) will record any information provided by other relevant service providers and key stakeholders within 24 hours of receipt;
- Information about a child, parent, guardian or person of interest will be shared only to the extent necessary and in a way that protects and maintains their privacy;
- The rights, safeguarding and wellbeing of the child are of prime importance. Every effort will be made to protect the rights, safeguarding and wellbeing of the child throughout the assessment process; and
- Parents and guardians have the right to be treated with respect, be told about allegations of Harm [not including information about the identity of the reporter] and the outcome of assessments, and participate in decision making where appropriate to do so.

#### 14.2 The Conduct of Child Safeguarding and Wellbeing Assessments

The following steps must be followed when conducting a Child Safeguarding and Wellbeing Assessment:

- If a report is made to the NCPU, a Partnering for Safety Assessment will commence within 24 hours of the report being made and completed within 72 hours;
- All other child safeguarding and wellbeing concerns that do not meet the threshold for referral to the NCPU for a child protection investigation will be commenced within 5 days of the report being received and finalised within 14 days thereafter;
- If a child's parent or guardian does not provide their informed written consent for the child to be assessed, an assessment will be completed based on the available information. Depending on the circumstances, this may require a further report to the NCPU;
- Interim safeguarding and wellbeing measures will be implemented as required. Depending on the circumstances, these measures may include standing down RPC personnel, isolation of a

person of interest or engaging with the ABF and/or GoN in relation to the placement of a child and/or their family;

- All assessments will be conducted by the Child and Family Coordinator or their delegate for asylum seeker children and by the nominated representative from the Refugee Services Service Provider for refugee resident children;
- If a child wishes, an assessment can be conducted without their parent or guardian present, provided the parent or guardian gives consent. If requested by the child, parent or the ABF, the GWSP must provide an "Identified Support Person" to provide support at all child protection investigation interviews;
- If the Child and Family Coordinator (or their delegate) determines it is necessary to conduct
  an assessment without notifying the child's parent or guardian or having them present in
  order to protect the child's safety, the matter shall instead be reported to the NCPU for
  investigation;
- An accredited language interpreter must be made available for all assessments to ensure accuracy of interpreted information. Wherever possible, female children should be supported with the use of a female interpreter;
- Depending on the circumstances and the available information, the assessment can include
  case file reviews, including a review of the child's incident report history, behaviour concerns,
  referrals and any other relevant information, as well as interviews with any relevant children,
  family members, and other relevant parties to help determine what actions are necessary for
  the child's welfare (subject to the requirements set out above in respect of the consent of
  parents and guardians);
- The completed Child Safeguarding and Wellbeing Partnering for Safety Assessment Report will be provided to the GoN Operations Manager, ABF and relevant service providers and key stakeholders:
- The outcome of a Child Safeguarding and Wellbeing Partnering for Safety Assessment should be discussed with the child and the child's family, unless to do so compromises the child's safeguarding; and
- All Child Safeguarding and Wellbeing Partnering for Safety Assessment Reports will be securely filed within the GWSP's and/or Refugee Services Service Provider electronic filing system.

#### 14.3 Possible Outcomes

There are a number of possible outcomes of a Child Safeguarding and Wellbeing Assessment including:

- referral to NCPU for the conduct of a child protection investigation;
- referral to NPF for the conduct of a criminal investigation;
- referral to a Multi-stakeholder CAF Meeting or ICCC for review;
- referral to the Health Service Provider for medical and/or psychological treatment or support (for both children and their parents or guardians);
- provision of support to the family; and/or
- no further action required.

#### 15 SUPPORT FOR CHILDREN AND THEIR PARENTS AND/OR GUARDIANS

#### 15.1 Supporting Children Who Disclose Harm

- Listen to and support the child person.
- Reassure the child he or she did the right thing to disclose.
- Do not make promises you can't keep.
- Report the disclosure.

The following best practice communication strategies should be followed when responding to child disclosures of Child Abuse.

- ✓ Give the child your full attention;
- ✓ Maintain a calm appearance;
- ✓ Reassure the child that he or she did the right thing in making the disclosure;
- Accept the child will disclose only what is comfortable and recognise the bravery/strength
  of the child for talking about something that is difficult;
- ✓ Let the child take his or her time;
- ✓ Let the child use his or her own words;
- ✓ Avoid questioning the child on the matter unless necessary;
- ✓ Don't make promises you can't keep;
- ✓ Tell the child what you plan to do next;
- ✓ Do not confront the perpetrator;
- Maintain the child's usual activities, circumstances and environment, unless change is necessary to protect their safety, e.g. if they will be subject to any unacceptable risk, trauma, harassment or victimisation by remaining in the activities, circumstances or environment;
- ✓ If appropriate, consult with the child's parent or guardian as to whether it is appropriate to communicate with the child as to the progress of the matter or offer the child additional support, e.g. counselling; and
- Provide the child with a contact person who they can ask questions that might arise.

For further advice and support regarding managing disclosures, RPC personnel should consult their supervisor or the Child and Family Coordinator.

#### 15.2 Support at NCPU or NPF Child Interviews

The Child and Family Coordinator (or their delegate) must be available to support an asylum seeker child in the event a request is received from the child, the child's parent or guardian or the NCPU or NPF. The Child and Family Coordinator Is required to explain, in child friendly language, the child's alternative option to be supported during formal child protection interviews by an "Identified Support Person". The Identified Support Person's role is to provide a supportive presence to the child and to ensure all child protection investigation interviews are conducted in a manner and form that is fair, appropriate and reasonable.

If a request is made, the Child and Family Coordinator (or their delegate) or Identified Support Person must:

- Take steps to build a rapport with the child, with the intention of being able to reassure and assist them when appropriate;
- Explain to the child that they will be accompanied and supported during the interview;

- Ensure an accredited language interpreter is present for the interview;
- Ensure the interviewer has explained the purpose of the interview and this is understood by the child;
- Maintain presence throughout the interview;
- Be attentive to non-verbal cues;
- Include regular toilet and food breaks;
- Draw attention to the interviewer any concerns about the emotional and physical state of the child during the interview process;
- Be attentive to signs that the child may benefit from trauma counselling and possible referral;
- Report any concerns regarding the process to ABF through the correct communication protocols;
- Maintain comprehensive records of all work that they perform, including by updating the child's Individual Management Plan; and
- Assist the child in managing any distress associated with being interviewed and to provide comfort and support to the child.

The Child and Family Coordinator (or their delegate) or Identified Support Person must not participate in the interview (e.g. answer questions) or directly or indirectly influence the interview.

#### 15.3 Supports for Parents and Guardians

If an asylum seeker child's parent or guardian has been informed of a concern relating to their child, the Child and Family Coordinator (or their delegate) must work with the ABF to:

- Ensure the parent or guardian is kept informed of the steps being taken in response to the matter, unless that the GoN, NCPU, NPF or ABF has advised against that course;
- Provide the parent or guardian with an Identified Support Person, with who they feel comfortable, to support them before, during and after a child protection interview;
- Consider offering the parent or guardian other support, e.g. counselling through the Health Services Provider;
- Seek the parent or guardian's consent before gathering further information from the child in relation to the matter; and
- To the extent possible, take steps to prevent the parent or guardian being subject to any harassment or victimisation, particularly if they raised the matter.

#### 16 EMERGENCY ALTERNATIVE CARE

Wherever possible taking into account questions of safety and other than in the case of UAMs, a child's family has the primary responsibility for the child's upbringing, protection and development.

However, in some circumstances, alternative arrangements may be necessary for the care of the child.

Provision of alternative care for a child can only occur:

- · after all other options have been exhausted;
- it is an emergency;
- if it is assessed safe to provide such care; to include an assessment of the potential carer's relationship with the child and family and the carer's capacity and willing to provide appropriate care; and
- with their parent or guardian's written consent.

In all other situations, the ABF must notify the GoN and the Nauru Division of Child Protection Services, who are responsible for ensuring the child is safe.

#### 16.1 Situations where emergency alternative care may need to be provided

Emergency alternative care may need to be provided to a child in the following scenarios:

- The child's parent or guardian is having emergency medical treatment.
- The child's parent or guardian is suffering an acute physical or mental health episode and is unable to care for the child or poses a risk to the child.
- The child's parent or guardian has formally relinquished care of child and negotiations with parent or guardian has broken down and there is no other parent or guardian able and willing to care for the child.
- The child's situation has been assessed as high risk for other reasons and the child is not safe to remain in their parent or guardian's care including where the parent or guardian is assessed not able or willing to protect the child from a person of interest (resident at RPC).

Any decision to provide emergency care arrangements for children must be consistent with processes outlined in this document and with reference to the Child Safeguarding and Wellbeing Core Principles set out in section 6 above.

#### 16.2 The Child Placement Principle

The preferred placement decision for emergency alternative care will have considered the benefit to children of being cared for within their own families and communities by having reference to the following hierarchy:

- 1. Child is placed with a nominated family member;
- 2. Child is placed with a family nominated carer within the same cultural group;
- 3. Child is placed with a family nominated carer from a different culture; or
- 4. Where an asylum seeker child cannot be placed with a suitable family nominated carer, the Child will be placed by the Child and Family Coordinator (or their delegate) at the direction of the GoN.

#### 16.3 Implementation of emergency alternative care

- Any concern that an asylum seeker child requires emergency alternative care must be immediately verbally notified to the Child and Family Coordinator (or their delegate);
- The Child and Family Coordinator (or their delegate) will assess the need and provide a report
  to the ABF for an approved emergency care arrangement to be enacted, including nomination
  of an alternative family to provide emergency care or direct care provided by named service
  provider personnel. The report must also indicate whether the emergency alternative care
  arrangement has been discussed with the child's parent or guardian, and the outcome of that
  discussion;
- The ABF must then convene a Resident Placement and Preventative Meeting [PPM] (see section 10 above) for the purposes of arranging, reviewing and transitioning a child from emergency alternative care;
- Any decisions that are made at the PPM must be discussed with the child and their parent or guardian. The child and their parent or guardian will be given the opportunity to provide input on the decision and the conditions of the emergency alternative care placement (such as duration, visitation, and identification of a possible alternative carer);
- Once a decision is reached, advice must be provided to the child's parent or guardian in writing, and a parental/guardian consent form must be signed. If parental or guardian consent cannot be obtained, the matter must be immediately referred to the GoN and NCPU;
- Once parental/guardian consent form is received, the ABF must provide that to the GoN. The
  GoN may then direct that emergency alternative care be provided to the child, who will
  provide the care and the terms upon which that care is provided. The GWSP will not provide
  for or arrange any care for asylum seeker children without the prior written approval of the
  GoN and ABF;
- The proposed carer(s) must provide their consent for the conduct of a suitability assessment
  that will include a case file review to establish if there are any past concerns/risks in respect
  to the care of children, an interview to determine willingness and capacity and a review of the
  physical safety of the premises at which the child would be located;
- Where no family or alternative carer is identified, the Child and Family Coordinator (or their delegate) will make suitable accommodation arrangements and notify NCPU;
- The GWSP will work in collaboration with ABF, GoN and other key stakeholders to arrange and support appropriate access for children and their families during the period of emergency alternative care;
- Emergency alternative care can only be provided for **up to 24 hours**. Any care requirements beyond 24 hours are the responsibility of the GoN;
- A multi-stakeholder risk assessment may be undertaken before a child in emergency alternative care is returned to the care of their parent or guardian. Where possible, the child and parent or guardian will have the opportunity to participate in decision making;
- If an asylum seeker child in an emergency care arrangement is subsequently considered to be 'unsafe' to return to their parent's care, a report of the concerns will be made by the Child and Family Coordinator (or their delegate) and provided to the ABF. The ABF will then provide this report to the GoN; and
- These procedures do not affect a private supervision and/or care arrangement made by a child's parent or guardian for a child in the absence of any safeguarding and wellbeing concerns.
- The Refugee Services Service Provider will provide welfare services to refugee children requiring emergency alternative care at the RPC.



#### Annexure 1 - Code of Conduct

,	(i	nsert	nam	e) have	read	and	under	stood	the	Child
Safeguarding and Wellbeing Protocol and Coo	de of Co	nduct,	and	l agree t	that wh	ile I a	am em	ployed	/eng	gaged
by	(insert	name	of	service	provid	er) a	t the	Nauru	Reg	iona
Processing Centre (RPC), I will:										

#### Compliance

- Perform my duties in accordance with all relevant laws, regulations, rules and the Child Safeguarding and Wellbeing Protocol and Code of Conduct;
- Immediately report concerns or allegations about the safeguarding or wellbeing of a child, or breach of the Child Safeguarding and Wellbeing Protocol and Code of Conduct, in accordance with this Protocol and Code, and acknowledge these matters may be reportable to the NPF and/or NCPU:
- Promote a culture of reporting concerns for child safeguarding and wellbeing within the RPC;
- Comply with the laws of Nauru;
- Collect, store and protect children and families' confidential information in accordance with privacy laws and RPC Policies and Procedures and disclose information only in so far as this is required by law e.g. where the safety and well-being of a child is at risk;
- Maintain the appropriate knowledge, practice and relevant clearances and checks to work alongside or with children;
- Exercise a standard of conduct that does not compromise my eligibility to the required clearances for working with children;
- Immediately disclose all charges, convictions and other outcomes of an offence which occurred before or occurs during my employment or engagement that relate to Child Exploitation, Abuse or Neglect;
- Speak with my manager about any concerns I have of my involvement in any situation where my words, actions or behaviour may be misinterpreted; and
- Comply and cooperate with police and child protection investigation processes and any internal investigation processes of my employer.

#### Interaction with children and families

- Be a positive role model for children at the RPC;
- Provide an inclusive and safe environment for all children and their parents/guardians;
- Always treat children in an equal and consistent way, with care, compassion, dignity and respect, even if they behave in a way that is difficult or challenging;
- Always use appropriate, respectful language when communicating with children and their families;
- Respect the fact each child's family has the primary responsibility for the child's upbringing, protection and development;
- Encourage children to raise concerns and provide a safe environment and opportunities for them to do so;
- Engage children and families in a spirit of partnership that is culturally sensitive and nondiscriminatory;

#### Supervision of children

• Diligently supervise all children, and arrange for appropriate additional supervision, including on excursions where deemed appropriate;

- Ensure that children are adequately protected from potential dangers such as motor vehicles and outdoor risks such as sun exposure and unsafe bodies of water;
- Ensure that children under my supervision are not placed at risk as a consequence of unsupervised or prolonged contact with stranger;
- Ensure a colleague is present or in sight when conducting work with children including injury or behavioural management;
- Be punctual in attending to my appointments with children and I will always ensure I advise my supervisor if I am unable to attend my appointments with children; and
- Always take care in planning activities for children to make sure they are appropriate given the children's age and other needs.

#### I will not:

#### Contact with children

- Engage in improper or inappropriate contact with children and families;
- Physically abuse a child or use physical or humiliating punishment or condone or participate in behaviour which is illegal or abusive;
- Make physical contact with a child against their will, except as part of an approved physical restraint or obstruction/prevention procedure in order to protect the child from Harm;
- Engage in unnecessary and unauthorised physical contact with a child;
- Do things for children of a personal nature that they can do for themselves such as toileting or changing their clothes;
- Sleep in close proximity to children that I am working with or in contact with unless it is absolutely necessary and my manager has been fully informed, and another adult is present;
- Take a child outside of the RPC without permission from a parent/guardian and designated authority;
- Offer, or agree to access or purchase the likes of tobacco, alcohol, illicit substances, weapons or pornographic content or materials for children;
- Use language and behaviour that is disrespectful and inappropriate and which intimidates, insults or humiliates, contain threats veiled or actual, or is sexually suggestive or explicit; or
- Administer any medication to any child without their parent or guardian's consent.

#### Exploitation of children

- Hire children for domestic or other labour;
- Access pornographic websites and child Exploitation materials through my employment, upload, download, and distribute images, text or materials which could be seen as offensive, discriminatory or sexually explicit;
- Exchange personal information, take or display photographs, engage in social media or offer money, favours or gifts to children in connection with my employment as this may be construed as an inducement or grooming; or
- Speak with or engage with the media about any child without the consent of the parent/guardian, the relevant service provider and relevant host government officials.

I acknowledge that any breach of this Code of Conduct may result in disciplinary action, including immediate suspension from service pending an investigation or criminal investigation, or criminal charges and prosecution.

#### **Working with Children Statement**

I confirm that I have read and understood the Child Safeguarding and Wellbeing Protocol and Code of Conduct. I agree to comply with the Protocol and Code, and in particular requirements in respect of reporting. I understand that a breach of the Code of Conduct may provide grounds for my engagement or employment at the RPC to be terminated. I also understand that an action that breaches of the Code of Conduct may result in criminal prosecution.

I confirm my willingness to participate in training modules on child safeguarding and wellbeing.

Full Name:	 
Position and Organisation:	
Signed:	
Date:/	

A copy of this Statement must be kept on file by the relevant service provider.

#### Annexure 2 – Service Provider Record Keeping Requirements

To assist with any future queries, assessments or investigations, detailed and up-to-date records relating to children and child safeguarding issues are to be retained by each service provider for a minimum period of seven years or longer as specified by ABF.

#### Personnel records

All service providers must maintain a written register of all personnel who have been employed or engaged in child-related work.

The register must be current and available to be audited each year and, as a minimum, record the following information:

Clearance and police check information

- Signed Declaration of Criminal Record;
- Working with children clearance (WWCC);
- Type of clearance sought or issued (e.g. WWCC, police or criminal history check) and relevant jurisdiction;
- Date of application or issue;
- Record of issue including date, expiry and registration number;
- Renewal date;
- Change in the status of a person's relevant clearance information;
- Advice to the relevant authority of a change in the status of a person's police information and date this was provided;
- Suspension or cancellation status of the clearance if applicable;
- Date a person ceased to be employed in child-related employment/activity; and
- Changes to a person's personal information

Where a person is required to hold a WWCC as a requirement of their employment or engagement, the service provider must maintain a written record of the WWCC details and proof of verification.

A person nominated by each service provider shall be responsible for receipt of all correspondence including notifications and verification records from the relevant WWCC authority.

#### Recruitment documents

- CVs or resumes;
- Notes of interviews;
- References received or notes of reference checks;
- Employment agreements;
- Contractor agreements;
- Volunteer agreements; and
- Correspondence or other documents relating to disciplinary matters

#### Training documents

- Records of attendance at child safeguarding and wellbeing training and induction; and
- Certificates of completion of training

#### Records relating to children

In addition to the ordinary records required to be kept in relation to residents at the RPC, all service providers must keep all records relating to children to whom they provide services, including:

- Each child's name and date of birth;
- Any consent forms signed by the child's parent or guardian;
- Details of any services provided to the child (i.e. activities, medical procedures);
- The names of the RPC personnel who provided those services; and
- Records of all attendances and excursions and other movements of children.

#### **Reporting records**

- All incident reports relating to children;
- Details of all verbal reports relating to children, including:
  - o the person who raised the matter
  - date the matter was raised
  - o the name of the alleged victim and/or perpetrator
  - o brief details of the matter
  - o the date the matter was notified to the ABF, if applicable
  - o the date the matter was notified to the NPF and/or NCPU, if applicable
- Copies of all reports made to the ABF, NPF and/or NCPU; and
- Correspondence with any party relating to the matter.

#### Other records

- All documents relating to Child Safeguarding and Wellbeing Assessments; and
- All documents relating to any internal HR investigation of misconduct in relation to a child.

#### Annexure 3 – Recruitment and Selection Process

#### Recruitment

- ✓ All advertised positions shall include a statement about the Child Safeguarding and Wellbeing Policy and Code of Conduct and affirm the commitment to the safeguarding and wellbeing of children and to treat them with respect at all times.
- ✓ All child-related positions, current and to be recruited, shall be identified at the time of being advertised and documented by each service provider's human resources team.
- ✓ All child-related positions advertised shall clearly state the requirement to disclose any information relevant to an applicant's eligibility to engage in work involving children.
- ✓ All child-related positions advertised shall clearly state the requirement for a current Working with Children Check from the relevant authority or the closest equivalent, including relevant police checks, prior to commencing child-related work.
- ✓ All child-related positions advertised shall clearly state the nature and the environment of the service being provided to children and any specific qualifications, skills and experience and relevant to the role.
- ✓ All child-related positions advertised shall reference the requirement to be bound by the Child Safeguarding and Wellbeing Protocol and Code of Conduct.

#### Selection

- ✓ Interviews for all child-related positions shall address the applicant's suitability for the position having reference to their qualifications, skills and experience in working with children.
- ✓ Checks shall be conducted with a minimum of two referees to understand how the applicant relates to children, and to identify any issues that may have arisen previously, including any disciplinary action. At least one of these referees must be the applicant's most recent line manager.

#### **Recommended Interview Questions**

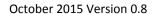
- Is the applicant willing to sign the Working with Children Code of Conduct?
- Why did the applicant decide to work with children?
- What is the applicant's most recent experience working with children?
- Has the applicant ever reported a matter concerning a colleague or supervisor? How did they handle it?
- If the applicant was aware of a child safeguarding or wellbeing concern, how would they respond?
- Has the applicant ever been subject to an investigation in relation to inappropriate conduct towards a child?
- Why did the applicant leave their previous employment?
- Scenario questions:
  - A child has become quite friendly with the applicant. The child approaches the applicant and asks them if they can tell a secret. What would the applicant do in this scenario?
  - Two children are pushing and shoving each other. How does the applicant handle this situation?
  - A number of children are running around unsupervised in the kitchen area and helping themselves to food. What would the applicant do to manage this situation?

Questions should be structured to elicit the following from the applicant:

- Attitude and values in regard to children;
- Motivation for wanting to work with children residing [if relevant]; and
- Illustrations of the applicants past behaviour [provides an indication of future behaviour]

#### **Recommended Reference Check Questions**

- What is referee's relationship with the applicant?
- Has the referee managed/supervised the applicant directly? How did the applicant respond to direction/feedback?
- Explain the nature of the position to the referee and the work they will be doing that places them in direct contact with children.
- Enquire about the applicant's work with children.
- Has the referee directly observed the applicant working with children?
- Enquire if the referee had any concerns in relation to the applicant's work with children.
- Ask the referee to describe the applicant's ability to work with and relate to others.
- Ask the referee is they would employ this person again.
- Enquire whether the applicant has been the subject of an employer disciplinary process.



#### Annexure 4 - Declaration of Criminal Record

#### **Declaration of Criminal Record Form**

This form should be supplied to all RPC personnel with their contract and collected prior to the new staff member commencing work

at the RPC. This form **DOES NOT** replace a Police Check and a full Police Check should be undertaken for all staff members.

Applicant's Name:		Role ap	oplying for:			
Have you ever been charged or col	nvicted of any offence?	Yes		N	lo	
If yes, please provide details:						
<b>Please note:</b> if you are applying fo infrequent), you are required to gi prosecutions.	_				•	
Have you ever been dismissed from employment or had any disciplinary action taken against you which may be related to work with a child/children under 18 years of age?				No		
If yes, please provide details:						
Have you received any formal reprimands, final warnings, or cautions from the police?				No		
If yes, please provide details:						
Is there any other information which may be relevant to your application e.g. pending prosecutions		Yes		No		
If yes, please provide details:						
Signature:					Date	:
Actioned by HR:					Date	:

#### Annexure 5 - Child Safeguarding and Wellbeing Reporting Pathways Flowchart

WHO CAN REPORT?

Anyone at the RPC can report a concern regarding child safeguarding and wellbeing, including children, parents, other residents, service provider personnel, key stakeholders, visitors etc.

#### WHAT TO REPORT?

Any knowledge or suspicion of any risk, act or omission that negatively impacts on the physical, psychological or emotional wellbeing or development of a child must be reported.

#### **INITIAL STEPS**

- Where it is safe to do so, bring the situation under control.
- If a child's immediate safety is at risk, contact Security.
- If a child is injured, contact the Health Services Provider.

#### **HOW TO REPORT?**

Make the report <u>verbally</u> to the Child and Family Coordinator, your line manager or a member of Security personnel.

If a report is made to a line manager or nominated Security personnel, they must\_report the matter to the Child and Family Coordinator as soon as practicable.

#### Once the report has been made verbally:

- for incidents covered by the Regional Processing Centre Guidelines –
   Incident Management Incident Reporting, or if the Child and Family
   Coordinator requests, complete and submit an incident report form in accordance with usual timeframes; and
- for all other concerns, notify the child's case manager so that they can record it in the child's case notes.

All incident reports must be immediately forwarded to designated email address of the GWSP regardless of the categorisation.

# WHAT WILL HAPPEN?

- The Child and Family Coordinator (or their delegate) must review any report relating to a reasonable suspicion of harm or risk of harm to asylum seeker children within 12 hours of the report being received to determine the appropriate next steps in relation to that report.
- If the Child and Family Coordinator (or their delegate) determines the matter should be reported to the NCPU and/or NPF, he or she must make that report within 12 hours of making the determination. The Child and Family Coordinator must also notify the ABF and GoN that a report has been made.
- The Child and Family Coordinator must then complete the Child Safeguarding and Wellbeing Triage Assessment Tool in accordance with the "Assessment Pathways" flowchart.



**Emergency Placement <24 hours with parental consent.** 

Referral to NCPU for child protection investigation and NPF for criminal investigation.

Internal HR investigation where inappropriate behaviour by RPC personnel is identified.

#### **Annexure 6 - Regional Processing Centre Incident Report Form**

NRPC				WORS Ref:						
INNEC					Control Ref:				TRANSFIEL	
Incident or Information Report					Related IR Ref:				AMPLE	
	(Admin Use Only)			· •	Other Ref:					
	_	e Only)						_		
Report Completed By:	Print:			8lgn:	(Signature)		Time:	Da	te:	
Incident Date:			Servi	ice Pro	vider:					
Incident Time:										
Incident Type:	Assa	ult	Risk	Rating	: (Please Circle >>	Information	Minor	Major	Critical	
Stakeholder Involved:	Yes/	No	Mino	r Invol	ved:	Yes / No		•		
Primary Location:						•				
Location Description:										
Team Leader Reviewed:	Print	( Print Name)		8lgn:	(Signature)		Time:	Da	te:	
Supervisor Reviewed:	Print:	( Print Name)		8lgn:	(Signature)		Time:	Da	Date:	
Control Reviewed:	Print:	(Print Name)		8lgn:	(Signature)		Time:	Da	te:	
Ensure Report Includes: Who:	Who was	Involved What: What	happene	d Why:	Why did it happe	n When: Whe	n did it hap	en How: H	ow did it	
happen Actions: Actions you un	DEFILOOR P	tesolutions. What did	you do to	resoive	ine incident Nou	iicauons. wn	o aia you n	ouly about t	ne incident	
Action Taken: 1.										
2.										
3.										
4.										
5.										
Persons Involved										
Name:		Service Prov	rider/As	vlum S	eeker ID	Involvem	ont #	Ol, Vietim, W	Manage 1	
Haine.		oci ilioci i ilio	nuciii c	y iuiii o	cener io	illvolveill	ent (	OI, VICUM, W	utessj	

NOTE: Threat self-harm & Assault incidents involving minors (under 18) is classified as a Major incident.

Actual self-harm incidents involving minors (under 18) is classified as a Critical incident.

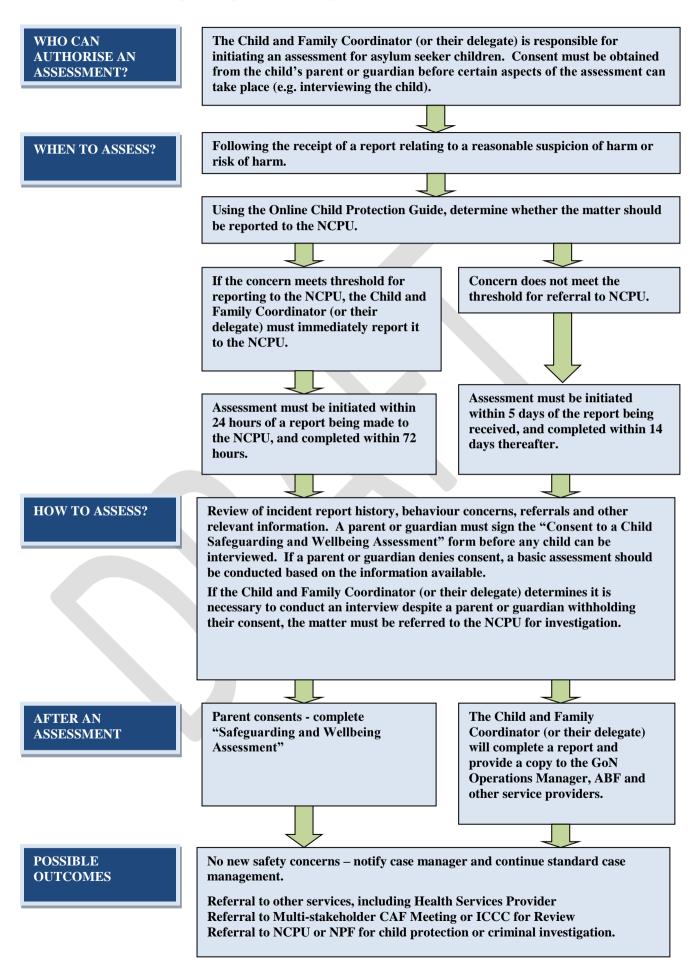
Incidences involving minors (under 18) please include their AGE.

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Page 1 of 2

#### Annexure 7 – Child Safeguarding and Wellbeing Assessment Pathway



#### Annexure 8 – Assessment Consent Form

#### Consent to assessment:

I.

I give my consent for the Garrison and Welfare Services Provider (GWSP) to conduct an assessment with me, my children, family and/or any other relevant persons in relation to the welfare of my child/ren. I understand the purpose of the assessment is to decide the actions that need to be taken to achieve the best outcomes for my child/ren's welfare, and may also be used to make referrals to other service providers and agencies.

#### Consent to Release Personal Information:

I understand that the GWSP may share the confidential, personal information of me and/or my child only to the extent necessary.

I understand that there may be circumstances when confidential information needs to be shared with other agencies and services, for example if a child's safety is at risk and/or if the GWSP needs to make a report to the Nauru Police Force. I understand that the GWSP will share this confidential, personal information in a manner that preserves the dignity of me and my child/ren.

I understand the conditions and agree to my participation and my child/ren's participation in the assessment and to the GWSP exchanging our confidential, persona information with other agencies, and service providers. It has been explained to me the GWSP needs to share this information in order to provide welfare services to me and my family.

and

· ————————————————————————————————————	
	parent/s of
	and;
	and;
acknowledge that my/our confidential, pers	Safeguarding and Wellbeing Assessment and sonal information may be shared with ABF, GoN olders involved in the provision of services at the
Date	
Witnessed by	of:
Name of Organisation	/20
Interpreter required ( Y / N )	
If yes, Interpreter name	
Interpreter signature	

#### Annexure 9 – Emergency Placement Pathway Flowchart

WHO CAN PLACE A CHILD?

The Child and Family Coordinator (or their delegate) will assess the need and provide a report to the ABF for an approved emergency care arrangement to be enacted for asylum seeker children.

The GWSP will not provide or authorise any care without the approval of the GoN and ABF.

WHEN CAN A CHILD BE PROVIDED WITH EMERGENCY ALTERNATIVE CARE? A child can only be provided with emergency alternative care:

- after all other options have been exhausted;
- it is an emergency;
- if it is safe to provide such care;
- with their parent or guardian's written consent; and
- for a period of 24 hours or less.

<u>In all other situations, the ABF must notify the GoN and the Nauru Division of Child</u> Protection Services, who are responsible for ensuring the child is safe.

Emergency alternative care may need to be provided to a child in the following scenarios:

- The child's parent or guardian is having emergency medical treatment; or
- The child's parent or guardian is suffering an acute health or mental health episode such that they are incapacitated or pose a risk to the child; or
- The child's parent or guardian has formally relinquished care of the child and negotiations with the parent or guardian have broken down and there is no other parent assessed to be able and willing; or
- The child's situation has been assessed as high risk for other reasons; and
- The child is not safe remaining in their parent[s] or guardian's care.

HOW IS
EMERGENCY
ALTERVATIVE
CARE
IMPLEMENTED

- The Child and Family Coordinator (or their delegate) assesses the need and provides a report to the ABF for an approved emergency care arrangement.
- The ABF must then convene a Resident Placement and Preventative Meeting (PPM).
- Any decisions made at the PPM must be discussed with the child and their parent or guardian and their input sought.
- Once a final decision is made, advice must be provided to the child's parent or guardian in writing and the parent or guardian must sign a "Consent to Emergency Alternative Care" form.
- Any proposed carer(s) must provide their consent for the conduct of a suitability assessment.
- The ABF must provide the signed consent form to the GoN.
- The GoN will then direct that emergency alternative care be provided to the child, who will provide the care and the terms upon which the care is provided.

WHAT WILL HAPPEN?

- The GWSP will work in collaboration with ABF, GoN and other service providers and key stakeholders to arrange and support appropriate access for children and their families during the period of emergency alternative care.
- The Refugee Services Service Provider will provide welfare services to refugee children requiring emergency alternative care at the RPC.
- Child placed for maximum of 24 hours.

POSSIBLE OUTCOMES

- Assessed safe for child to return to parent's care within 24 hours.
- Assessed unsafe concerns reported to NCPU.
- Alternative care arrangements beyond 24 hours are the responsibility of the GoN.

#### Annexure 10 – Emergency Care Consent Form

Emergency alternative care is provided in emergency situations where all other options have been exhausted. For example, emergency alternative care may need to be provided to an asylum seeker child where their parent or guardian is having emergency medical treatment or suffering an acute health or mental health episode, or if their parent or guardian has formally relinquished care of the child. The written consent of the child's parent or guardian is essential before emergency alternative care can be implemented. Emergency alternative care can only be implemented for up to 24 hours. Alternative care arrangements beyond 24 hours are the responsibility of the GoN.

#### Consent to emergency alternative care:

I give my consent for the Garrison and Welfare Services Provider (GWSP) to place my child/ren in emergency alternative care for up to 24 hours.

#### **Consent to Release Personal Information & Emergency Placement:**

I understand that the GWSP may share the confidential, personal information of me and/or my child only to the extent necessary.

I understand that there may be circumstances when confidential information needs to be shared with other agencies and services, for example if a child's safety is at risk and/or if the GWSP needs to make a report to the Nauru Police Force. I understand that the GWSP will share this confidential, personal information in a manner that preserves the dignity of me and my child/ren.

I understand the conditions and agree to the GWSP implementing emergency alternative care for my child/ren and exchanging our information with the family nominated carer/s, family members, other agencies and service providers to support this emergency arrangement. It has been explained to me the GWSP needs to share this information in order to provide welfare services to me and my family. If a placement is required for a period exceeding 24 hours, a report of the circumstances will be made to the Nauru Division of Child Protection Services.

#### **Family Nominated Carer:**

#### Parent/s:

I nominate the following nominee[s] to care for my child/ren for a period not exceeding 24 hours. I understand that I retain the powers, rights and responsibilities of a parent to make decisions concerning my child/ren's care, wellbeing and development:

 and;
 ,

I/we agree to the conditions of the emergency alternative care arrangement and that my/our confidential, personal information may be shared with the nominee[s], other family members, agencies and service providers involved in supporting the emergency alternative care arrangement.

Date/20	
Witnessed by	of:
Name of Organisation	/20
Family Nominated Carer/s:	
	for a period not exceeding 24 hours. I understand this is my/our suitability and living conditions and share es and services.
	and;
	and;
	be shared with other family members, agencies and the emergency alternative care arrangement.
Witnessed by	of:
Name of Organisation	/20
Nomination of GWSP as Carer:	
period not exceeding 24 hours. I underst	Pty Limited, the GWSP, to care for my child/ren for a tand I retain the powers, rights and responsibilities of my child/ren's care, wellbeing and development and;
Ι,	and
	parent/s of
	and;
agree to the conditions of the emerge confidential, personal information may	ency alternative care arrangement and that my/our be shared with other family members, agencies and the emergency alternative care arrangement.
Date/20	

Witnessed by	of:
Name of Organisation	Date/20
Interpreter required ( Y /	N )
If yes, Interpreter name	
Interpreter signature	

