

**POLICY APPLIES TO:**

All Mercy Hospital Staff.

Credentialed Specialists, Contractors, patients and visitors will be supported in meeting policy requirements.

**RELATED STANDARDS:**

- New Zealand Standard 8006:2006 Screening, Risk assessment and Intervention for Family Violence including Child Abuse and Neglect.
- Nga paerewa Health & Disability services standard NZS 8134:2021

**Rationale:**

This policy provides a framework for staff to identify and manage actual and/or suspected child abuse and neglect. It recognises the important role and responsibility that staff have in the accurate detection of suspected child abuse and/or neglect, and the early recognition of children at risk of abuse.

**Cultural Considerations**

Families and patients are treated with respect . Please seek any cultural guidance from our Māori and Pacific Leadership Teams if any cultural issues become apparent or there is lack of cultural capability and/or awareness of staff.

**DEFINITIONS:**

**Whānau / family violence** covers a broad range of controlling and harmful behaviours commonly of a physical, sexual, and/or psychological nature which typically involve fear, intimidation and emotional deprivation.

**Child:** tamariki / children aged 0-14 years inclusive

**Young person:** tamariki / children between the ages of 14 and 16 years

**Child Abuse:** The harming (physical, emotional, sexual), ill treatment, abuse, neglect or serious deprivation of any tamariki / children or young person. This includes actual, potential, and/or suspected abuse.

**OBJECTIVES:**

Keep children safe by;

- Ensuring Mercy Hospital is compliant with current legislation and requirements regarding tamariki / children accessing services at Mercy Hospital (or children indirectly involved with a patient e.g. siblings / young visitors)
- Ensuring staff are aware of their responsibilities / expected response following disclosure by a child, or following recognition and observation of warning signs / symptoms

**Implementation:**

Access to relevant reading material/signage for patients/visitors in waiting areas and throughout the hospital.

Policy appendices are available through drop down boxes in TRAK to ensure timely access to information.

- **Police Vetting**  
Pre- employment screening of all new staff includes police vetting.  
Staff have up to date police vetting.
- **Declaration**  
Credentialing Policy includes declaration concerning Vulnerable Children
- **Patient Assessment**  
Face to Face nursing assessment of patients is completed in area of admission and will include screening for family violence as prompted in TRAK.  
If the screening is not completed in DSU, this will be handed over for follow up as appropriate in subsequent departments.
- **Staff Training – Clinical**  
During the first 6 weeks of employment, all clinical staff will complete a HealthLearn module via Tautoko Clinical Orientation or Senior Nurse on Call assignment rule.  
**Registered Nurse, Enrolled Nurse, Anaesthetic Technician & Senior Nurse on Call** ‘Violence intervention Programme Pre-Training Module’ RGCH008.  
**Allied Health Assistant & Health Care Assistant** ‘Violence Intervention Orientation’ RGOR002
- **In Patient & Day Stay Facility Managers** work with Clinical Learning and Development Co-ordinator to ensure at least one violence intervention representative per area. Release time will be provided for representatives to attend the VIP workshop and subsequent updates (annually). They will facilitate representatives having time to be involved in awareness training sessions, to update area staff and to orientate new staff to the policy and procedures relating to Patient Family Violence in their area.
- **Clinical area representatives** will be given release to attend 8-hour training day and subsequent annual updates (2hours). Proactively arrange with their area manager to ensure information is cascaded to staff in areas via appropriate forums e.g. huddles or ward meetings or through other time allocated to provide updates. Updates will include, but are not limited to, staff awareness of the extent of violence against women in NZ, how to access help through use of policy appendix, how to get more information, use of shielded websites, Mercy plans for white ribbon day. Area representatives will proactively seek out new members of the team and orientate them to policy (specifically appendix 1 & 5), TRAK assessment, and area specific lines of communication relating to Patient Family Violence.
- **Support staff** education programme will include.
  - Awareness training annual update on White Ribbon Day
  - Context and identification of abuse
  - Acknowledging disclosure of abuse
  - Referral to a clinical member of staff
  - Knowledge of Mercy Hospital’s staff support program.
  - Evaluation of education program

### Evaluation

- All staff have received education and training appropriate to their role in the identification, assessment and management of family violence including partner and child abuse.
- That the identification, assessment, and management have been carried out and are evident in clinical records.

- Working relationships are developed and maintained between referral agencies, Health NZ I Te Whatu Ora Family Violence/Child Protection support team and Mercy Hospital.
- If needed Staff are aware of how to access the Staff Support Programme.
- Planned updates of staff by area teams coordinated with CNM, area representatives & Clinical Learning & Development Coordinator
- Area representatives have attended the 8-hour workshop in Health NZ I Te Whatu Ora Southern
- CLT have a plan in place for updates annually.
- Senior Nurse on Call have completed HealthLearn course.
- Access to relevant reading material/signage for patients/visitors in waiting areas and throughout the hospital.
- Pre- employment screening of all new staff includes police vetting
- Existing staff who care for children overnight have been police vetted

Credentialing Policy includes declaration concerning Vulnerable Children

### Staff Responsibilities

The following are the key responsibilities, to be outlined to staff at new staff orientation, clinical orientation and regular training updates:

#### 1. Signs and symptoms

Front line staff must be alert to the 'Signs and symptoms of Child Neglect or Child Abuse' (*Appendix One*) and take appropriate action to protect the wellbeing and safety of children and young people, whether the child/young person is directly or indirectly a client/patient of the service

#### 2. Immediate Action

Staff who identify child protection concerns should immediately contact a senior member of staff (Senior Nurse or member of Executive). The senior member of staff will contact **Ministry for Children, Oranga Tamariki** (MCOT) (if appropriate). This contact may be advice seeking or reporting abuse.

MCOT: Phone: **0508 FAMILY (0508 326 459)**

Additional guidance and support is available on the MCOT website [www.mcot.govt.nz](http://www.mcot.govt.nz)  
If there is an immediate safety issue, the staff member should phone the Police.

#### 3. Informing Parents / Caregivers

Informing Parents / Caregivers of a referral to the police or MCOT should be managed with consideration to the safety of the child, staff and other family members.

Do NOT inform the caregivers unless it is safe to do so. Informing the parents / caregivers of a referral should be undertaken in a safe environment for both staff and the patient, parents or caregivers e.g. in the hospital, or by telephone.

Guidance can be obtained from an appropriate Senior Member of staff.

#### *4. Informing the Child's GP*

The child's GP MUST be informed where a referral has been made to MCOT. The responsibility for this lies with the referrer.

#### *5. Documentation*

Clinical staff are required to document the following in the clinical record:

- their observations / assessments
- any discussion with Senior staff, Team Leader or others
- documentation of what was reported to MCOT

Full documentation is required to alert others to the situation with the notation of "Child Protection Alert" recorded in the child's clinical record

#### *6. Staff Support*

Staff can access support through:

- A debrief with Senior Staff
- The Staff Support Programme

#### **New worker safety checks**

*To support the provision of a Safe children's workforce:* the Act introduces new requirements to ensure children are safe with the people who work with them:

At Mercy Worker Safety Checks will be undertaken as required by the Vulnerable Children's Act 2014.

#### **EVALUATION**

- Incident reports completed with appropriate identification, assessment and management evident in-patient clinical record
- Staff evaluation of training
- Staff training records

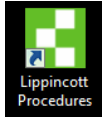
#### **ASSOCIATED DOCUMENTS**

#### **EXTERNAL - LEGISLATION**

- Vulnerable Children Amendment Act [2017 Vulnerable Children Amendment Act 2017](#)
- Children, Young Persons, and their families (Oranga Tamariki) Act 2017 [Children, Young Persons, and Their Families \(Oranga Tamariki\) Act 2017](#)
- Care of Children Act 2004
- Children, Young Persons and Their Families Act 1989
- Domestic Violence Act 1995
- Domestic Violence (Programmes) Regulations 1996 and Amendments 2002
- Privacy Act (2020)

#### **EXTERNAL - RESOURCES**

Guideline; Family Violence Assessment and Intervention Guideline 2016  
<https://www.health.govt.nz/publication/family-violence-assessment-and-intervention-guideline-child-abuse-and-intimate-partner-violence> (2016)



‘Recognizing and reporting suspected child abuse’

#### INTERNAL

- Patient Family Violence Policy- SharePoint
- Mercy Hospital Orientation Book
  - HR Guidelines, Section 3 – Recruitment, Selection & Appointment –

Family Violence Assessment and Intervention Guidelines: Child abuse and intimate partner violence (2016) – Ministry of Health

- Family Violence Intervention Guidelines: Elder Abuse and Neglect (2007)
- ‘Child Abuse Assessment and Response’ Flow chart – Ministry of Health
- ‘Partner Abuse Assessment and Response Flowchart’ – Ministry of Health
- Family violence intervention agency register (District)
- Family violence safety plan (District) , SDHB 2015
- HQSC & New Zealand Government (2017). Family violence death review committee’s fifth report data - summary report
- New Zealand Government (June 2017). Family violence, sexual violence and violence within Whanau: workforce capability framework
- HR Guidelines, Section 3 – Recruitment, Selection & Appointment