

CHILD PROTECTION

This LOP is developed to guide clinical practice at the Royal Hospital for Women. Individual patient circumstances may mean that practice diverges from this LOP.

1. AIM

- Protection and support of fetus, neonate or child under 18 years of age at risk of significant harm
- Staff meet the legislative requirements of mandatory child protection reporting

2. PATIENT

- Fetus, neonate or child under 18 years of age of woman receiving care at the RHW

3. STAFF

- All staff employed by RHW

4. EQUIPMENT

- Nil

5. CLINICAL PRACTICE

- Assess woman to identify circumstances that may adversely impact on the safety, welfare and wellbeing of the fetus, neonate or child.
- Complete the interactive online Mandatory Reporter Guide (MRG) at the following link, and follow advice – <https://reporter.childstory.nsw.gov.au/s/mrg>
- Document MRG report number in medical record
- Call the **Helpline 132 111** if unable to utilise electronic reporting
- Refer to Social Work Department for ongoing information and support
- Contact the NSW Health Child Wellbeing Unit (CWU) Monday – Friday 0830–1730 hours on **1300 480 420** for further advice if notification does not meet Risk of Serious Harm (ROSH) or when you remain concerned. After hours refer to the helpline **132 111**
- Notify the RHW Access and Demand Manager(ADM)/After Hours Nurse Manager(AHNM) on pager 44020 or extension 26536 if ROSH is identified
- Escalate to Randwick Campus Security on extension 22847 if there are safety concerns

6. DOCUMENTATION

- Medical record
- Mandatory Reporter Guide

7. EDUCATIONAL NOTES

- All staff working in health are mandatory reporters
- In hours, Social Work staff are the primary contact with regards to child protection concerns.
- The Mandatory Reporter Guide determines whether the fetus, neonate or child is below or above the statutory threshold for the risk of significant harm. It is important that *any staff member* with concerns about the safety of a fetus, neonate or child consults this guide.
- Mandatory reporting is required for the following:
 - domestic violence in current relationship
 - current substance use
 - history of previous involvement with child protection agencies or removal of previous children from woman's or partner's care
- Risk factors to be assessed include:
 - delayed or no antenatal care
 - homelessness
 - mental health disorder
 - intellectual disability
 - an accumulation of incidents of neglect or omission

Approved by Quality & Patient Care Committee
21 June 2018

CHILD PROTECTION cont'd

- In order to make an eReport online via ChildStory, you will need to register and log in. If the Mandatory Reporter Guide directs you to contact the Child Wellbeing Unit, you can now make an eReport. There is a button on the page where you can do this. You are no longer able to fax reports to Family and Community Services (FaCS).
- The Wood Special Commission of Inquiry into Child Protection Services in NSW recommended legislative amendments to free up the exchange of information between government and non-government organisations in the human services and justice sectors. The new Chapter 16A in the Children and Young Persons (Care and Protection) Act 1998 contains those amendments.
- For anything other than immediate risk, eReporting is more efficient and as effective as calling the Helpline.
- *High Risk Birth Alerts* notifying hospitals of a woman whose fetus may be at risk, are routinely circulated to relevant clinical units and departments
- There is no legislative definition of "significant harm". The policy definition of "significant" is "*sufficiently serious to warrant a response by a statutory authority irrespective of a family's consent. What is significant is not minor or trivial and may reasonably be expected to produce a substantial and demonstrably adverse impact on the child's safety, welfare and wellbeing.*"
- Fact-sheets on key issues in child protection can be found on the Keep Them Safe website: <http://www.keepthemsafe.nsw.gov.au/resources/factsheets>

8. RELATED POLICIES / PROCEDURES / CLINICAL PRACTICE LOPS

- Children and Young Persons (Care and Protection) Act 1998 No 157 current version 7 December 2017
- NSW Health PD2013_007 Child Wellbeing and Child Protection Policies and Procedures
- SESLHD PR/373 Birth Alerts – At Risk Unborn Babies Amended 2017
- NSW Health PD2005_287 Victims' Rights Act
- NSW Health PD2006_085 Information sharing – opioid treatment
- Domestic Violence
- Assumption of Care of Child at Risk
- Clinical Business Rule, *Client Registration – Identity Restricted Client/Patient*

9. RISK RATING

- Low

10. NATIONAL STANDARD

- CC - Comprehensive Care

11. REFERENCES

- Wood, James, AO QC, *Report of the Special Commission of Inquiry into Child Protection Services in NSW, Volume 1*, State of NSW through the Special Commission of Inquiry into Child Protection Services in NSW, November 2008

REVISION & APPROVAL HISTORY

Reviewed and endorsed Maternity Services LOPs 19/6/18
Minor amendment – telephone no and link Oct 2016
Approved Quality & Patient Care Committee 5/5/16
Reviewed and endorsed Maternity Services LOPs group 26/4/16
Approved Quality & Patient Safety Committee 16/5/13
Updated to comply with legislation May 2013
Approved Quality & Patient Safety Committee 21/10/10

FOR REVIEW : JUNE 2023