The Child Safe Standards require organisations that provide services for children to have processes for responding to and reporting suspected child abuse. This form can be used by a staff member or provided to a child or their family if they disclose an allegation of abuse or safety concern.

This form should be used in conjunction with the College’s **Four Critical Actions** procedures for responding to incidents, disclosures and suspicions of child abuse and for responding to student sexual offending.

All Child Protection Incident Report forms relating to suspected child abuse will be stored securely.

## Part 1: To Be Completed By Incident Reporter

|  |  |  |
| --- | --- | --- |
| **Report Details** | | |
| **Who is completing this form?**  (click to select) | MLC Employee  Third Party Contractor  Agency Staff  Volunteer  Student  Parent/Carer | |
| **Time/Date of Report:** |  | |
| **Type of Report** | Disclosure  Incident  Suspicion | |
| **Child’s Information** | | |
| **Name(s) of child/children involved:** | |  |
| **School / Year Level:** | |  |
| **Name(s) of additional individuals involved:** | |  |
| **Does the child identify as Aboriginal or Torres Strait Islander?** | | No  Yes, Aboriginal  Yes, Torres Strait Islander |

|  |  |
| --- | --- |
| **Critical Action 1: Immediate Response to an Incident** | |
| **If you believe a child is at immediate risk of abuse phone 000.**  Please detail any immediate responses made to an emergency situation e.g. was first aid administered, did the child require immediate medical assistance? | |
| **Details of the Incident** | |
| **Please categorise the suspected abuse** | Physical violence  Sexual offence  Serious emotional or psychological abuse  Serious neglect  Student sexual offending |
| **Grounds for your belief that a child has been or is at risk of abuse**  *Please describe details of the disclosure, incident or suspicion of child abuse, including: names, times and dates, documenting a child’s exact words, as far as possible.*  *Use the following dot points to assist in completing this section:*   * *details – the child’s or young person’s name, age and address* * *indicators of harm – the reason for believing that the injury or behaviour is the result of abuse or neglect* * *reason for reporting – the reason why the call is being made now* * *safety assessment – assessment of immediate danger to the child or children. For example, information may be sought on the whereabouts of the alleged abuser or abusers* * *description – description of the injury or behaviour observed* * *child’s whereabouts – the current whereabouts of the child or young person* * *other services – your knowledge of other services involved with the family* * *family information – any other information about the family* * *cultural characteristics – any specific cultural or other details that will help to care for the child, for example, cultural origins, interpreter or disability needs.* |  |
| **Incident reporter wishes to remain anonymous?** | Yes  No  If no, provide name of reporter: |

This form is to be handed to an MLC Child Protection Officer as soon as practical.

## Part 2: For Completion by MLC Child Protection Officer

|  |  |
| --- | --- |
| **Details of Report to MLC Child Protection Officer** | |
| **Date report received:** | Click or tap to enter a date. |
| **Staff member managing incident:** |  |
| **Comments / Notes:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Critical Action 2: Reporting to Authorities** | | | |
| MLC Counsellor to complete in consultation with Head of School, Senior Child Protection Officer as per the MLC Child Safety Program, Reporting and Responding to Allegations of Child Abuse procedures. | | | |
|  | | **Name of person who took your report** | **Date and Time** |
| **Authority**  (tick the authorities you have reported to) | Police |  |  |
| DHHS Child Protection |  |  |
| Child First |  |  |
| **Decision not to report**  *If you did not report to an authority, list the reasons for this decision here.*  *(Who was consulted?)* |  | | |
| **Reporting Internally MLC**  *Provide details of any discussion had with school leadership regarding report or concerns about safety of the student.*  *(Who? Time, Date, outcome/recommendations)* |  | | |
| **Outcome of Report** |  | | |
| **Follow Up actions undertaken** |  | | |
| **Review of existing Child Safe risk assessment controls** |  | | |

|  |  |
| --- | --- |
| **Critical Action 3: Contacting Parents/Carers** | |
| School staff must consult with Victoria Police and/or DHHS Child Protection to determine if it is appropriate to contact parents. If it is, parents must be contacted as soon as possible (preferably on the same day of the disclosure, incident, or suspicion. | |
| **Have you sought advice from DHHS Child Protection or Victoria Police?** | Yes  No – advice must be sought |
| **Is it appropriate to contact parent/carer?** | Yes – note approval from also Principal required  No – advice must be sought |
| **List reason if it is not appropriate to contact parent/carer:** |  |
| **Provide details of your discussion with parent/carer’s (if appropriate)** |  |
| **Name of staff member making call:** |  |
| **Name of parent/carer receiving the call:** |  |
| **Discussion outcomes:** |  |

Working document will be uploaded to the Child Safety Team Site, managed by the Senior Child Protection Officer

|  |  |
| --- | --- |
| **Critical Action 4: Providing Ongoing Support** | |
| **Follow-up actions to support the student:** |  |
| **Support provided:** |  |
| **Referral(s):** |  |

## Part 3: Review of Actions Taken

Complete this section between 4 – 6 weeks after an incident, suspicion or disclosure of abuse in conjunction with your school leadership team. This will support you and the College to continue to protect children in your care, and to reflect on your processes and the need for any follow-up actions.

|  |  |
| --- | --- |
| **SAFETY AND WELLBEING** | |
| **Current safety and wellbeing of the child** | |
| Is the child safe from abuse and harm – including exposure to family violence?  *If not, consider the need to make a further report* | No  Yes |
| Does the child have any wellbeing issues that are not currently being addressed?  *If so, consider how these can be addressed and captured within a student support plan.* | No  Yes |
| **Current wellbeing of other children who may be impacted by the abuse** | |
| Are there any other children who may be impacted by the abuse? | No  Yes |
| If so, have their wellbeing needs been met?  *If so, consider how these can be addressed and captured within a student support plan.* | No  Yes |
| **Current wellbeing of impacted staff members** | |
| Does the staff member who made the report/ witnessed the incident, formed a suspicion or received a disclosure require any support (e.g., EAP referral)? | No  Yes |
| If so, has this been received? | No  Yes |

| **Review of actions taken**  Have College staff followed the four critical actions for schools: responding to incidents, disclosures or suspicions of child abuse? | |
| --- | --- |
| Was an appropriate decision made in relation to when to act? | No  Yes |
| Have the parents continued to be engaged if appropriate? | No  Yes |
| Could the suspected abuse have been detected earlier? | No  Yes |
| **Action 1** | |
| Did the College take appropriate action in an emergency? | No  Yes |
| **Action 2** | |
| Was a report made to the appropriate authorities and internally? | No  Yes |
| Were subsequent reports made if necessary? | No  Yes |
| **Action 3** | |
| Did the College contact the parents/carers asap? | No  Yes |
| **Action 4** | |
| Has the College provided adequate support for the student? | No  Yes |
| Has a student support group been established? | No  Yes |
| Have any complaints been received? | No  Yes |
| Have the complaints been resolved? | No  Yes |
| Has a student support plan been established, implemented, and reviewed? | No  Yes |
| Was the student appropriately supported in any interviews? | No  Yes |
| Consider and list actions that can be taken to build the College’s capacity to identify and respond to incidents, allegations or reports of child abuse or student sexual offending in the future. | |

# Governance

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| Document Details | | |
| **Title:** | | MCL Child Safety Program – Child Protection Incident Report Form |
| **Policy Approver:** | | Vice Principal |
| **Policy Owner:** | | Director of Student Wellbeing |
| **Date Created:** | | July 2016 |
| **Review Timeline:** | | Annual |
| **Date of Next Review:** | | 2024 |
|  | |  |
| Version Control | | |
| **Version** | **Date** | **Description** |
| V1 | 2016 | Developed to meet requirements of Ministerial Order 870 |
| V2 | 2019 | Minor updates |
| V3 | 2021 | Revised following a review of MLC’s Child Safety Program |
| V4 | 2022 | Reviewed to ensure in line with new Victorian Child Safe Standards |
| V5 | 2023 | Annual Review – no changes |
|  |  |  |
| Audience | | Publication Location |
| All MLC staff | | MLC Staff Hub > Document Central |
| Students | | MLC Student Hub |
| Parents/Guardians | | myMLCfamily |
| Wider community | | MLC external website |