

GDQ Child Safety Handbook

Guide Dogs.

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This Child Safety Handbook outlines GDQ's commitment to an environment that is safe for children and young people, and the expectations and processes that are required for all involved with the delivery of services to children.

A summary of how GDQ's approach to child and youth risk management complies with the requirements under the *Working With Children (Risk Management and Screening) Regulations 2020* can be found in [Appendix B](#).

GDQ Statement of Commitment for Child Protection

Guide Dogs Queensland (GDQ) supports the rights of children and young people by providing a supportive environment in which their safety and wellbeing is assured.

GDQ responds assertively to observations and reports of treatment of children and young people, which is suspected of being violent, abusive, negligent, exploitative, or discriminatory.

GDQ responds to observations, suspicions, and allegations of such treatment according to best practice, legislative and regulatory requirements, and provisions of service and other agreements with funding bodies and other partners.

The General Manager – Client Services is responsible for managing the development and implementation of GDQ Child Safety Handbook.

The overall purpose of the GDQ Child Safety Handbook is to provide children, young people and their families with a safe, secure, and supportive environment for accessing services and all interactions with GDQ.

Services GDQ provides to children and their families will focus on developing independence, mobility, and wellbeing. GDQ's Values (Committed, Accountable, Respectful, Ethical and Successful) set the standard for the delivery of services to achieve this goal.

To maintain the human rights of all children who access GDQ services, GDQ will adopt a risk management approach to identify, assess and proactively manage risks that could impede clients' safe and secure access to our services.

Scope

This document applies to all involved with the delivery of services to children, including:

- Workers
- Students on placement or work experience
- Parents
- Carers

Definitions

Please refer [Appendix A](#).

Appropriate Use of Language

When communicating with children, GDQ members use language that is encouraging, positive, honest and open. This includes non-verbal aspects such as tone of voice, rate, pitch, gestures and facial expressions.

We do not use language that inhibits engagement and development, including swearing, racial comments and sexually suggestive comments or jokes. Inappropriate use of language includes insults, non-constructive criticism, name calling, yelling, and bullying.

If children do not speak English, parents/carers and/or interpreters will be required to attend sessions that meet their language needs.

Staff Recruitment, Selection, Training and Management

GDQ's recruitment of staff (employees and volunteers) will ensure that roles that may involve contact with children and young people are screened to ensure that no-one with a previous history of perpetrating harm to children or young people are engaged.

Staff induction and ongoing training includes ensuring understanding of how to identify and respond to suspicions of harm to children and young people.

Supervision systems are in place to ensure that adequate staffing ratios are in place in all work with groups of children or young people.

Relevant policies and procedures that address this include Recruitment and Employment Procedure, Learning and Development procedure, Criminal History Screening procedure.

Criminal History Screening (Working with Children screening)

GDQ Management have identified roles which require staff to hold current Working With Children (Blue Card) screening.

The Criminal History Screening procedure outlines the process for identifying 'risk assessed roles' which require a Working With Children (Blue Card) screen prior to commencement.

Behaviour Management Strategies

GDQ Worker – Child Interactions

At the outset of service delivery, the expectations for clients to show respect to GDQ workers and other children will be done by asking them to treat others as they would like to be treated themselves.

People of all ages can be triggered by different situations and our children clients may need to be reminded of this expectation from time to time. If children clients continue to fall below this expectation, then it may lead to pausing the delivery of services until agreement is reached to meet it. Alternatively, parents or carers may be called to support with upholding this expectation so that service delivery may continue. A consequence of ongoing unacceptable behaviour may lead to the termination of services.

At the outset of service delivery, GDQ workers will raise children's awareness that if they feel unsafe that they can talk with their parent or carer to support them. GDQ workers will also encourage children to share their concerns about feeling safe with them, as the children come to get to know and trust them too. It is the responsibility of all adults mentioned above to listen to children and assure them by providing support, so that children feel safe engaging in services provided by GDQ.

The appropriate behaviour management strategy will depend on the context and the needs of each child. Background information about the child client is required to prepare to tailor responses to individual needs. Therefore, examples may include:

- Distraction for a four-year-old could be a suitable strategy, and for a fifteen-year-old the strategy could be to ask them to focus on a point of learning or discussion and explaining why.
- Positive language and finding the positive in their actions usually de-escalates situations and brings children back to the learning.
- Some children will need time to express their emotions outwardly and others will need time to think and feel through emotions inwardly. This depends on the personality of the child.
- Some children prefer short instruction, others like very detailed ones. Some children like jokes as ways of communicating but for others may take them literally.

Children learn in different ways and GDQ workers may have their own preferences. It is important for GDQ workers to be aware of their preferred learning styles, so they do not bias their management of behaviour towards these. For example:

- Verbal-linguistic intelligence (well-developed verbal skills and sensitivity to the sounds, meanings and rhythms of words)
- Logical-mathematical intelligence (ability to think conceptually and abstractly, and capacity to discern logical and numerical patterns)
- Spatial-visual intelligence (capacity to think in images and pictures, to visualize accurately and abstractly)
- Bodily-kinaesthetic intelligence (ability to control one's body movements and to handle objects skilfully)
- Musical intelligences (ability to produce and appreciate rhythm, pitch and timber)
- Interpersonal intelligence (capacity to detect and respond appropriately to the moods, motivations and desires of others)
- Intrapersonal (capacity to be self-aware and in tune with inner feelings, values, beliefs and thinking processes)
- Naturalist intelligence (ability to recognize and categorize plants, animals and other objects in nature)
- Existential intelligence (sensitivity and capacity to tackle deep questions about human existence such as, "What is the meaning of life? Why do we die? How did we get here?")

It is most important to assess the emotional state of the child when first connecting with them. This can be assessed through facial expressions and non-verbal information (body language, gestures) but usually comes through conversation asking them how they are or using questions effectively to engage them. This includes using both open and closed questions as

appropriate to assess headspace. Involving children by giving them options is also a way of engaging them and giving them some ownership of the learning activities.

Giving children the opportunity to test out their own theories for what does and does not work for them can give them a sense of personal authority and autonomy, whilst developing appreciation for the expertise developed by GDQ workers. This applies to clients when they overestimate their capabilities and may insist on applying their own method. Allowing them to do so in a safe and controlled manner can be a suitable way of managing behaviour to enable insights and personal adjustment of attitudes and techniques.

GDQ Workers

Fundamental to all management is the state of the GDQ worker. GDQ workers managing their own emotions to be calm, positive and patient. This flows into the working relationship and enables learning to take place.

It is important for members of GDQ to be aware of their own personalities and the differences between people. This will help them to flex their styles to suit different children and situations.

It is also important for GDQ workers to understand their own triggers and how they may diminish their abilities to respond effectively for the management of behaviours of children.

When working with children, maintaining self-awareness and using observations skills is critical for understanding the effectiveness of management strategies and how to adapt them. An attitude of curiosity and unconditional positive regard fosters patience and flexibility.

Behaviour management techniques will not involve physical punishment, or strategies which belittle a child. For example, smacking or ridiculing.

Positive encouragement that involves stopping, caring for and listening to children clients, followed by challenging them to continue, to try something new or to test their abilities can be critical in helping them to achieve their goals.

Children

Comorbidities with vision loss are also important to understand. These need to be accounted for. For example, a child with ADHD may need opportunities to move excitedly and engage in learning activities while doing so. The expectations for children without comorbidities may be to slow the pace of speech and lower tone of voice. Culture may also play a role where the expectation for eye contact is to be avoided in some instances. "Look at me when I'm talking to you", is a statement to a child that would be ineffective.

If the behaviour of a child escalates beyond a state where effective learning occurs, it is possible to end the lesson knowing that this will give the child space to integrate what has been covered and to resume at the next session.

Supervision of Children

Ratios of GDQ workers to children will vary from 1:1 for individual services, 1:4 for camps (residential) for children under 10 and 1:5 for older children for camps (residential).

For children under the age of 10, one or both of their parents or carers will accompany them during residential camps, including overnight stays at GDQ's accommodation.

Parents and carers are informed about the supervision and location in which services will be delivered during the scheduling of services. During one-to-one services GDQ workers and children clients remain in the vicinity of the public view as a minimum.

Parents or carers are to collect children from camps (residential) at the agreed time. The supervising worker has contact details of parents or carers. If not collected on time, contact is made with parent/carer, then supervising worker stays with child until parent/carer arrives.

If there is an issue during collection, for example, the adult collecting a child is violent or intoxicated, the other parent/carer on contact details will be contacted to collect child. Or the Police will be contacted if deemed necessary.

Physical contact, one-on-one contact, and relationships with children

In the context of our services, it may be necessary to physically guide children. For example, a GDQ worker will ask the child if they can physically contact their hand to guide it to a door handle or chair, while using a knife or whisking an egg, or to adjust the way they hold a cane or other mobility device. Permission for contact is always sought and agreed to beforehand.

Physical contact will take place where first aid is required by a formally qualified member of the team. If first aid is required, then it will be recorded as an incident via the Incident Portal and parents or carers will be informed in line with GDQ's Incident and Critical Incident Management Procedure.

For the delivery of services, no contact is required or made with children clients outside of the service environment. This includes social media and contact via email and mobile phone. Contact is made by the Client Services team or by the GDQ worker with the parent or carers. In this way, a guardian of the child is always involved in arranging service delivery and understands and agrees to the scope and location of services provided.

No gifts are given to children in the delivery of any services.

Transportation of Children

After seeking parental or carer consent, children are transported by appropriately licenced drivers for the following activities:

- Participation in onsite activities, a GDQ worker collects client students from their school and brings them to GDQ's Bald Hills campus.
- During residential camps that involve offsite activities, transportation with GDQ workers will take place.
- There may be some goals that children clients need to achieve as part of programs requiring transport to a particular location. For example, route development (Orientation and Mobility) or grocery shopping (Occupational Therapy).
- If children require car seat restraints, then their parents or carers will drive them to the location required for the delivery of services unless agreed on an individual basis with parents.

Change Room and Toilets

Privacy for children will be maintained throughout service delivery. This includes GDQ workers and/or parents/carers clearly asking children for permission to enter change rooms and toilets if support needs to be provided, and only doing so when children have indicated that are ready for them.

At the residential camp programs, children under 10 years, are accompanied by their parents. For children of this age or above, orientation of the facilities, including toilets and accommodation rooms is addressed at this time. There is no need for children clients to be accompanied outside of this orientation process.

Given that GDQ clients have low vision or blindness, announcing oneself before entering or exiting a room is required at all times to uphold standards for politeness, which includes toilets and change rooms.

Health and Safety

Risk Management strategies will be proactively identified as per *GDQ Risk Management Framework* and *Workplace Health and Safety Policy*. This includes training that provides GDQ employees with the knowledge and skills they need to proactively identify and manage risk in collaboration with each other.

Practising good hygiene will be discussed during the start of service delivery, so that children keep themselves and others safe in this regard. At this time, recommended practices for sun protection/hydration and children's need for sleep and rest will also be discussed. GDQ will provide sunscreen if required.

For children unaccompanied by parents/carers on residential camps (10 to 17 years of age), GDQ workers will check the rooms of these clients to see that good hygiene is maintained during their stay.

Emergency and evacuation procedures, which clearly identify meeting points and evacuation routes, are conducted at every residential program, including camps for children.

Management of illness and injury

At client intake and yearly updates, information related to medical conditions of children is captured for GDQ workers who access this information prior to the delivery of services. In specific cases, such as asthma, anaphylaxis and epilepsy, clients (or the parents or carers) of all ages submit action plans for how they are to be treated and this information is also accessed by GDQ workers as outlined above. In addition, relevant GDQ workers are prepared to respond by having current first aid and CPR qualifications.

In the case of illness or injury incurred during the delivery of services and during residential camps, GDQ workers follow the documented process –*Incident and Critical Incident Management Procedure*.

Organisational behaviour standards

It is important for all GDQ workers who are involved in the organising of services or the delivery of them to children to be aware of organisational standards for behaviours related human rights, bullying, discrimination, sexual harassment, inclusivity, protection of children and actions to take following an incident. The standards set by GDQ are:

- Employee Handbook and Code of Conduct
- Privacy Policy
- Anti-Bullying Policy
- Anti-Discrimination Policy
- Child Protection Policy
- Preventing Sexual and Sex-Based Harassment Policy
- Incident and Critical Incident Management Policy

Culturally Inclusive Practices

GDQ is committed to the cultural rights of all people and will build awareness and capability for remaining sensitive to and inclusive of different cultural groups, including Aboriginal and Torres Strait Islanders.

This is addressed through training provided to GDQ employees during their induction process.

Photography, Technology and Social Media

GDQ workers must always ask for consent if taking photos of others, including staff members, volunteers, contractors, clients or visitors, or if you want to take photos while under instruction. The standards set by GDQ are:

- Acceptable Use of Computers, Internet & Email Policy
- Media Consent Policy
- Media Release and Image Policy
- Media Consent Form

As well as meeting the standards set by the above processes relating to photography, technology and social media, GDQ workers are not permitted to interact with children and clients on social media platforms, including direct messaging and friend requests.

Medication

GDQ does not assist clients of any age with medication. Therefore, parents or carers are expected to assist their children as required. This is communicated with clients and their parents or carers when first arrangements for service delivery are made with GDQ.

Visitors

For all Bald Hills, visitors must sign-in and sign-out at Reception.

For all Regional sites, visitors must contact the staff member whom they are meeting with to sign-in and sign-out.

Use of Alcohol and Other Drugs

Please refer to Drugs, Alcohol and Smoking Policy.

Confidentiality and Privacy

Confidentiality and Privacy will be enacted in accordance with GDQ's Privacy Policy.

Handling Disclosures or Suspicions of Harm

Please refer to Appendix A for associated definitions, including:

- Allegation
- Child abuse
- Disclose
- Harm
- Suspicion of Harm

The starting point to effectively handle disclosures or suspicions of harm is for GDQ workers to maintain the respect and trust of children clients via the appropriate use of language, behaviour management strategies, supervision, health and safety, management of injury and illness, and culturally inclusive practices, as outlined above in this document. Doing so will:

- Foster relationships in which children will feel safe to disclose abuse or harm.
- Provide children with an increased sense of safety and trust that they will be cared for and supported following disclosures of harm.
- Enable GDQ workers to get know children clients as individuals and to support them if they are displaying sign of potential harm, such as:
 - Physical injuries
 - Diminished mood
 - A reduction or withdrawal from participation in activities
 - Reduced ability to concentrate
 - Strong emotional outbursts

It is critical to be aware of and to implement GDQ's Child Protection Procedure for Receiving and Reporting Disclosures of Harm in the case of disclosures or suspicions of harm to children.

In the event that a disclosure or suspicion of harm is reported to external agencies/authorities, GDQ's Incident and Critical Incident Management Procedure will be applied by reporting it as a critical incident within the GDQ Incident Portal ([click here](#)).

Management of High-Risk Activities and Events for the Protection of Children

High risk activities and events include those that are:

1. Deemed high risk within legislation and regulations, such as working from heights, using hazardous chemicals, and working with mobile plant and equipment, or

2. Assessed as high risk based upon the likelihood and consequence of significant harm or loss being sustained physically (workspace), psychologically (headspace) or culturally (groupspace).

In relation to Point 2 above, it is recommended that planning for all events and activities include discussion amongst involved GDQ employees about the likelihood and consequence of significant harm or loss. If an activity or event is considered to be high risk, then this needs to be discussed and agreed with the General Manager – Client Services.

Once an activity or event is identified as high risk, then the process to follow for managing it is detailed in *Work Instruction for Formal Risk Assessments and Safe Work Procedures*. When doing so, please consult with the Quality, Risk and Safety Team to support you through the process, so that a holistic approach to identifying and managing risks is developed.

Management of Breaches/Non-Compliances of this Child Safety Handbook

Where there are non-compliances with the expectation and responsibilities set out above, depending on the situation, these will be treated with one of the following:

- Performance feedback
 - Applicable where the non-compliance is minor and where feedback will likely lead to learning and improved performance in the future.
- Performance management
 - Applicable where the non-compliance is ongoing or has significant negative impacts, and the focus on performance needs to be corrective and regularly monitored.
 - See Performance Management Policy
- Workplace Investigation

Complaints

Management of complaints will take place as outlined in Complaint Management Policy and Complaint Handling Procedure.

Consultation and Communication

GDQ will ensure that relevant staff (e.g. those working with children and young people) have input into reviews of this document. Parents and guardians of children clients will also be consulted regarding the content of this Handbook.

Clients and their families / guardians and staff will be directed to GDQ's child and youth risk management strategy documents which can be found on the [website](#).

Appendix A – Definitions

Act – means the Working with Children (Risk Management and Screening) Act 2000.

Children – are persons under 18 years of age.

Breach - A breach is any action or inaction by any member of the organisation, including children, that fails to comply with any part of the strategy.

Carers – Adults, other than parents, who also hold responsibility for the care of a child, including support workers, teachers, teacher assistants and guardians.

Child Abuse – Child Abuse is a single incident or more than one incident that take place over time. Under the Child Protection Act 1999, it does not matter how much a child is harmed, but whether a child:

- has suffered harm, is suffering harm, or is at risk of harm;
- has a parent or guardian able and willing to protect the child from harm.

There are four different types of child abuse that lead to harm:

- physical abuse;
- sexual abuse or exploitation;
- emotional/psychological abuse;
- neglect.

Harm - is any detrimental effect of a significant nature on the child’s physical, psychological or emotional wellbeing. It is immaterial how the harm is caused.

Disclosure – A disclosure of harm occurs when someone, including a child, tells you about harm that has happened or is likely to happen.

Allegation – An as yet unsubstantiated/unproven assertion of harm

Suspicion of harm – Workers at GDQ have “reasonable grounds” to suspect harm if-:

- A child tells you they have been harmed;
- Someone else, for example another child, a parent, or a GDQ worker, tells you that harm has occurred or is likely to occur;
- A child tells you they know of someone who has been harmed (it is possible that they may be referring to themselves);
- You are concerned at significant changes in the behaviour of a child, or the presence of new unexplained and suspicious injuries; or
- You witness harm happening.

Any disclosure of harm is important and must be acted upon, regardless of whether-:

- The harm to a child has been caused by a person from within or outside of GDQ.
- The child disclosing the harm to you is from within or outside GDQ.

GDQ is committed to dealing with a disclosure or suspicion of harm in a professional and ethical manner.

Worker – includes all GDQ paid and non-paid staff, including volunteers and contractors, working with children in the delivery of GDQ services.

Appendix B – Regulations Compliance Matrix

GDQ Child and Youth Risk Management Strategy Matrix

This table identifies GDQ's' obligations / requirements under the Working with Children (Screening and Risk Management) Act and Regulations and what steps or actions are taken to fulfil them.

Mandatory Requirements	Where can this be found?
1. A statement of commitment to the safety and wellbeing of children and the protection of children from harm	GDQ Child Safety Handbook (this document)
2. A code of conduct for interacting with children and young people	GDQ Child Safety Handbook (this document)
3. Written procedures for recruiting, selecting, training and managing staff and volunteers	Recruitment and Employment policy Criminal History Screening procedure Learning and Development procedure
4. Policies and procedures for handling disclosures or suspicions of harm, including reporting guidelines	Child Protection Procedure for Disclosures of Harm
5. A plan for managing breaches of the risk management strategy	GDQ Child Safety Handbook (this document) GDQ Child Protection Risk Management Strategy
6. Policies and procedures for managing compliance with the blue card system	Criminal History Screening procedure GDQ Child Protection Risk Management Strategy
7. Risk management plans for high-risk activities and special events	GDQ Child Safety Handbook (this document)
8. Strategies for communication and support including a) written information for parents and persons engaged by the person that includes details of the person's risk management strategy or where the strategy can be accessed; and b) training materials for persons engaged by the person to: i. help identify risks of harm and how to handle disclosures or suspicions of harm; ii. and outline the organisation's risk management strategy.	GDQ Child Safety Handbook (this document) GDQ Child Protection Risk Management Strategy