

YWCA Child and Vulnerable Adult Abuse Protection Policy and Procedures

Created: Aug. 2003

Revised: June 2017

We owe our children—the most vulnerable citizens in any society—a life free from violence and fear. In order to ensure this, we must be tireless in our efforts...to attain peace, justice and prosperity...for communities and members of the same family. We must address the roots of violence.

NELSON MANDELA

Report neglect or abuse

If you have reason to believe a child is being abused or neglected, call Ministry of Children and Family Development

Toll-Free Number 1 800 663 9122

Local Number 604 660 4927

**YWCA Child and Vulnerable Adult Abuse Protection Policy and Procedures
(Abuse Protection Policy and Procedure)**

CHILD AND YOUTH ABUSE RESPONSE FORM



SUSPECT OR WITNESS
ABUSE AND/OR NEGLECT?

CHILD DISCLOSES ABUSE
DIRECTLY OR INDIRECTLY

Recognize your legal duty to report!

FILE A REPORT:

- 1) **Police (9-1-1)** if the child is in immediate danger, then complete steps 2 and 3.
- 2) **Ministry of Children and Family Development (MCFD)** if the child is not immediately in danger, then complete step 3.
1 800 663 9122 (24 hour line)
- 3) **Child Care Licensing Facilities** if the abuse occurs in a YWCA Child Care Centre.

TALK TO CHILD:

- Stay calm and listen
- Have the conversation slowly. Avoid asking questions.
- Be supportive
- Tell child what will happen



DOCUMENT & SUBMIT:

- Complete the **Child Abuse Reporting Form**
- Complete the **Child Care Licensing Facilities Form** if applicable

INFORM YWCA MANAGER

- Immediate Manager
- Director or VP
- Vice President of Human Resources
- Manager, Corporate Development and Purchasing

Questions? Contact Human Resources: msing@ywcavan.org | 604 895 5753

INDICATORS OF ABUSE

PHYSICAL: bruises, welts, swelling, assault, punctures, burns, repeated falls, lacerations

NEGLECT: dehydrated, malnourished, skin sores, visual and mobility aids, squalor

PSYCHOLOGICAL: agitation, fearfulness, low self-esteem, sleep disturbance, withdrawal

FINANCIAL: unpaid bills, change in living conditions, no money/food/clothes, debt

TABLE OF CONTENTS

POLICY	3
TERMINOLOGY	4
ROLES AND RESPONSIBILITIES	8
CODE OF CONDUCT FOR THE PROTECTION OF CHILDREN, YOUNG PEOPLE AND VULNERABLE ADULTS	10
RECOGNIZING SIGNS OF ABUSE / NEGLECT	12
RESPONDING TO ALLEGATIONS OF ABUSE / NEGLECT	16
Handling Disclosure or Suspicion of Abuse of a Child	16
Responding to Disclosure or Suspicion of Abuse - Vulnerable Adults	19
Responding to a Suspicion/Disclosure/Allegation of Abuse Against a YWCA Employee or Volunteer	20
APPENDIX A: YWCA CHILD ABUSE REPORTING FORM	22
APPENDIX B: COMMUNITY CARE LICENSING FACILITIES INCIDENT REPORT	26
APPENDIX C: COMMUNITY CARE FACILITIES LICENSING INCIDENT FORM	27
APPENDIX D: COMMUNITY CARE FACILITIES LICENSING SCHEDULE H: REPORTABLE INCIDENTS	27
APPENDIX E: RESOURCES FOR ABUSE OF OLDER ADULTS	31
APPENDIX F: WHAT HAPPENS WHEN A REPORT IS MADE	31
APPENDIX G - STATEMENT OF UNDERSTANDING	34

YWCA ABUSE POLICY AND PROCEDURES

POLICY

The YWCA Metro Vancouver is fully committed to safeguarding the welfare of all children in our care, as well as vulnerable adults accessing YWCA programs and services. We recognize that in working with children and vulnerable adults, either directly or indirectly, we have a moral and legal responsibility to protect those within our care from both intentional and unintentional harm.

The YWCA is committed to ensuring that it:

- Provides a safe environment for children and vulnerable adults
- Identifies children, young people and vulnerable adults who are suffering or likely to suffer or be harmed, and
- Takes appropriate action to see that such children, young people and vulnerable adults are kept safe at the YWCA

As such, the YWCA will:

- Respect the dignity and privacy of children and vulnerable adults participating in our programs and services,
- Create an environment in which children and vulnerable adults are valued, encouraged and affirmed
- Provide programming that promotes the health and safety of everyone and, as part of ongoing vigilance and continuous improvement, review practices and procedures to ensure this
- Recruit, orient, train, supervise and support employees and volunteers to adopt best practices that safeguard and protect children and vulnerable adults from abuse
- Require staff and volunteers, on an annual basis, to adopt and abide by this Abuse Protection Policy and Procedures, as well as any other code of ethics specific to their field
- Provide consistent procedures about identifying, reporting and dealing with allegations of suspected abuse and neglect
- Monitor and evaluate the implementation of this Policy and these procedures, and adapt them as per legislative changes or to ensure best practices.

This YWCA Abuse Protection Policy and Procedures applies to all employees and volunteers.

We will, if we think a child is being abused, neglected or is at risk of significant harm, abide by our legal duty to report our concerns to the Ministry of Children and Family Development (Ministry).

TERMINOLOGY

The YWCA recognizes the following definitions:

A **child** is a person under 19 years of age and includes youth. Note that a child may also be a staff or volunteer.

A **child in need of protection** is defined by the Child, Family and Community Services Act and must be reported if:

- The child has been, or is likely to be, physically harmed by the child's parent;
- The child has been, or is likely to be, sexually abused or exploited by the child's parent;
- The child has been, or is likely to be, physically harmed, sexually abused or sexually exploited by another person, and if the child's parent is unwilling or unable to protect the child;
- The child has been, or is likely to be, physically harmed because of neglect by the child's parent;
- The child is emotionally harmed by:
 - the parent's conduct, or
 - living in a situation where there is domestic violence by or towards a person with whom the child resides;
- The child is deprived of necessary health care;
- The child's development is likely to be seriously impaired by a treatable condition and the child's parent refuses to provide or consent to treatment;
- The child's parent is unable or unwilling to care for the child and has not made adequate provision for the child's care;
- The child is or has been absent from home in circumstances that endanger the child's safety or well-being;
- The child's parent is dead and adequate provision has not been made for the child's care;
- The child has been abandoned and adequate provision has not been made for the child's care;
- The child is in the care of a director or another person by agreement and the child's parent is unwilling or unable to resume care when the agreement is no longer in force.

Child abuse is any form of physical harm, emotional deprivation, neglect or sexual mistreatment which can result in injury or psychological damage to a child. The following definitions and examples will help you understand and respond to child abuse and neglect, but for information on indicators of abuse, refer to the section on Recognizing Signs of Abuse / Neglect:

- **Physical abuse** is any physical action by a person that harms, or could harm, a child. It includes hitting, kicking, slapping, shaking, burning, pinching, biting, choking, throwing, shoving and whipping. It also includes using unreasonable force to punish children or to prevent them from harming themselves or others. The child's injuries may range from minor bruises, burns, welts or bite marks to broken bones or – in extreme cases – death.
- **Emotional harm** is the most difficult to define and recognize. It may range from habitual humiliation of the child to withholding life-sustaining nurturing. It can include acts or omissions by those responsible for the care of a child, or others in contact with a child that are likely to have serious, negative emotional impacts. Emotional harm may occur separately from, or along with, other forms of abuse and neglect.

Emotional abuse can include a pattern of:

- Scapegoating;
- Rejection;

- Verbal attacks on the child;
 - Threats;
 - Insults; and
 - Humiliation.
- **Sexual abuse** is when a person uses a child for sexual purposes. It can include:
 - Sexually touching a child or inviting a child or to touch;
 - Intercourse (vaginal, oral or anal);
 - Threatening sexual acts, obscene gestures or communications, or stalking;
 - Sexual references to the child’s body or behavior with words or gestures;
 - Asking the child to expose their body for sexual purposes;
 - Deliberate exposure of the child to sexual activity or material; or
 - Exposure to sexual aspects of organized or ritual abuse.
 - **Sexual exploitation** is when a child becomes involved in sexual activity, usually through manipulation or coercion, in exchange for things like money, drugs, food or shelter. Sexual activities include:
 - Sexual acts;
 - Sex for the purpose of entertainment;
 - Escort or massage parlor services; and
 - Appearing in pornographic images.
 - **Neglect** is failure to provide for a child’s basic needs by the parent or guardian, to the point where the child is, or could be, harmed. Neglect includes failing to provide a child with food, shelter, basic health care, supervision, nurturing or protection from risks. Neglect is not always intentional, as it may be a result of insufficient resources or other circumstances beyond a person’s control.

The **Child, Family and Community Service Act** is the legislative authority for child welfare in British Columbia. Its fundamental guiding principle is the safety and well-being of children and are of paramount considerations states that a child needs protection if the child has been, or is likely to be, physically harmed due to neglect by the child’s parent.

Confidentiality - in most cases, your duty to report suspected child abuse or neglect overrides your duty to protect the privacy of clients, students, staff or colleagues. The only exceptions are: Solicitor-client privilege; and Confidentiality provisions of the federal Criminal Justice Act

All information relating to an abuse situation is considered confidential. Information concerning the allegation should not be shared with anyone who is not directly involved with the investigation or not directly involved with the care of the child. Discussion about the case among other staff and/or volunteers is not acceptable.

Please be warned: Discussing an allegation with any other individual can leave you open to liability for slander.

Criminal Record Check (CRC) refers to a Criminal Record Check including Vulnerable Sector Search. The **Criminal Record Review Act** ensures that people who work with or may potentially have unsupervised access to children or vulnerable adults undergo a criminal record check by the Criminal Records Review Program (CRRP).

The **Age of Consent** for sexual activity is 16 years, however the age of consent is 18 years where the sexual activity “exploits” the young person, when it involves prostitution or pornography or occurs in a relationship of authority, trust or dependency.

The Criminal Code prohibits:

- Any sexual activity between an adult and a child under the age of 16;
- Any sexual activity between an adult in a **position of trust, authority or dependency** towards a child under the **age of 18 years**
- Any sexual activity without the consent of a child of any age. (Depending on the activity, non-consensual sexual activity may constitute the criminal offence of sexual assault.)
- Use of children in prostitution and pornography.

The criminal law recognizes that consensual “peer sex” is not an offence in the following situations:

- A 14 or 15 year old can consent to sexual activity with a partner as long as the partner is *less than five years older* and there is no relationship of trust, authority or dependency or any other exploitation of the young person, or
- A 12 or 13 year old can consent to sexual activity with another young person who is *less than two years older* and with whom there is no relationship of trust, authority or dependency or other exploitation of the young person.

Disclosures

- **Direct disclosures:** Sometimes children will tell you directly that they are being abused or neglected. They might begin with one example and see how you react. Research shows that children often tell about their experiences many times before action is taken to respond.
- **Indirect disclosures:** In other cases, children do not tell directly, but communicate what they have experienced indirectly – through their behaviours, emotions, art, writing, appearance, or inquiries or discussions about fears, concerns or relationships. Children also divulge information through indirect statements, statements with conditions (e.g., “promise not to tell”) or third-party statements (e.g., “my friend’s parent is hurting her”).
- **3rd Party Disclosure:** In the event that a parent (or another individual) shares information around a disclosure or suspicion of abuse, the obligation to report also lies with the parent. The parent needs to be informed of their duty to report and be encouraged to make the report to the Ministry. The staff member who has been informed of the situation has the legal duty to report unless they witness the parent making the report. If this does not occur, the staff member must follow the procedures to report the disclosure or suspicion of abuse.

Duty to Report: If you think a child is being abused or neglected or is likely to suffer from abuse or be at risk of harm, as set out in the Act, you have the legal duty to report your concern to your local child welfare worker or Ministry of Children and Family Development. Failing to promptly report suspected abuse or neglect to a Ministry worker is a serious offence under the Child, Family and Community Service Act. No action for damages may be brought against you for reporting information under the Child, Family and Community Service Act, unless you knowingly reported false information.

Ministry refers to the Ministry of Children and Family Development (**MCFD**). MCFD has the lead responsibility for responding to suspected child abuse and neglect. It also delegates authority for child protection and family support to Aboriginal Child and Family Services Agencies, which provide services to their communities

Position of trust or authority is created when an individual's relationship with someone else has any of the following characteristics: decision-making power, unsupervised access, closeness inherent in the relationship, a personal nature of the activity itself.

Risk of harm is the risk that a child or vulnerable adult is likely to be physically, sexually or emotionally abused or neglected.

Suspicion of abuse occurs when you have reason to believe a child or vulnerable adult is being abused or is at risk of harm. Anyone who has reason to believe a child may be at risk – and the child's parent is unwilling or unable to protect the child – has a legal duty to report that belief to a child welfare worker. You do not have to be certain. It is the Ministry's role to investigate and determine abuse or neglect occurred.

A **vulnerable adult** is any adult aged 19 or over who:

- Receives or may need community care services because of a disability, age or illness, and/or
- Is or may be unable to take care of themselves or protect themselves against significant harm or exploitation

Examples of vulnerable adults may include:

- Older people, especially those who are unwell, frail, confused and unable either to stand up for themselves or keep track of their affairs, and
- People who are open to abuse because of learning difficulties, physical disabilities or mental illness

ROLES AND RESPONSIBILITIES

The primary responsibility for children's safety and well-being rests with their parents. Where a parent is unwilling or unable to care for a child or protect the child from harm, the primary responsibility for the protection of children from abuse rests with the Ministry. However, all YWCA staff and volunteers who come into contact with children and vulnerable adults have a duty to help protect them from abuse or risk of abuse.

The responsibility for managing this protection policy is that of the YWCA's senior management team, which will ensure that staff and volunteers will carry out their responsibilities for child protection.

YWCA Board of Directors and Senior Management Team is responsible for protecting children and vulnerable adults by creating a Risk Culture of Awareness. This includes:

- Providing oversight of a protection framework that includes establishing policies and procedures and regular monitoring
- Establishing consistent recruitment and screening processes, including criminal record check procedures
- Requiring onboarding and training sessions that include review of policies and procedures, code of ethics, duty and standards of care, and performance expectations
- Ensuring systems are in place for regular review, reporting and evaluation of effectiveness of child and vulnerable adults protection initiatives

YWCA Managers and Supervisors have the responsibility for maintaining safe environments in all programs and facilities by:

- Ensuring that staff and volunteers have read, understood and agree to the Child and Vulnerable Adults Protection Policy and Procedures and specifically indicate this by signing the Child and Vulnerable Adults Protection Sign Off (See Appendix E), when first hired and then annually thereafter.
- Implementing all procedures relating to child protection;
- Following and establishing guidelines and best practices that ensure programs are developmentally appropriate and safe for everyone;
- Ensuring that staff and volunteers with direct, unsupervised responsibilities working with children have relevant training and regular opportunities to update their skills and knowledge.
- Ensuring recruitment, screening and onboarding are implemented, including receiving a criminal record check clearance before the employee commences employment and subsequent rechecks, and that relevant certificates and licensing are current and remain current;
- Maintaining physical security and other safeguards to protect children accessing YWCA programs;
- Responding promptly and appropriately to any complaints, reports or allegations against staff or volunteers;
- Notifying their Director/VP, or to anyone on the Senior Management Team in the event that your Director/VP is not available, that a report will be/has been made to the Ministry.

YWCA Staff and Volunteers are expected to abide by this policy that includes:

- Reporting a child who is in need of protection to the Ministry as provided in the Child, Family and Community Services Act;
- Calling 911 if a staff or volunteer suspects that a child is in immediate danger;
- Reporting immediately any suspicion of abuse or neglect to the Ministry;
- Contacting police if a staff or volunteer suspects that a vulnerable adult's safety is at risk;
- Notifying their manager that a report will be/has been made to the Ministry;
- Following guidelines and best practices to ensure that programs and services are developmentally appropriate;
- Creating a safe and caring environment for children and vulnerable adults;
- Following the YWCA Child and Vulnerable Adults Protection Policy and Procedures;
- Upon hire and annually thereafter, reading and agreeing to the YWCA Child and Vulnerable Adults Protection Policy and Procedures by signing the Sign Off Sheet (See Appendix E)
- Producing criminal record checks and recheck clearances, and immediately informing management when their criminal record check clearance may be in jeopardy
- Ensuring that their relevant licenses and certificates are kept current.

CODE OF CONDUCT FOR THE PROTECTION OF CHILDREN AND VULNERABLE ADULTS

While working at the YWCA, staff and volunteers will encounter and interact with children and vulnerable adults, even if not working directly with them. The YWCA is committed to treating everyone with respect and dignity and to help people grow and develop to their full potential in a safe and caring environment.

The YWCA requires all staff and volunteers to observe the YWCA policies and procedures on Operating Principles and Staff Boundaries, as well as the code of ethics relevant to their field of employment. In addition, YWCA staff and volunteers must adhere to the following Code of Conduct outlining practices that are acceptable, those to be avoided, and those absolutely unacceptable, including verbal and non-verbal actions when interacting with children and vulnerable adults.

Any breach of this Code of Conduct will be taken very seriously and dealt with in accordance with our performance management and/or disciplinary policies and procedures.

Good practices to protect and promote children's rights:

- Treat them with dignity, sensitivity and respect in consideration of their unique characteristics, needs and abilities;
- Make time to listen, talk to and get to know the children, including:
 - Giving constructive feedback rather than negative criticism.
 - Offering choices if you can and make requests in clear terms geared to the child's level
 - Giving encouragement, in words or with a smile
- Enable children to regard their bodies as their own property:
 - Show affection with appropriate touching, e.g. patting child on the back or giving one-armed hugs
 - Seek the permission of the child before touching, e.g. ask them if they need a hug or pat on the back, and if engaged in activity that requires contact, before the activity begins, tell the child what you are going to do and why you need to do it.
 - Do not touch a child in their private areas
- Make sure that children know the YWCA's rules about behavior, and get help from a colleague when you are having difficulty dealing with a specific child and/or behavioral incident
- Be vigilant and aware of how actions can be misinterpreted, and always work in an open environment.
 - Avoid being alone with a child in a setting; whenever possible, have another adult present
 - If you need to speak privately with a child, position yourself in view of others
 - Respect children's privacy in bathrooms or changing rooms
 - Ensure the number of adults is appropriate to safely supervise an activity
 - Be sensitive to the possibility of developing favouritism or becoming over-involved or spending a great deal of time with any one child.

Good practices when interacting with Vulnerable Adults:

- Treat all people with dignity, sensitivity and respect
- Give full consideration to their unique characteristics, needs, interests and wishes
- Presume mental capacity and participation in decision-making
- Respect their privacy

Unacceptable Practices

YWCA employees and volunteers need to be aware that in the context of your role at the YWCA, the following practices will never be sanctioned and may also be prohibited by law:

- Engaging in rough physical contact
- Forming intimate emotional, physical or sexual relationships with clients, including children and vulnerable adults
- Allowing or engaging in sexually suggestive touching
- Engaging in or allowing others to swear excessively or use sexualized language in an aggressive manner unchallenged
- Making sexually suggestive comments, even in fun
- Reducing a client, including child or vulnerable person, to tears as a form of control
- Using your size, authority or voice to intimidate
- Making comments of an inappropriate nature
- Verbally or emotionally abusing others, including a child, young person or vulnerable adult
- Exploiting others financially in any way
- Allowing allegations of abuse made by a child or vulnerable adult to go unreported or not acted upon
- Inviting a client, including child or vulnerable adult, to visit or stay with you at your home
- Asking a child or vulnerable adult to keep a secret from others
- Taking a client in your personal vehicle unless required as part of your responsibilities
- Any form of bullying or harassment

RECOGNIZING SIGNS OF ABUSE / NEGLECT

YWCA staff needs to be aware of and alert to signs of child abuse, including:

- **Physical Abuse** which is a deliberate physical assault or action by a person that results in, or is likely to result in, physical harm to a child. It includes the use of unreasonable force to discipline a child or prevent a child from harming themselves or others. The injuries sustained by the child may vary in severity and range from minor bruising, burns, welts or bite marks to major fractures of the bones or skull, to in the most extreme situations, death.
- **Emotional Harm** which is the most difficult type of harm to recognize. Under the Child, Family and Community Service Act, a child is defined as emotionally harmed if they demonstrate severe anxiety, depression, withdrawal or self-destructive or aggressive behavior.

Emotional abuse can include a pattern of:

- Scapegoating;
 - Rejection;
 - Verbal attacks on the child;
 - Threats;
 - Insults; and
 - Humiliation.
- **Sexual abuse** is when a person uses a child for sexual purposes. It can include:
 - Sexually touching a child or inviting a child or to touch;
 - Intercourse (vaginal, oral or anal);
 - Threatening sexual acts, obscene gestures or communications, or stalking;
 - Sexual references to the child's body or behavior with words or gestures;
 - Asking the child to expose their body for sexual purposes;
 - Deliberate exposure of the child to sexual activity or material; or
 - Exposure to sexual aspects of organized or ritual abuse.
 - **Sexual exploitation** is when a child becomes involved in sexual activity, usually through manipulation or coercion, in exchange for things like money, drugs, food or shelter. Sexual activities include:
 - Sexual acts;
 - Sex for the purpose of entertainment;
 - Escort or massage parlor services; and
 - Appearing in pornographic images.
 - **Neglect** is failure to provide for a child's basic needs by the parent or guardian, to the point where the child is, or could be, harmed. Neglect includes failing to provide a child with food, shelter, basic health care, supervision, nurturing or protection from risks. Neglect is not always intentional, as it may be a result of insufficient resources or other circumstances beyond a person's control.

Possible Indicators of Abuse and Neglect

The following tables list common physical and behavioural indicators or “warning signs” of possible child abuse or neglect. By themselves, these indicators do not prove that a child has been abused or neglected. They can result from phenomena such as divorce, separation, the death of a significant person or the arrival of a new sibling. This is why indicators must be assessed by child welfare workers.

If you have questions, contact a child welfare worker. The worker can help you determine if the indicators you have observed are cause for concern. You do not have to give your name. Remember it is always best to err on the side of caution.

Type	Physical Indicators	Behavioural Indicators
Physical Abuse	<ul style="list-style-type: none"> ▪ any injury to an infant who is not yet mobile, especially head/facial injuries ▪ injuries to a toddler or older child for which there is no explanation, the explanation does not fit with the injuries, or the story keeps changing ▪ injuries at different stages of healing ▪ injuries that have a pattern or look like they may have been caused by an object (e.g., hand, stick, buckle, stove element), and ▪ bruising in unusual places such as ears, trunk, neck or buttocks 	<ul style="list-style-type: none"> ▪ afraid or reluctant to go home, or runs away ▪ shows unusual aggression, rages or tantrums ▪ flinches when touched ▪ has changes in school performance and attendance ▪ withdraws from family, friends and activities previously enjoyed ▪ poor self-esteem (e.g. describes self as bad, feels punishment is deserved, is very withdrawn), and ▪ suicidal thoughts or self-destructive behaviour (e.g. self-mutilation, suicide attempt, extreme risk-taking behaviour)
Sexual Abuse	<ul style="list-style-type: none"> ▪ unexplained or persistent pain, bleeding or unusual discharge in the genital or anal area ▪ pregnancy, and ▪ sexually transmitted diseases 	<ul style="list-style-type: none"> ▪ engages in age-inappropriate sexual play or exhibits age-inappropriate sexual knowledge (e.g. through drawing or play) ▪ forces or coerces another child to engage in sexual play ▪ inserts objects into vagina or rectum ▪ directs sexually intrusive behaviour to adults ▪ has unexplained gifts, new clothes or money ▪ has changes in school performance and attendance ▪ is secretive about “new” friends, activities, phone calls or Internet use ▪ has unexplained developmental setbacks (e.g. was toilet

		<p>trained but reverts back)</p> <ul style="list-style-type: none"> ▪ is involved in sexually exploitive activities, such as performing sex acts for money ▪ is involved in behaviours such as misuse of drugs or alcohol, stealing, fire-setting, and ▪ flinches when touched
Emotional Harm	<ul style="list-style-type: none"> ▪ bed wetting and/or frequent diarrhea, and ▪ frequent psychosomatic complaints, headaches, nausea, abdominal pains 	<ul style="list-style-type: none"> ▪ mental or emotional development lags ▪ isolated and has no friends or complains of social isolation ▪ behaviours inappropriate for age ▪ fear of failure, overly high standards, reluctant to play ▪ fears consequences of actions, often leading to lying ▪ extreme withdrawal or aggressiveness, mood swings ▪ overly compliant, too well-mannered ▪ excessive neatness and cleanliness ▪ extreme attention-seeking behaviours ▪ poor peer relationships ▪ severe depression, may be suicidal ▪ runaway attempts ▪ violence is a subject for art or writing ▪ forbidden contact with other children ▪ shows little anxiety towards strangers, and ▪ unusually severe anxiety or worries
Neglect	<ul style="list-style-type: none"> ▪ injuries where medical care has been unusually delayed or avoided ▪ injuries resulting from a lack of supervision ▪ medical or dental needs that are consistently unattended to ▪ “failure to thrive” in a child where no medical reason has been found ▪ clothing consistently inadequate for weather conditions ▪ persistent hunger ▪ poor or inadequate nutrition, 	<ul style="list-style-type: none"> ▪ forages for, hoards or steals food ▪ developmental delays or setbacks related to a lack of stimulation ▪ poor school attendance ▪ inappropriately takes on a caregiver role for a parent or siblings ▪ tired or unable to concentrate at school ▪ appears sad or has flat affect ▪ reluctant to go home; speaks of being or appears to be left alone at home a lot, unsupervised ▪ is involved in behaviours such as misuse of drugs or alcohol, stealing, fire-setting and ▪ does not respond to affection or stimulation

	and <ul style="list-style-type: none">poor personal hygiene	
--	---	--

Source: The B.C. Handbook for Action on Child Abuse and Neglect, Ministry for Children and Families, p. 26 - 29

RESPONDING TO ALLEGATIONS OF ABUSE / NEGLECT

The following section will provide specific procedures on:

- Handling Disclosure or Suspicion of Abuse of a:
 - Child or
 - Vulnerable Adult
- Responding to a Suspicion/Disclosure/Allegation of Abuse Against a YWCA Employee or Volunteer

HANDLING DISCLOSURE OR SUSPICION OF ABUSE OF A CHILD

When to Report

YWCA Staff/Service Provider and Partner Staff/Volunteers must be aware of their legal responsibility to ensure the safety of children in their care. The duty to report overrides all claims of privilege or confidentiality.

You are not required to wait until a child has been harmed to make a report. If you suspect abuse or neglect and there are reasonable grounds to believe that a child is in need of protection, you have a legal obligation to report.

The staff member that receives the disclosure or suspects abuse is responsible for reporting. You are not responsible for determining whether the abuse and/or neglect actually happened or is likely to happen. That is the job of the Ministry child protection social worker.

A report is not an accusation; it raises the concern and is a request for an investigation. Reporting can be the beginning of positive change, and can keep the child and perhaps other children from harm.

No action for damages may be brought against you for reporting information under the Child, Family and Community Service Act, unless you knowingly reported false information.

Talking to the Child

When working with children, you are in a position of trust. For this reason, you may find yourself in a situation where a child discloses to you, or you may see something that makes you suspect a child has been or is likely to be abuses or neglected.

If you find yourself in this situation, it is important to honour the child and remember your role is to report to a child welfare worker. When talking to the child, do not interview him/her and be sensitive to their needs. Your primary role is to support the child, gather basic information and report it to a child welfare worker as quickly as possible.

- **Stay calm and listen**
 - The child needs to know that you are calm and available to help.
 - Reactions of shock, outrage or fear may inhibit the child and make them feel more anxious or ashamed.
 - Respond in a non-judgmental and matter-of-fact way.

- **Go Slowly and Limit the Interaction to Listening**
 - It is normal to feel unsure about what to do or say.
 - Avoid asking questions, let the child lead the conversation.
 - Once you have enough information and reason to believe that abuse or neglect has occurred, stop gathering facts and be supportive.
 - Limit your discussion to finding out generally what took place

- **Be Supportive**
 - Reassure the child that they have not done anything wrong.
 - It is helpful to let the child know that:
 - They're safe with you;
 - They are not in trouble;
 - You are glad that they told you about this;
 - They have done the right thing telling you about this;
 - You will have to tell others who can be trusted to help solve this problem.

- **Tell the Child What Will Happen Next**
 - The child may feel anxious and vulnerable – tell them only what you know (e.g. they are not in trouble and that you will help)
 - Avoid making promises
 - Only provide reassurances that are realistic and achievable
 - Discuss with child what you think will happen next and who will be involved

- **Don't Delay Making the Report**
 - Communicate to your manager that you have a report to make and you need time to make the call. They do not need to know details.

- **Complete Pertinent Information in Appendix A** in preparation to making the report to the Ministry:
 - Child's name and age
 - Description of the incident, situation or disclosure
 - Factual information only based on what was observed or what was disclosed
 - Any immediate concerns about the child's safety
 - Any information as to why you believe the child is at risk
 - Any statements or disclosures made by the child
 - Don't delay making the report because you don't have all of the information.
 - Your legal responsibility is to report, not determine if abuse has occurred.

- Sign your name and date
- **Call the Police / Ministry to Make Your Report**
 - If the child is in immediate danger, the police should be called first. Dial 911.
 - Call the Ministry after calling the police or immediately if the child is not in immediate danger. Dial the Ministry of Children and Family Development Local Number 604-660-4927 or Toll-Free Number 1-800-663-9122 any time of the day or night.
 - Complete Appendix A by recording the conversation with the Ministry
 - Record any information/next steps on action the Ministry social worker said will occur
- **Call Your Manager**
 - Notify your supervisor that you have made a report or if your supervisor is not available, call the next person responsible for your program, up to and including the Director.
 - Do not share details about the people involved or the incident.
- **Maintain Confidentiality**
 - Be aware of your legal responsibility to ensure the safety of children in your care. The duty to report overrides all claims of privilege or confidentiality
 - Do not contact the parents unless instructed to do so by the MCF protection worker. It is the responsibility of the Ministry to inform the parents of the investigation.
 - Do not share information with anyone who is not directly involved with the investigation. Discussion about the case among other staff and/or volunteers is not acceptable and could leave you open to liability for slander.
- **Submit Documentation**
 - Once the Appendix A is completed, ensure it is sealed in an envelope, and
 - Give the envelope to your Manager, in person. Please do not send through internal mail for confidentiality reasons.

Manager's Responsibilities

- The manager will then email their Director / VP, VP of Human Resources and Manager, Purchasing and Corporate Strategy, informing them that a report has been made
- The manager checks off and signs the relevant parts of the Child Abuse Reporting Form and places in an envelope, in person, to the Manager, Purchasing and Corporate Strategy at the Program Centre.
- Once the envelope is received by the Manager, Purchasing and Corporate Strategy, it will be filed in a locked file cabinet.

RESPONDING TO DISCLOSURE OR SUSPICION OF ABUSE - VULNERABLE ADULTS

British Columbia does not have legislation to protect adults like it does for children and young people, which means there are no adult protection agencies as such. Therefore, it is up to all of us to act.

Anyone who has reduced capacity to look after their own interests, needs and well-being can be at risk of abuse. For example, an adult with a physical disability or mental health or developmental or intellectual disability, as well as some seniors, may be at risk of abuse, neglect, or exploitation. However, please remember that all interventions for vulnerable adults need to take into account their ability to make informed choices about the way they want to live and the risks they want to take. Refrain from offering advice or personal opinions, and only provide support/resources if it is asked for specifically.

Alleged, suspected or witnessed abuse of a vulnerable adult may constitute a criminal offence and the police should be informed.

- **Contact Police**
 - If the vulnerable adult's safety is at risk or in immediate danger, dial 911. The police have the ability to check on the person's wellbeing.
 - If the vulnerable adult is not in immediate danger but you still want to report it call the non-emergency police line, see Appendix C for Resources for Vulnerable Adults

- **Contact BC 211**
 - If the vulnerable adult is not in immediate danger and is looking for assistance, please advise them to contact BC 211 by dialing 2-1-1.
 - BC 211 provides information and referrals to social, community, and government services in the Metro Vancouver, Fraser Valley and Squamish-Lillooet Regional Districts.
 - Refrain from offering advice or personal opinions and only provide support/resources if it is asked for specifically.

- **Complete the YWCA Accident/Incident Report Form**
 - Record brief information, indicating the vulnerable adult's name, the date the call was made to police services and the program location.
 - In the description, record "call made to the police regarding suspected abuse of a vulnerable adult" then sign and date the incident report form and provide copies to your Program Manager, Director/VP and Manager, Purchasing and Corporate Responsibility. .

- **Contact Your Supervisor**
 - Inform your manager that you have provided 2-1-1 and any other resources provided.

For more resources on who to contact, please go to APPENDIX E: RESOURCES FOR ABUSE OF OLDER ADULTS

RESPONDING TO A SUSPICION/DISCLOSURE/ALLEGATION OF ABUSE MADE AGAINST A YWCA EMPLOYEE OR VOLUNTEER

Staff must follow these procedures when an allegation or disclosure is made involving an employee/volunteer, or when abuse by a staff/volunteer is witnessed.

Procedure:

- Treat the allegation seriously and confidentially.
- Report to your immediate supervisor and inform them that you need to report an allegation of abuse.
- If you are unable to inform your immediate supervisor, or the allegation is against your immediate supervisor, call your Director / VP or continue to call until you speak with someone on the senior management team, informing them that an allegation is being reported.
- Manager -> Director/Vice President -> VP, Human Resources -> CEO
- Staff or volunteer will complete the YWCA Child Abuse Reporting Form (Appendix A). Staff in licensed childcare programs must complete a Community Care Facilities Licensing (CCFL) Incident Report (see Appendix B).
- Follow the directions from your Director, VP and VP, Human Resources for next steps, which may include:
 - Calling the Ministry,
 - Calling the Police
 - Calling the Licensing Officer (licensed childcare programs only) and
 - Information regarding who is responsible for calling to make the report
- Any information or feedback from these calls should be completed on the Appendix A form.
- Seal the completed Appendix A and, if applicable, Community Care Facilities Licensing (CCFL) Incident Report form in an envelope.
- Give the envelope to your manager in person.
- Staff and volunteers are to keep information confidential and not discuss the allegation with other staff, volunteers or parents. Any questions regarding the incident should be referred to the VP, Human Resources

Manager Procedures

The manager of the program where the allegation takes place has several key responsibilities. These include, but are not limited to the following:

- Providing guidance to the staff or volunteer when they call regarding an allegation and instruct them to complete an Appendix A form without delay.
- The manager will call their Director/ VP and VP, Human Resources. It is the manager's responsibility to ensure they have the relevant information.
- The manager will ensure that they know whether or not to instruct their staff to call the Ministry.
- Manager will follow the steps and instructions provided by their Director / VP and VP, Human Resources investigation process and/or suspension
- Licensed child care programs require a Community Care Facilities Licensing (CCFL) Incident Report. The manager must ensure this is completed and that the Licensing Officer is called.

- The manager must take immediate steps to ensure that children are safe. This might include taking the necessary steps to ensure that the suspected staff member or volunteer is not left alone with children or suspending the employee with pay during the investigation period (as directed by the VP, Human Resources).
- The manager (as directed by their Director / VP) will speak directly with the staff or volunteer that has the allegation against them, informing them that the child protection procedures are being followed, including suspension (with pay for staff) during the course of the investigation.
- The manager will update the relevant Director/VP and the VP, Human Resources as required
- The manager will keep information confidential and not discuss the allegation with other staff, volunteers or parents unless instructed to do so. Any questions regarding the incident should be referred to the VP, Human Resources

VP, Human Resources

- The VP, Human Resources will provide direction to the manager and relevant Director / VP regarding the staff or volunteer with the allegation against them throughout the steps of the investigation.
- The VP, Human Resources will inform the manager whether or not the staff should make a call to the Ministry of Child and Family Development, Police, or Licensing Office
- The VP, Human Resources will involve whomever is necessary in the investigation, through to its conclusion.
- The VP, Human Resources will inform the CEO and insurer, as required, throughout the process.
- The crisis response team will be formed, as required.
- Any questions and enquiries are to be referred to the VP, Human Resources.
- All documentation will be stored indefinitely.

Investigation Outcome

The YWCA will respond to the outcome of the child abuse investigation in the following manner:

MCF / CCLC and or Police concludes:	YWCA Response:
1. Allegation / Report Unfounded	<ul style="list-style-type: none"> ▪ Staff returns to position. ▪ Report completed as unfounded. ▪ Other staff and colleagues informed of investigation outcome.
2. Investigation is inconclusive	<ul style="list-style-type: none"> ▪ A meeting is held with the staff that had the allegation made against them to state future expectations for their position.
3. Investigation substantiates the allegation	<ul style="list-style-type: none"> ▪ If the investigation substantiates the allegation, employment will be terminated, effective immediately

APPENDIX A: YWCA CHILD ABUSE REPORTING FORM

PRIVATE AND CONFIDENTIAL

If you have reason to believe a child is being abused or neglected, and

- in immediate danger, call the police:
 - 9-1-1 and/or
- not in immediate danger, call the Ministry of Children and Family Development:
 - Local Number 604-660-4927 OR Toll-Free Number 1-800-663-9122

Date Form completed: _____

Name of YWCA Program / Department: _____

YWCA Program Name/Course: _____

Child's Name: _____ Male Female

Child's Age: _____ Date of Birth: _____
(month/day/year)

Child's Address: _____
(street) (city/province) (postal code)

Child's Phone Number: _____

Name of Mother: _____ Name of Father: _____

Address of Mother (if different to Child)

Address of Father (if different to Child)

Tel Phone Number: _____ Telephone Number: _____

Care and Custody arrangements, regarding child, if known: _____

Reason for this Report:

- Suspicion of abuse
- Child disclosure
- Allegation of abuse against a YWCA Staff/Service Provider and Partner Staff/Volunteers

Include:

- Details of concern, incident, or allegations
- Dates, times and who was present
- Statements made – including what the child said
- Observed injuries and areas of body, if applicable

Do you have a concern about the child's immediate safety? Please explain:

Are there any other persons that you know of at risk? Sibling, children, staff, volunteers

If other staff/volunteers were present, include their full names and describe their involvement:

Other comments or observations:

Report made to:

Ministry for Children and Families

Name of Ministry Worker: _____

Date of Call: _____ Time of Call: _____

Action the Ministry Social Worker said will occur:

Community Care Facilities Licensing (for licensed child care only)

Name of Licensing Officer: _____

Date of Call: _____ Time of Call: _____

Action the Ministry Social Worker said will occur:

Internal Reporting

YWCA Program Manager

Name of Program Manager: _____

Date of Call: _____ Time of Call: _____

YWCA Director/VP

Name of Director: _____

Date of Call: _____ Time of Call: _____

YWCA VP, Human Resources

Name of VP, Human Resources: _____

Date of Call: _____ Time of Call: _____

YWCA Manager, Corporate Responsibility and Purchasing

Name of Program Manager: _____

Date of Call: _____ Time of Call: _____

Staff / Volunteer Making Report

Name of Staff Member: _____

Position: _____

Staff Signature: _____ Date: _____

APPENDIX B: COMMUNITY CARE LICENSING FACILITIES INCIDENT REPORT

Notifying Community Care Licensing Facilities of a Reportable Incident

Section 55 (2) (a) (b) of the Child Care Licensing Regulation states:

(2) A licensee must notify the medical health officer within 24 hours after

(a) a child is involved in, or may have been involved in, a reportable incident described in Schedule H while under the care or supervision of the licensee, or

(b) it comes to the attention of the licensee that a child enrolled in the community care facility has a reportable communicable disease as listed in Schedule A or B of the Health Act Communicable Disease Regulation, B.C. Reg. 4/83.

Please note

Section 55 (1) (a) (b) of the Child Care Licensing Regulation states:

(1) A Licensee must immediately notify a parent or emergency contact if, while under the care or supervision of the licensee, the child

(a) becomes ill or is injured, or

(b) is involved in, or may have been involved in, a reportable incident described in Schedule H

How to report an Incident

- Complete all sections of the Incident Report Form
- Ensure the staff person with the most information regarding the incident completes the form
- Ensure the incident report is signed off by the Manager/Licensee and that any corrective measures/actions have been noted on the report form
- Submit the completed form to your Licensing Officer by fax or mail
- Keep a copy for your records, (it is not necessary to submit the original form if you fax your report)

APPENDIX C: COMMUNITY CARE FACILITIES LICENSING INCIDENT FORM



Community Care Facilities Licensing - Child Care INCIDENT REPORT

FACILITY NAME AND ADDRESS (INCLUDE CITY & POSTAL CODE)		LICENCE NUMBER	PHONE NUMBER	
NAME OF PERSON(S) IN CARE AFFECTED		SERVICE TYPE	DATE OF BIRTH (d/m/y)	SEX <input type="checkbox"/> M <input type="checkbox"/> F
NAME OF OTHER PERSONS INVOLVED (INDICATE WHETHER STAFF, VISITOR, OTHER PERSON/CHILD IN CARE, ETC)			NUMBER OF PERSONS IN CARE AFFECTED	
INCIDENT TYPE				
OFFICE USE: INCIDENT TYPE CONFIRMED BY CCFL <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Reportable				
<input type="checkbox"/> Aggressive/Unusual Behaviour	<input type="checkbox"/> Emergency Restraint	<input type="checkbox"/> Medication Error	<input type="checkbox"/> Physical Abuse	
<input type="checkbox"/> Attempted Suicide	<input type="checkbox"/> Emotional Abuse	<input type="checkbox"/> Missing/Wandering	<input type="checkbox"/> Poisoning	
<input type="checkbox"/> Choking	<input type="checkbox"/> Fall	<input type="checkbox"/> Motor Vehicle Injury	<input type="checkbox"/> Service Delivery Problem	
<input type="checkbox"/> Death	<input type="checkbox"/> Financial Abuse	<input type="checkbox"/> Neglect	<input type="checkbox"/> Sexual Abuse	
<input type="checkbox"/> Disease Outbreak/Occurrence	<input type="checkbox"/> Food Poisoning	<input type="checkbox"/> Other Injury	<input type="checkbox"/> Unexpected Illness	
DATE OF INCIDENT (d/m/y)	TIME OF INCIDENT	LOCATION OF INCIDENT (BE SPECIFIC)	EQUIPMENT IN USE (IF APPLICABLE)	
DESCRIBE THE INCIDENT: (ATTACH ADDITIONAL SHEET IF REQUIRED)				
INJURY AREA				
<input type="checkbox"/> Arm	<input type="checkbox"/> Chest	<input type="checkbox"/> Hand	<input type="checkbox"/> Hip	<input type="checkbox"/> Mouth/Teeth
<input type="checkbox"/> Back	<input type="checkbox"/> Foot	<input type="checkbox"/> Head	<input type="checkbox"/> Leg	<input type="checkbox"/> Neck
				<input type="checkbox"/> Shoulder
				<input type="checkbox"/> Torso
				<input type="checkbox"/> Other (specify) _____
INJURY TYPE				
<input type="checkbox"/> Abrasion	<input type="checkbox"/> Broken Bone	<input type="checkbox"/> Bruise	<input type="checkbox"/> Burn	<input type="checkbox"/> Dislocation
<input type="checkbox"/> Sprain	<input type="checkbox"/> Other (specify) _____			<input type="checkbox"/> Infection
				<input type="checkbox"/> Laceration
NOTIFICATION	YES	NO	DATE	TIME
MANAGER NOTIFIED	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
PHYSICIAN NOTIFIED	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
FAMILY/CONTACT NOTIFIED	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
OTHER (SPECIFY) _____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
DESCRIBE CORRECTIVE MEASURES AND ACTION TAKEN TO PREVENT RECURRENCE: (ATTACH ADDITIONAL SHEET IF REQUIRED)				
FORM COMPLETED BY (NAME)	POSITION/TITLE	SIGNATURE	DATE (d/m/y)	TIME
LICENSEE/MANAGER (NAME)	POSITION/TITLE	SIGNATURE	DATE (d/m/y)	TIME

APPENDIX D: COMMUNITY CARE FACILITIES LICENSING SCHEDULE H: REPORTABLE INCIDENTS

Schedule H

[am. B.C. Regs. 95/2009, s. 4; 205/2013, Sch. 1.]

(Sections 52 and 55 [harmful actions not permitted; notification of illness or injury])

REPORTABLE INCIDENTS

1 For the purpose of this regulation, any of the following is a reportable incident:

"aggressive or unusual behaviour", which means aggressive or unusual behaviour by a child towards other persons, including another child, which has not been appropriately assessed in the child's care plan;

"attempted suicide", which means an attempt by a child to take his or her own life;

"choking" means a choking incident involving a person in care that requires

(a) *first aid,*

(b) *emergency care by a medical practitioner or nurse practitioner, or*

(c) *transfer to a hospital;*

"death", which means any death of a child;

"disease outbreak or occurrence", which means an outbreak or the occurrence of a disease above the incident level that is normally expected;

"emergency restraint", which means any use of a restraint that is not approved and documented in a child's care plan;

"emotional abuse", which means any act, or lack of action, which may diminish the sense of well-being of a child, such as verbal harassment, yelling or confinement, perpetrated by a person not in care;

"fall", which means a fall of such seriousness, experienced by a child, as to require emergency care by a medical practitioner or nurse practitioner, or transfer to a hospital;

"financial abuse", which means

(a) the misuse of the funds and assets of a child by a person not in care, or

(b) the obtaining of the property and funds of a child by a person not in care without the knowledge and full consent of the child or the child's parent;

"food poisoning" means a food borne illness involving a person in care that requires emergency care by a medical practitioner or nurse practitioner, or transfer to a hospital;

"medication error", which means an error in the administration of a medication which adversely affects a child or requires emergency intervention or transfer to a hospital;

"missing or wandering person", which means a child who is missing;

"motor vehicle injury", which means an injury to a child that occurs during transit by motor vehicle while the child is under the care or supervision of the licensee;

"neglect", which means the failure of a care provider to meet the needs of a child, including food, shelter, care or supervision;

"other injury", which means an injury to a child that requires emergency care by a medical practitioner or transfer to a hospital;

"physical abuse", which means any physical force that is excessive for, or is inappropriate to, a situation involving a child and perpetrated by a person not in care;

"poisoning", which means the ingestion of a poison or toxic substance by a child;

"service delivery problem", which means any condition or event which could reasonably be expected to impair the ability of the licensee or his or her employees to provide care, or which affects the health, safety or well-being of children;

"sexual abuse", which means any sexual behaviour directed towards a child by an employee of the licensee, a volunteer or any other person in a position of trust, power or authority, and includes

(a) any sexual exploitation, whether consensual or not, and

(b) sexual activity between children if the difference in age or power between them is so significant that the older or more powerful child is clearly taking sexual advantage of the younger or less powerful child;

"unexpected illness", which means any unexpected illness of such seriousness that it requires a child to receive emergency care by a medical practitioner or transfer to a hospital.

APPENDIX E: RESOURCES FOR ABUSE OF OLDER ADULTS

British Columbia

- Vancouver Coastal Health Elder Abuse Designated Responder: 1.877.732.2899
- Vancouver Police Department: 604.717.3321
- Victoria Island Health Authority Designated Responder: 1.877.734.4101
- Community Living BC Designated Responder: 1.877.660.2522
- Family Caregiver Network Association: 1.877.520.3267
- Seniors Help & Information Line: 1.800.465.4911
- BC Centre Elder Advocacy & Support: 1.866.437.1940
- BC Crisis Centre Distress Line: 1.866.784.2433
- BC Ombudsperson: 1.800.567.3247

Emergency Line	9-1-1
Abbotsford Non-Emergency Police Line	604-859-5225
Burnaby Non-Emergency Police Line	604-294-7922
Chilliwack Non-Emergency Police Line	604-792-4611
Coquitlam Non-Emergency Police Line	604-945-1550
Langley Non-Emergency Police Line	604-532-3200
New Westminster Non-Emergency Police Line	604-525-5411
North Vancouver Non-Emergency Police Line	604-985-1311
Richmond Non-Emergency Police Line	604-278-1212
Sunshine Coast Non-Emergency Police Line	604-885-2266
Surrey Non-Emergency Police Line	604-599-0502
Vancouver Non-Emergency Police Line	604-717-3321

BC 211 Phone Line	2-1-1
BC 211 Text Line	604-836-6381
BC 211 E-mail	help@bc211.ca

APPENDIX F: WHAT HAPPENS WHEN A REPORT IS MADE

Your Role

When you report to the Ministry that a child may have been abused or neglected, the Ministry social worker will talk to you about what happens next.

As a service provider, you may be well positioned to offer support or assistance to a child who may have been abused or neglected. For example, the social worker may ask you to assist by:

- Offering an appropriate place for the social worker to interview the child
- Being present during the interview to support the child if requested

However, it is very likely that after you have made a report to the Ministry, you will not be contacted or provided with any updates. This part of the process can be difficult, especially if you see the child and/or their family often. It is important to remember that you have done your part by reporting to the Ministry and that it is out of confidentiality and respect for the privacy of the child that you are not provided with updates.

Additionally, if a parent or guardian approaches you to inquire about whether or not you made a report, you have three options, depending on what makes you feel most comfortable.

- You can deny making the report (whether or not this is the case)
- You can confirm that the YWCA has a duty to report
- You can refer the inquiry to your manager (who will confirm our policies)

Do not discuss the details of the event or report with parents/guardians or with staff, volunteers or anyone else unless the Ministry social worker has instructed you to do so.

Note: The subject matter of reports can be distressing, especially given the confidential nature of the reporting process. If you need support, please contact your manager.

The Role of the Social Worker

After receiving your report, the social worker will assess the situation. The purpose of the assessment is to gather enough information to determine:

- The most appropriate response to the report, and
- Whether the child is at immediate risk of harm.

If the child is at immediate risk of harm, the social worker will take immediate action in collaboration with other service providers, such as police, school personnel, and medical professionals.

After the assessment process is complete, if the child is not at immediate risk of harm, the social worker may:

- Offer the family support services
- Refer the child and/or family to a community agency, or
- Take no further action, if no further action is needed.

The Role of the Police

Police can respond quickly to protect children who are in immediate danger. They also play a key role when a criminal offence may have been committed against a child.

The child protection worker takes the information from the caller and uses it to determine the initial urgency of the complaint. If it appears that physical or sexual abuse has occurred, the child protection worker must contact the police immediately. Physical and sexual abuse of a child and withholding the necessities of life from a child are criminal offences and police will intervene at this point to enforce the criminal law.

Source: BC Handbook for Action on Child Abuse and Neglect pg. 46 - 54

APPENDIX G - STATEMENT OF UNDERSTANDING

YWCA Child Protection and Vulnerable Adults Policies and Procedures Annual Sign Off

Statement of Understanding

- I have read the SUMMARY OF THE CHILD PROTECTION AND VULNERABLE ADULTS POLICIES AND PROCEDURES, updated June 2017
- I understand my legal duty to report under the Child, Family and Community Service Act of British Columbia; and
- I understand that my terms and conditions of employment require:
 - A valid Criminal Record Check Clearance as it relates to working with children and/or vulnerable adults;
 - If, during the course of my employment, I am charged and/or convicted of a relevant offence, it is my responsibility to immediately inform management of such information, and
 - Valid current licenses and certificates as it pertains to my profession.Failure to do so may result in immediate discharge from employment.

Name (please print): _____

Signature: _____ Date: _____

Manager's Name (please print): _____

Manager's Signature: _____ Program: _____
(Please print)

Note: This form is to be submitted to the Human Resources Department