## 2.2.3

### Child protection

Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.

Week 28 *2.9.2024* 

Section 5. Exceeding Standards: Embedded Practice (Nominated Supervisor)

Identify exceeding practice or implement how to become exceeding.



### Assess your practice first.

Read the below description and evaluate it in relation to your practices.

Exceeding – Embedded Practice. Educators act immediately when they have child protection concerns. For instance, if a child shows signs of neglect or abuse, such as frequent bruising or withdrawal, educators document these observations and report them to the Nominated Supervisor. The team follows the child protection policy, which may involve notifying child protection services or other authorities. Regular discussions with staff ensure everyone understands their responsibilities and maintains a vigilant, proactive approach.

If you are doing similar practices to the example, use the below question to help you write your **'exceeding practice for embedded'** description so you can add it to your QIP or SAT (NSW only).

For **Exceeding** the QIP and Self-Assessment Tool (SAT)

Please give an example where you or other educators have raised concerns from a child protection perspective, discussed your responsibilities, and taken appropriate action.

If you and your educators need to learn how to achieve exceeding – embedded practice, proceed here and do below.

The following section outlines the steps to ensure you are exceeding in Embedded Practice. If you have already successfully completed the previous section demonstrating how you are exceeding in Embedded Practice, you do not need to complete this section.

# Look at the words in detail to identify what is exceeding.

Please give an example where you or other educators have raised concerns from a child protection perspective, discussed your responsibilities, and taken appropriate action.

There are two parts of the question above, here is how we can look at each part.

Part 1: Observing Interaction and Recognising Signs
Example: During a parent-educator conference, an
educator notices that a typically energetic and cheerful
child has become unusually quiet and withdrawn. The
child's parents mention that they've noticed changes in
the child's behaviour at home too. The educator takes
note of this change and expresses concern to the
centre's coordinator. They discuss how such
behavioural shifts could potentially signal emotional or
psychological distress. The coordinator appreciates the
educator's observation and suggests keeping an eye on
the child's behaviour over the next few days to gather
more information. This example shows the educator's
ability to recognise signs of potential issues and initiate
a discussion with appropriate colleagues.

Part 2: Training and Taking Appropriate Action
Example: At a staff meeting, the centre's director
discusses the importance of child protection training
and its practical implications. They bring up a recent
incident where a child's frequent absences and
unexplained injuries raised concerns. One of the
educators shares that they recently attended a child
protection workshop and recognised some of the signs
mentioned. The educator brought their concerns to the
attention of both the centre's management and the
child's parents. The management then collaborated
with local child protection authorities to conduct a
thorough assessment of the situation. This example

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showcases the impact of proper training and the educator's proactive approach in raising concerns and taking appropriate action.

It is important to ensure that we make it very clear how these above concepts have created change in your service.

Please give an example where you or other educators have raised concerns from a child protection perspective, discussed your responsibilities, and taken appropriate action.

Scenario 1: During outdoor play, an educator notices a usually confident child becoming overly cautious and reluctant to participate in activities involving climbing or running. The educator recalls the child recently having a minor fall and gently asks if the child is feeling scared or worried about playing. The child confides that they are scared of falling again. The educator decides to introduce a gradual approach to help the child regain confidence, starting with simple, low-risk activities and providing constant encouragement and reassurance. The educator also informs the child's parents about the plan and encourages them to support similar activities at home.

Scenario 2: An educator observes a child repeatedly avoiding lunch and not eating during meal times. Concerned about the child's well-being, the educator decides to document these incidents and raise the issue with the centre's nutrition coordinator. After a discussion, they decide to talk to the child gently to understand if there is a specific reason for avoiding food. The child reveals a dislike for certain textures in the meals. The centre arranges a meeting with the parents to discuss the child's eating habits and preferences, and they collaboratively work on a plan to provide alternative meal options that cater to the child's needs while ensuring nutritional balance.

Scenario 3: An educator notices that a child who normally enjoys playing with peers is now frequently choosing to play alone and seems withdrawn during group activities. The educator decides to observe the child more closely and notices subtle signs of sadness. Recalling training on the impacts of family issues on children's behaviour, the educator discreetly speaks to the centre's family liaison officer. Together, they plan a strategy to provide the child with more emotional support during the day, such as engaging in one-on-one

activities and ensuring the child knows they can talk to any staff member if they feel comfortable.

Scenario 4: A teacher assistant observes that a child often comes to the centre with red, itchy eyes and sneezing frequently. Concerned that the symptoms may indicate allergies or another health issue, the assistant discusses these observations with the lead educator. The lead educator suggests that they should document the occurrences and then arrange a meeting with the parents. During the meeting, the parents confirm the child has recently been diagnosed with seasonal allergies but forgot to inform the centre. The educators update the child's care plan to include appropriate precautions and ensure that all staff are aware of the condition to prevent any allergic reactions during outdoor play or when in contact with potential allergens.

Please give an example where you or other educators.

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