



# Child and Youth Risk Management Strategy

**2025-2028**

Sunshine Coast  
Health



Queensland  
Government

## Document details and authority

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## National Safety and Quality Health Service Standard



### Document name

Child and Youth Risk Management Strategy

## Contents

1. Introduction	4
1.1 Scope	4
2. Statement of Commitment	5
3. Code of Conduct	6
4. Recruitment, selection, training and managing employees	7
5. Handling disclosures or suspicion of harm, including reporting guidelines	10
6. Risk Management	12
7. Managing breaches of this Strategy	13
8. Compliance with the requirements of Blue Card System	14
9. Communication and Support	14
10. Compliance and Reporting	15
11. Supporting documents	15
12. Compliance	17
13. Appendix 1 Strategy & Alignment to National Principles for Child Safe Organisations	18

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# 1. Introduction

Sunshine Coast Health (the Health Service) Child and Youth Risk Management Strategy (Strategy) demonstrates our organisational commitment to keep children and young people safe while they are in the care of the Health Service.

The [Working with Children \(Risk Management and Screening\) Act 2000 \(Qld\)](#) (the Act) and the [Working with Children \(Risk Management and Screening\) Regulation 2020 \(Qld\)](#) (the Regulation) require regulated organisations to develop and implement a Strategy to include eight mandatory requirements in alignment with the National Principles for Child Safe Organisations. Refer to Appendix 1.0 which outlines a map of the legislative requirements for the Strategy against the National Principles for Child Safe Organisations.

The Strategy will outline the Health Service's commitment to :

- to creating a safe and supportive service environment;
- strengthening capability to provide such an environment;
- assistance in how to manage any concerns with respect to the safety and wellbeing of children and youth who are involved with the Health Service; and
- promotion of a consistent approach to risk management and compliance with requirements under the Act and Regulation.

## 1.1 Scope

This Strategy relates to anyone who engages with children or youth receiving care or are in contact with Sunshine Coast Health's services or events. This includes children and youth defined as individuals under 18 years of age<sup>1</sup>, their parents/caregivers, employees and visitors accessing the Health Service.

The different levels of contact with children and youth will impact the application of this Strategy, for example:

- Executive, senior leaders and line managers must be aware of the Strategy and its application to the Health Service.
- Individuals in roles with direct contact with children must understand the Strategy and how it applies to their role.
- Individuals who may have contact with children, even if does not directly relate to their role, should be aware of the Strategy and its application to the Health Service.

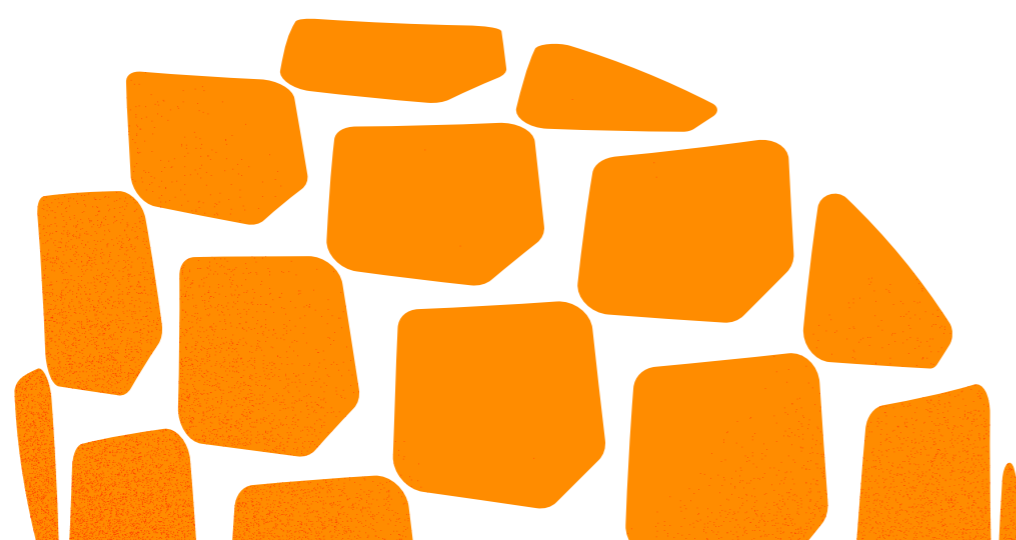
<sup>1</sup> [Child Protection Act 1999](#)

# 2. Statement of Commitment

Sunshine Coast Health is committed to ensuring the safety, wellbeing, and protection of all children and young people who come into contact with our services, facilities, or programs — whether as patients, clients, visitors, or participants. Guided by our values of integrity, compassion, accountability, and innovation, we actively work to create a child-safe organisation where the rights of children are respected, their voices are heard, and their safety is prioritised.

As part of the Strategy, developed in line with the Act, we actively work to create a child-safe environment where safety is embedded in all aspects of our work. This includes implementing clear policies and procedures, screening and training employees, promoting a culture of awareness and accountability, and responding promptly to concerns.

This Strategy is evidence of Sunshine Coast Health's commitment to ensuring the safety and wellbeing of all children and young people, and protecting them from harm, in accordance with section 3 (1) (a) of the Regulation.



## 3. Code of Conduct

The Health Service expects all individuals who interact with children or young people – whether employees, volunteers, student, or service providers to behave in a manner that upholds the dignity, rights and safety of every child. Interactions must be respectful, appropriate and consistent with our commitment to ensure the safety, wellbeing and protection of children accessing services at Sunshine Coast Health.

To support this, the Code of Conduct for interacting with children and young people provides expectations and complements the *Code of Conduct for the Queensland Public Service*:

### 1. Standards of Conduct

All employees are required to uphold the Health Service's values, policies, standards, procedures and guidelines. This includes the [Code of Conduct for the Queensland Public Service](#) and any other applicable clinical and professional standards.

### 2. Effective Recruitment and Screening

Hiring managers and Delegates are responsible for ensuring robust recruitment and screening processes including verifying qualifications, conducting referee checks, and mandatory Working with Children Checks to ensure prospective employees are committed to the safety and wellbeing of children and youth.

### 3. Ongoing Training, Supervision and Professional Development

Employees engage in mandatory training and role requisite training and maintain a commitment to ongoing professional development to maintain awareness of best practice in child safe behaviours.

### 4. Record Keeping and Information Sharing

Employees are responsible for maintaining records of meeting and incidents involving children, and sharing relevant information in accordance with the Health Service's policies, standards, procedures and guidelines.

All teams and individuals covered by this Strategy must take personal and shared responsibility for child safety. Everyone is accountable for their actions and should support a culture where concerns can be safely raised. Employees, volunteers, students, and service providers must act to protect children whenever risks arise. While this Strategy provides a framework for ensuring the safety and wellbeing of children and young people, individuals remain responsible for addressing risk and concerns as they arise.

## 4. Recruitment, selection, training and managing employees

The Health Service adheres to the requirements outlined in the relevant industrial instruments, including policies and procedures for recruiting, selecting, training and managing employees. Each stage of the employment journey allows for the organisation to minimise risk to children by incorporating effective screening and assessment of prospective employees (i.e., assessing eligibility to work with children and ascertaining a candidate's suitability to work with children), probation (i.e., assessing the performance of the new employee prior to confirming their employment), training (i.e., enhancing the skills and knowledge of the employee and monitoring mandatory training compliance) and management (i.e., completing performance and development plans to review the skill set of employees, identifying training needs and setting performance goals), which may impact the safety and wellbeing of children accessing Sunshine Coast Health's services.

### Recruitment and selection

- Recruitment and Selection processes, including employment screening, are governed by the Public Service Commission Directive, [07/23 Recruitment and Selection](#), Department of Health's Human Resource Policy, [B1 Recruitment and Selection](#) and Human Resource Policy, [B40 Employment Screening](#) and [Sunshine Coast Health HR sub-delegations](#).
- Panel chairs are required to complete mandatory recruitment and selection training and the Recruitment and Attraction team are responsible for providing hiring managers with the advice, support and tools necessary to fill their role.
- Role descriptions outline pre-employment screening processes and the expectation that all health professions, who in the course of their duties formulate a reasonable suspicion that a child or youth has been abused or neglected in their home/community environment, have a legislative obligation to immediately report.
- Prior to advertising a role, advertisements for non-registered health professionals or other non-registered roles is reviewed by the Recruitment and Attraction team in consultation with the hiring manager to determine whether the role requires a blue card/working with children check.
- When assessing a candidate's suitability for the role, hiring managers explore previous work history, skills, knowledge and experience, such as their motivation for working with children.
- Mandatory reference checks are conducted on preferred candidates, allowing for the validation of work history and provides further opportunity to examine the candidate's professional boundaries, their approach to child safety and alignment to the Health Service's values.
- Pre-employment screening is conducted by the Recruitment and Attraction team and includes criminal history, discipline, identification, qualification and registration checks with the appropriate authority.

- Where there is a positional requirement to hold a blue card has been identified (for non-registered health professionals and other non-registered roles), evidence of a valid blue card is checked at pre-employment stage by the Recruitment and Attraction team using the Blue Card Services Organisational Portal.
- Where an offence is recorded, a criminal history assessment is completed and presented to the criminal history review panel for decision prior to any offer of employment. Where a blue card check has identified a negative notice for a preferred candidate, the Health Service will not offer employment (or continue to employ) the individual in a child-related role.
- New employees are subject to a probationary period ranging from 3 to 12 months in accordance with the Department of Health's, Human Resource Policy, [B2 Probation](#). The probation period is outlined in the new employee's letter of offer and allows for the line manager to set expectations, the standard of behaviour and performance required in the role.
- Students, contractors and volunteers working in child-related areas who meet blue card eligibility criteria are required to hold a valid blue card and this expectation is incorporated into role descriptions, pre-employment screening and letters of offer.

## Training

- Mandatory Training completion is required by all employees including contractors, students, volunteers and governed by the Department of Health's, Human Resource Policy [G6 Mandatory Training](#) and [Sunshine Coast Health's Mandatory Training](#).
- In accordance with the [Sunshine Coast Health's Mandatory Training Policy](#), the SaFE Child Protection Training – Module 1 is to be completed by all employees within 14 days of commencement and repeated every 2 years.
- Additionally, role requisite training requirements are outlined Sunshine Coast Health's Requisite Education and Training Procedure and includes the requirement for specific work units and professions to complete SaFE Child Protection Training – Module 2 and 3.
- Line managers, senior managers and executives are required to ensure all employees have been given the opportunity to complete required Mandatory Training and Role Requisite training relevant to their service context and actively monitor compliance using the Health Service's Learning Management System.
- Induction processes in child-related service areas include:
  - o Policies and procedures including, [Child protection management procedure](#), [Responding to child sexual abuse or assault procedure](#), [Reporting sexual offending against a child \(under 18 years\) to the Queensland Police Service procedure](#), [Unborn child high risk alert management procedure](#).
  - o Outlining expectations regarding child and youth risk management and the requirements of employees to understand their role in providing a safe and supportive environment for children.

- o How to handle a disclosure or suspicion of harm to a child.
- o Complaints and compliment management, including how to receive, record and respond.

## Management

- Performance management, including the process for addressing issues related to an employee's performance, which may impact on the safety or wellbeing of children, is governed by the Department of Health's Human Resource Policy, [G9 Positive Performance Management](#).
- It is a mandatory requirement for all employees to have a performance and development plan within a month of commencing a new role to establish and clarify role expectations, promote constructive communication and assist employees to meet and exceed performance expectations.
- Line managers work with and encourage employees to plan and manage their own careers. This includes working with individuals to review skills sets, identify training needs and set goals to improve capability and service delivery.
- If an employee is convicted of a serious offence while working for the Health Service, it is a requirement of their employment to disclose in accordance with the [Code of Conduct for the Queensland Public Service](#), Department of Health's Human Resource Policy, [E4 Employees to notify supervisor if charged with or convicted of an indictable offence](#) and their professional registration (where appropriate).
- Disciplinary processes are governed by the Department of Health's Human Resource Policy, [E10 Discipline](#). Under certain circumstances, the delegate may decide to suspend an employee from duty as an administrative action to temporarily remove an employee from the workplace or consider alternative duties to mitigate risk in the workplace.
- The Health Service is currently drafting a Blue Card Management Procedure (the Procedure) which will outline the specific process and requirements for employees who require a blue card. The Procedure will include the reporting and governance responsibilities (employee, line manager, delegate, Workforce Division) to ensure the Health Service does not contravene its responsibilities under the Act.
- All employees separating from the Health Service can complete an exit survey to allow the organisation to collect information to help understand their reasons for leaving and highlight areas of strength and improvement.

## 5. Handling disclosures or suspicion of harm, including reporting guidelines

Employees must adhere to child protection policies, standards, procedures and guidelines to minimise risk and ensure all concerns are properly addressed and managed when raised.

Harm, as defined by s.9 [Child Protection Act 1999 \(Qld\)](#) is “Any detrimental effect of a significant nature on the child’s physical, psychological or emotional wellbeing. Harm can be caused by physical, psychological, or emotional abuse or neglect; or sexual abuse or exploitation.”

A disclosure of harm occurs when someone, including a child, discloses harm that has happened, is happening, or is likely to happen to a child. A suspicion of harm is when someone has a reasonable suspicion that a child has suffered, is suffering, or is at an unacceptable risk of suffering, significant harm.

Child protection is everyone’s responsibility. Any person who forms a reasonable suspicion that a child (including an unborn child) has suffered, is suffering, or is at unacceptable risk of suffering significant harm and does not have a parent able and willing to protect them should report their concerns in a timely and appropriately manner. Specific professionals, Medical Officers and Registered Nurses, have a mandatory reporting obligation under the [Child Protection Act 1999 \(Qld\)](#) which is outlined the below Child Protection Management Procedure. Refer to the following key Procedures available on the intranet (QHEPS):

- [Child protection management \(health.qld.gov.au\)](#)
- [Responding to child sexual abuse or assault \(health.qld.gov.au\)](#)
- [Suspected paediatric non-accidental injury guideline \(health.qld.gov.au\)](#)
- [Reporting sexual offending against a child \(under 18 years\) to Queensland Police Service \(health.qld.gov.au\)](#)

These Procedures support employees to:

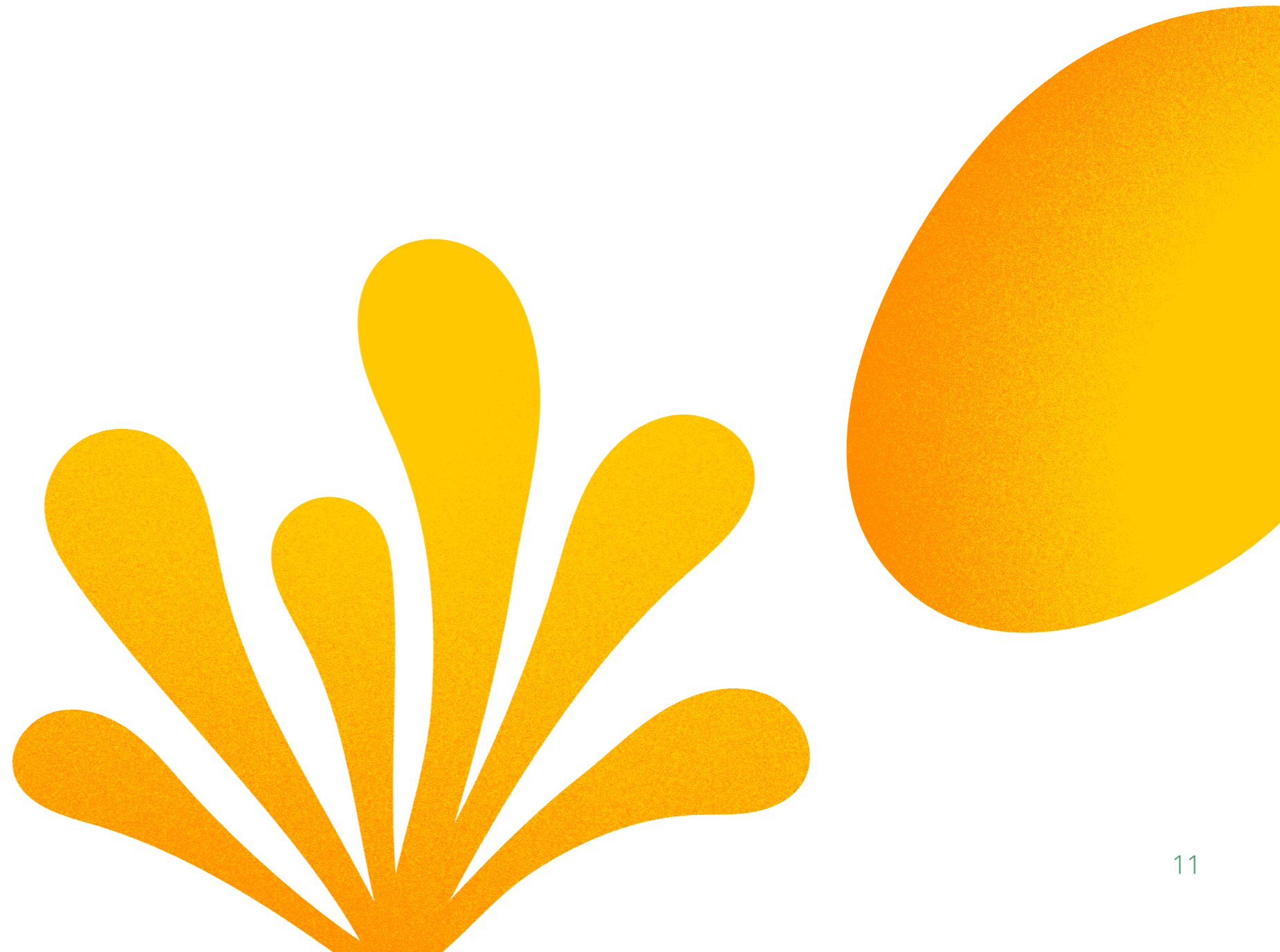
- identify significant harm or risk of significant harm;
- respond consistently and appropriately to concerns;
- understand their legal reporting obligations; and
- ensure appropriate measures are undertaken to assist with reducing the risk of further / future harm to the child or young person.

The Health Service’s [Children’s Plus Team](#) is the central contact point for advice, referral pathways, and interagency engagement (e.g. Queensland Police Service and Department of Children, Youth Justice and Multicultural Affairs).

There may be circumstances where there is concern for a child’s welfare, but it does not reach the threshold to be considered a disclosure or suspicion of harm. SCHHS’ employees who may be concerned about a child or young person for any reason are encouraged to:

- in the first instance, discuss any concerns with their line manager;
- seek advice from [Children’s Plus Team](#) during office hours (Monday to Friday 8:00am to 4:30pm), or contact the After-Hours Social Work Service or on-call paediatrician.

Volunteers, contractors, students and other service providers are advised to follow their own internal processes in the first instance. Advice may also be sought from Children’s Plus, the After-Hours Social Work Service or on-call paediatrician as outlined above.



## 6. Risk Management

The ecosystem of care surrounding a child or young person and their family/ caregiver is increasingly complex and dynamic. Risk is intrinsic to the provision of healthcare services and exists in all facets of service delivery. The Health Service manages this uncertainty through the application of a consistent and organisational-wide approach to risk management. The approach to risk management is aligned to best practice standards in accordance with International Organisation of Standardisation [Risk Management Guidelines](#), which applies a systematic and iterative process to identify, assess, evaluate, manage and monitor risks. [Sunshine Coast Health's Risk Management Framework](#) and its supporting [Sunshine Coast Risk Management Procedure](#) define the risk management process and support tools, as well as accountabilities and responsibilities for managing the risk.

General risk factors that may apply across the Health Service include:

- the approach to welcoming families and visitors to multiple facilities as a public health organisation;
- opportunities for unsupervised access to children and young people;
- opportunities to develop a relationship of trust with a child or young person (or other persons close to the child or young person) over time;
- assisting children and young people with personal care (bathing, toileting etc);
- where the child or young person has particular vulnerabilities (for example, disabilities, conditions that are life limiting, children who have limited family networks or those who may be in the care system and children with limited informal support networks);
- where there is interaction between children and other children.

Risk mitigation strategies have been implemented where appropriate, including professional boundaries, rules associated with supervision and restrictions to internet access. Additionally, specific policies, procedures and guidelines have been established for volunteers, students and contractors. Based on a consideration of the nature of services provided and activities undertaken by the Health Service, separate risk management processes for managing high risk activities and special events is not required.

Reference should be made to resources available on [Risk Management intranet \(QHEPS\)](#) including options for employee training on how to fulfill their risk management responsibilities.

## 7. Managing breaches of this Strategy

The Health Service is committed to appropriately managing breaches of this Strategy in accordance with the Public Service Commission Directive, [05/23 Discipline](#) and other relevant policies, procedures and guidelines as appropriate in the circumstance. This may include other relevant Public Service Commission Directives, Department of Health Human Resource Policies, including and not limited to policies on discipline, suspension from employment, performance and development planning and the performance improvement process.

Additionally, a breach of this Strategy will be managed in accordance with [Sunshine Coast Health's Compliance Management Procedure](#), which outlines the approach to addressing compliance breaches in a consistent and risk-based manner. All breaches, actual and potential, must be managed in accordance with this procedure.

Examples of a breach of the Strategy may include but is not limited to:

- failure to meet expectations defined in the Code;
- failure to report suspicion of harm and/or concern for a child's welfare in accordance with legislated reporting requirements;
- failure to undertake required recruitment and selection pre-employment screening that results in the appointment of an employee who does not hold a valid blue card where there is a position requirement; and
- an employee who fails to advise the Health Service of any change to their criminal history status, which disqualifies the employee from holding a blue card.

If an actual or potential breach of the Strategy has been identified, the following steps must be taken:

Take immediate action to reduce, minimise or contain the actual breach and follow the requirements of the Health Service's related procedures, specifically:

- reporting of a reasonable suspicion of child sexual abuse or assault to Children's Plus (refer to section 'How to make a report');
- report of suspected child in need of protection to Department of Children, Youth Justice and Multicultural Affairs;
- inform your line manager of the breach immediately, or as soon as possible;
- if the breach involves a Sunshine Coast Health employee, concerns must also be reported to:

### **Workforce Division**

Email: [sc-workforcedivison@health.qld.gov.au](mailto:sc-workforcedivison@health.qld.gov.au)  
Phone: 1300 150 360

### **Ethics and Integrity**

Email: [schhs-ccc@health.qld.gov.au](mailto:schhs-ccc@health.qld.gov.au)  
Phone: 5252 0091

All breaches will be investigated and appropriate corrective actions implemented. Corrective actions will be proportionate to the breach and will include disciplinary and other action, which may include termination of employment.

The Health Service has multiple channels for children, youth, parents/caregivers and visitors to report concerns about potential breaches of this Strategy including:

- Patient Liaison Officers
- Australian Charter of Healthcare Rights
- Human Rights Commissioner

The Health Service takes privacy seriously, ensuring that no record of complaint is attached to a medical record. All complaints are handled with the highest level of confidentiality. In accordance with natural justice, the individual subject to the complaint has the right to be given the information and the opportunity to respond.

## 8. Compliance with the requirements of Blue Card System

The Health Service's pre-employment processes, are outlined in the following Department of Health, Human Resources Policies:

- Department of Health Human Resource Policy, [B40 Employment Screening](#)
- Department of Health Human Resource Policy, [E4 Employees to notify supervisor if charged with or convicted of an indictable offence](#)

Reference should be made to [SCHHS' Recruitment and Attraction intranet page](#) (QHEPS) and [Department of Health's Blue Card intranet page](#) (QHEPS) for details on roles that require blue cards, the application process and the action required of employees if there is a change in their police information.

Employee onboarding processes ensures new employees are registered in the Blue Card Services Organisational Portal, which will notify the Recruitment and Attraction team if an employee is issued a negative notice. Where this occurs, Recruitment and Attraction will engage with the relevant work unit in the Workforce Division to take appropriate action.

## 9. Communication and Support

The Health Service will actively promote widespread communication of this Strategy to promote an environment where speaking up is encouraged and recognised.

The Strategy will be publicly assessable via the internet, displayed in patient waiting areas and services that provide care to children and youth. To enhance awareness and engagement, the Health Service will engage with employees, children, youth, parents/caregivers and volunteers to ensure the Strategy is implemented in a way that is child friendly.

The Strategy will be published on the intranet (QHEPS) and communicated through Executive communiques, eNews, online newsletter (SCOOP) and as part of induction processes for children and youth services. Volunteers will learn about this Strategy during local induction. Oversight, implementation, monitoring and evaluation of the Strategy are governed by the Executive Sponsor - Chief Operating Officer.

Support mechanisms have been established for clinicians and support teams to enable them to care for themselves in order to care for others. This includes access to the Employee Assistance Program provided by TELUS Health, as well as CareForUs — an employee-led, confidential program that draws on shared experiences. Together, these supports strengthen our workforce's capacity to provide a safe and supportive environment for children and young people.

## 10. Compliance and Reporting

The Health Service will review this Strategy annually to ensure it remains relevant, incorporating feedback from stakeholders, including children and young people. As part of the governance and accountability processes, the Health Service will also record, monitor and report to the Board regarding any breaches of this Strategy.

## 11. Supporting documents

### Alignment to SCHHS Strategic Plan

*We provide high quality, equitable, accessible person-centred care.*

### References

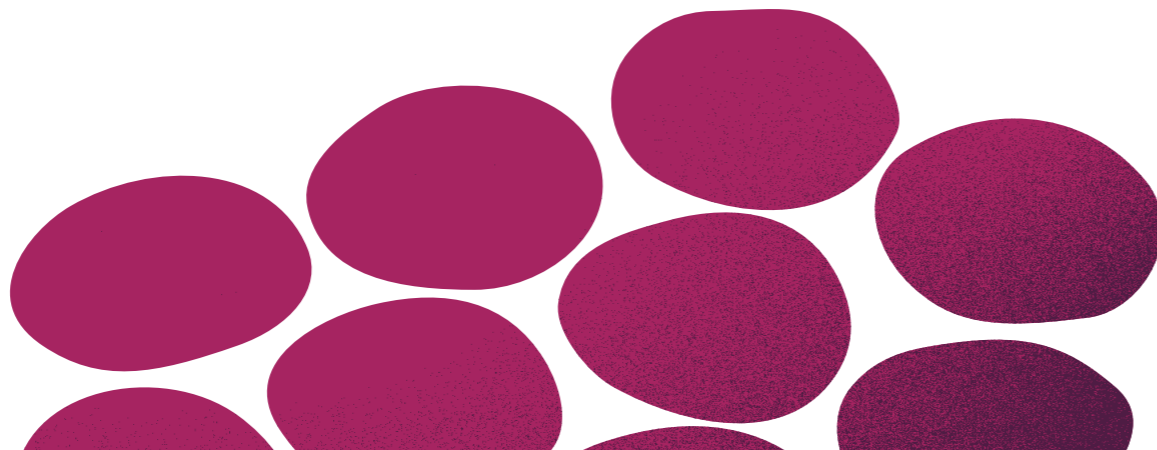
- (n.d.). Retrieved from Child Protection Act 1999: [Child Protection Act 1999 - Queensland Legislation - Queensland Government](#)
- Australian Commission on Safety and Quality in Health Care. (n.d.). Australian Charter of Healthcare Rights. Retrieved from [Australian Charter of Healthcare Rights | Australian Commission on Safety and Quality in Health Care](#)
- Australian Human Rights Commission. (2018) National Principles for Child Safe Organisations. Retrieved from [National Principles for Child Safe Organisations \(humanrights.gov.au\)](#)
- Australian Human Rights Commission. (n.d.). What is a child safe organisation? Retrieved from <https://childsafe.humanrights.gov.au/about/what-child-safe-organisation>
- Commonwealth of Australia. (2015). [Royal Commission into Institutional Response to Child Sexual Abuse](#).

### Legislation

- [Child Protection Act 1999 \(Qld\)](#)
- [Child Protection Regulation 2011 \(Qld\)](#)
- [Working with Children \(Risk Management and Screening\) Act 2000](#)
- [Working with Children \(Risk Management and Screen\) Regulation 2020 \(Qld\)](#)
- [Human Rights Act 2019 \(Qld\)](#)

### Primary policy, standards or other authority

- [Public Service Commission Directive Recruitment and Selection 07/23](#)
- [Public Service Commission Directive 05/23 Discipline](#)
- [Human Resource Policy B40 Employment Screening](#)



- [Human Resource Policy E4 – Employees to Notify Supervisor if Charged with or Convicted of an Indictable Offence](#)
- [Human Resource Policy G9 Positive Performance Management](#)
- [Human Resource Policy G6 Mandatory Training](#)
- [Code of Conduct Queensland Public Service](#)

#### National Safety and Quality Health Service Standards 2nd ed –

- Clinical Governance
- Partnering with Consumers

#### Other related or supporting documents

- [Child protection management \(health.qld.gov.au\)](#)
- [Responding to child sexual abuse or assault \(health.qld.gov.au\)](#)
- [Suspected paediatric non-accidental injury \(health.qld.gov.au\)](#)
- [Reporting sexual offending against a child \(under 18 years\) to Queensland Police Service](#)
- [Compliance Management Procedure](#)
- [Risk Management Guidelines](#)
- [Risk Management Framework](#)
- [Risk Management Procedure](#)

#### Consultation

Key stakeholders who contributed to and/ or reviewed this version include:

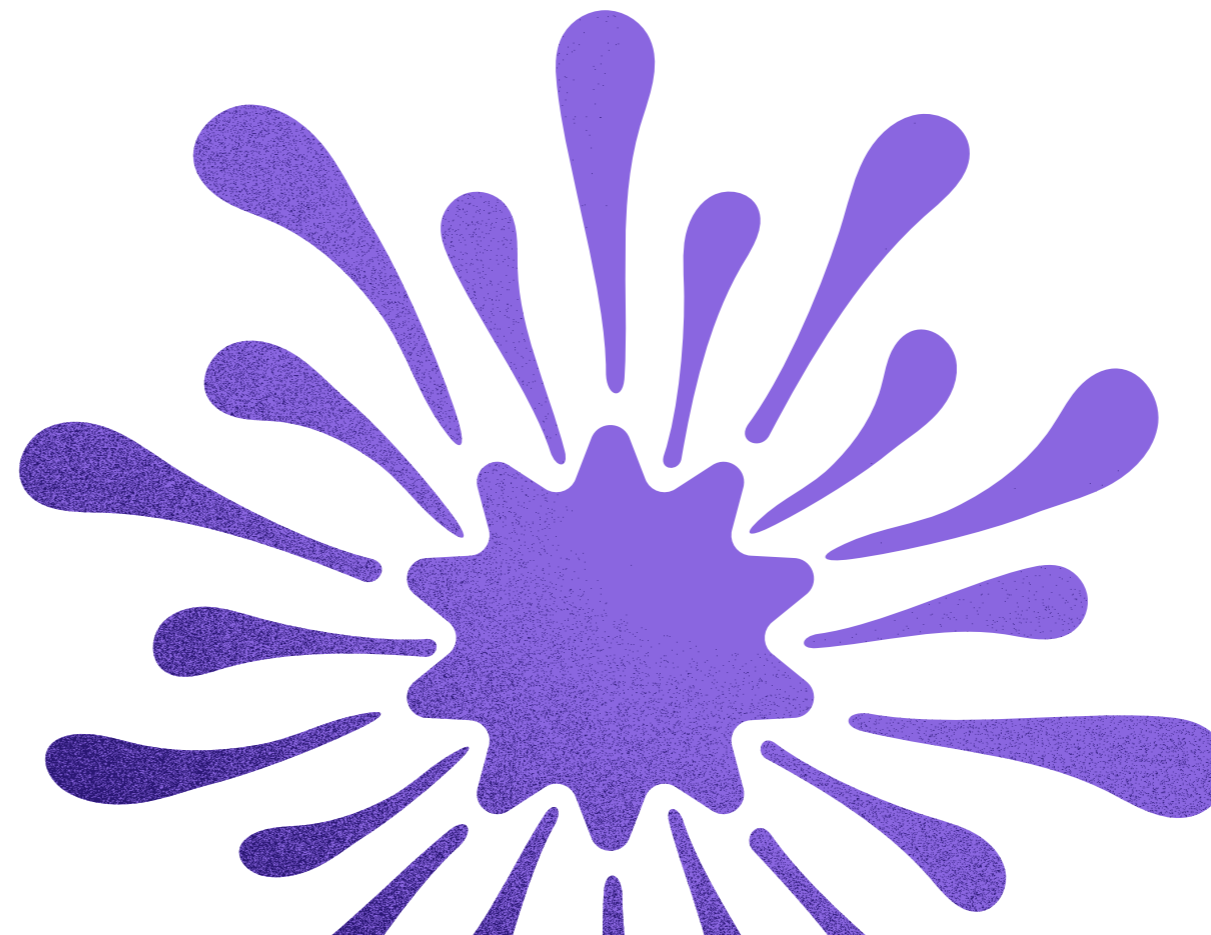
- Executive Leadership Team
- Director Medical Services, Clinical Governance Research and Medical Leadership
- Nursing Service Director, Women’s and Children’s Services
- Service Director, Mental Health and Specialised Services
- Manager, Risk
- Principal Advisor, Workplace Relations
- Clinical Nurse Consultant, Child and Adolescent
- Clinical Nurse Consultant, Child Protection
- Audit and Risk Committee
- Board

Definitions of key terms

Term	Description
Child	A person under 18 years of age. Section 8, Child Protection Act 1999
Child-related role	A role that involves, or is likely to involve, working or interacting with children and young people, whether paid or unpaid. Blue Card Service
Harm	Any detrimental effect of a significant nature on the child’s physical, psychological or emotional wellbeing. Harm can be caused by physical, psychological, or emotional abuse or neglect; or sexual abuse or exploitation. Section 9, Child Protection Act 1999

## 12. Compliance

Reporting mechanism: Strategic Committee – Executive Workforce Committee



## 13. Appendix 1 Strategy & Alignment to National Principles for Child Safe Organisations

Legislative requirements for a Child and Youth Risk Management Strategy	Relevant section of SCHHS' Child and Youth Risk Management Strategy	Alignment to the National Principles for a Child Safe Organisation
<b>1. SCHHS' statement of commitment to the safety and wellbeing of children and the protection of children from harm</b>	Our Statement of Commitment to keeping kids safe	<ul style="list-style-type: none"> <li>- Principle 1. Child safety and wellbeing is embedded in organisational leadership, governance and culture.</li> <li>- Principle 2. Children and young people are informed about their rights, participate in decisions affecting them and are taken seriously.</li> <li>- Principle 4. Equity is upheld and diverse needs respected in policy and practice.</li> <li>- Principle 8. Physical and online environments promote safety and wellbeing while minimising the opportunity for children and young people to be harmed.</li> <li>- Principle 10. Policies and procedures document how the organisation is safe for children and young people.</li> </ul>
<b>2. SCHHS' Code of Conduct for Interacting with Children</b>	Code of Conduct	<ul style="list-style-type: none"> <li>- Principle 10. Policies and procedures document how the organisation is safe for children and young people.</li> </ul>
<b>3. SCHHS' procedures for recruiting, selecting, training and managing staff and volunteers</b>	Recruitment and Selection Employment screening Training and supervision	<ul style="list-style-type: none"> <li>- Principle 5. People working with children and young people are suitable and supported to reflect child safety and wellbeing values in practice.</li> <li>- Principle 7. Staff and volunteers are equipped with the knowledge, skills and awareness to keep children and young people safe through ongoing education and training.</li> </ul>
<b>4. SCHHS' policies and procedures for handling disclosures or suspicions of harm, including reporting guidelines</b>	Reporting Concerns Handling disclosures and suspicions of harm	<ul style="list-style-type: none"> <li>- Principle 10. Policies and procedures document how the organisation is safe for children and young people.</li> </ul>
<b>5. SCHHS' plan for managing breaches of this Risk Management Strategy</b>	Managing breaches of the risk management strategy	<ul style="list-style-type: none"> <li>- Principle 10. Policies and procedures document how the organisation is safe for children and young people.</li> </ul>
<b>6. Risk management plans for high-risk activities and special events</b>	Managing concerns – Risk Management	<ul style="list-style-type: none"> <li>- Principle 8. Physical and online environments promote safety and wellbeing while minimising the opportunity for children and young people to be harmed.</li> </ul>

Legislative requirements for a Child and Youth Risk Management Strategy	Relevant section of SCHHS' Child and Youth Risk Management Strategy	Alignment to the National Principles for a Child Safe Organisation
<b>7. Policies and procedures for managing compliance with the blue card system</b>	Compliance with the requirements of the blue card system	<ul style="list-style-type: none"> <li>- Principle 5. People working with children and young people are suitable and supported to reflect child safety and wellbeing values in practice.</li> <li>- Principle 10. Policies and procedures document how the organisation is safe for children and young people.</li> </ul>
<b>8. Strategies for communication and support</b>	Raising awareness Support	<ul style="list-style-type: none"> <li>- Principle 1. Child safety and wellbeing is embedded in organisational leadership, governance and culture.</li> <li>- Principle 2. Children and young people are informed about their rights, participate in decisions affecting them and are taken seriously.</li> <li>- Principle 3. Families and communities are informed and involved in promoting child safety and wellbeing.</li> <li>- Principle 6. Processes for complaints and concerns are child focused.</li> </ul>
<b>Continuous improvement A child and youth risk management strategy must be reviewed at least on an annual basis and after any incidents to ensure that risks continue to be addressed and minimised throughout the organisation.</b>	Annual Review of the Child and Youth Risk Management Strategy	<ul style="list-style-type: none"> <li>- Principle 9. Implementation of the national child safe principles is regularly reviewed and improved.</li> </ul>



