STUDENT ENGAGEMENT POLICIES 2016
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Philosophical Statement

Our Commitment:

To build a Learning Community, based on positive relationships and a strong work ethic, where people are able to realise their potential in a safe, caring, stimulating and sustainable environment.

Our Vision:

At Kyneton Secondary College we work in partnership to own our learning, engaging with the wider community and preparing students for their futures as responsible, successful adults. We strive for excellence, developing confidence and embracing diversity in a respectful, sustainable environment.

Student learning is our core business. Our students are the focus of everything we do, the conversations that we have and the priorities that we identify and undertake.

Our Values:

Respect ➢ Caring, Communication, Compassion, Consideration, Integrity, Self-worth
Diversity ➢ Acceptance, Empathy, Equity, Inclusion, Openness, Safety
Sustainability ➢ Accountability, Perseverance, Pride, Reflection, Resilience, Responsibility
Excellence ➢ Ambition, Courage, Creativity, Enthusiasm, Learning, Success

Our Commitment to Student Safety:

Kyneton Secondary College provides a safe environment for the education of our students. Our absolute commitment to student safety extends to all of our educational activities, including those internal or external to the school environment and those activities that occur during the school day or outside of school hours.

Our vision and values were created in 2016 by a group of our student leaders from all year levels after extensive consultation with our students, staff, parents and wider community.
Attendance Policy

Rationale:
Regular school attendance is one of the major factors contributing to a child’s wellbeing and success. Absences from school mean learning opportunities are diminished and sequential learning impaired. Our vision is for all students to reach their potential and their individual pathway.

Education is a partnership between school, home and the community. The Education & Training Reform Act 2006 requires that schooling is compulsory for children aged 6 to 17 years.

Kyneton Secondary College sets very high expectations on student attendance and sees it as underpinning strong engagement with learning and accepts the correlation between attendance and academic performance.

Kyneton Secondary College is committed to providing an environment in which students want to belong and want to engage.

The message is “we care and it is not ok to be away!”

Aims:
- To maximise student learning opportunities and performance by ensuring that all students attend school regularly
- To maximise student potential through regular attendance that is monitored and supported
- Students who regularly attend school are more likely to keep up with their work, take part in activities, develop positive peer relationships and become engaged in College life.

Implementation:
- Attendance of students for all classes, home groups and activities is to be punctual. If late students are required to “sign in” in the Late Book in the General Office and receive a Late Pass
- At Kyneton Secondary College the “A+ System” of student attendance will be used as a record of student attendance. Information will be downloaded into CASES21 to allow reporting and identification of students at risk due to low attendance
- Record keeping is to be accurate and of the highest quality to enable -Accurate data available to teachers, co-ordinators, welfare staff, parents and reporting -Accurate information for evaluation and planning purposes -Underpin the student management processes of the College
- Teachers are required to record their class by class Attendance data on A+
• Parents are required to provide the College with a note or medical certificate for all absences where students have not attended, immediately on their return to College

• Home Group teachers are responsible for monitoring student absences and liaising with classroom teachers and parents
  - Direct contact with parents is required to be made if a student is absent for three consecutive days
  - If consistent absence is recorded parents to be called for a meeting with Year Level Co-ordinator and/or referred to the Student Welfare Officer for further counselling

• Students after an absence should seek information from their class teachers on what needs to be done to catch up on missed lessons

• For VCE/VCAL students consistent with the Victorian Curriculum & Assessment Authority requirements, an 80 per cent minimum attendance policy will apply, covering authorised absences related to illness and appointments. Students are encouraged to make appointments outside scheduled class times

• A student whose attendance is affected by periods of prolonged illness or other circumstances related to their personal situation/environment may apply to the Senior School Manager for special provision. The student will be required to provide supporting documentation

• Attendance requirements for students on Special Programs will be negotiated with students, parents and relevant Year Level Co-ordinators

• ‘Down the street’: As a privilege, Year 12 students have permission to go down the street at lunchtimes only. All other students who need to go into the Kyneton township must provide a note with a reason signed and dated by a parent/guardian. This should be lodged at the General Office before school. Permission will not be granted to buy lunch- it must be for legitimate business or personal purposes. No student will be allowed down the street without full school uniform

• Termly notices on the importance of attendance in Newsletters

• Course Counselling and pathways advice is made available to all students – (Managed Individual Pathways (MiPs)) Students will receive counselling before exiting – (MiPs)

• The last official day for:
  - Year 12 students is the day of their last exam. This date will be communicated as a line in references given to students
  - Year 11 is after completion of their final tests or examinations, but not before the conclusion of the school day on the last Friday of November
  - Year 10 from the Friday in December not more than two weeks prior to the last school day of the year. This requires a request from the parent/guardian and is contingent on the Principal being satisfied that the student has suitable employment
  - Year 7 – 9 the official documented final day of Term 4

• For early dismissals/emergencies (eg. No water, toilets) refer to the Schools Reference Guide

• For staff stop work action refer to current advice memorandums, circulars from DET

• The College is committed to working closely with families to improve high student outcomes
• Aggregated student attendance data is reported to DET and the wider community each year as part of an Annual Report
Equity and Diversity Policy

Rationale:

*Kyneton Secondary College* aims to provide a welcoming, supportive, and emotionally and physically secure learning and working environment for every member of the school community.

*Our College* recognises and promotes human rights, and values the diversity of culture, beliefs, practices, customs, physical and intellectual abilities and life experience of the whole school community.

Aims:

To create an inclusive school culture that fosters acceptance and respect for diversity. In doing so, we seek to deepen understanding and knowledge, promote student and staff wellbeing and help everyone achieve their full potential. This school is enriched by and celebrates the diversity of our whole school community.

To provide all students with a range of opportunities that cater for their individual learning needs.

Implementation:

This school supports the Charter of Human Rights and the Equal Opportunity Act 2010 (Vic),

*Our college* will take action to prevent discrimination, harassment, vilification, bullying and victimisation and will promote a safe and inclusive school. Every member of the college has the right to learn and work in a safe and inclusive environment free of discrimination, harassment, bullying, vilification and victimisation. Along with this right comes the responsibility to respect and promote human rights and responsibilities by behaving according to this policy.

All curriculum programs will be inclusive of all students.

Our Equity Leader will be assigned responsibility to co-ordinate the ‘Program for Students with a Disability’ program at our school.

These Responsibilities will include:

- co-ordination of applications for funding,
- co-ordination of Program Support Groups
- development and implementation of program budgets
- co-ordination of staff professional development
- all other issues related to students with disabilities and their respective program needs

Program Support Groups will be established for all eligible students to facilitate curriculum planning and resource provision and to set individual student achievement goals, timelines and method of evaluation, the use of support staff and external consultants, and the use of any additional resources required.
Our college will endeavour to identify students with additional learning needs at their time of enrolment to provide information to staff about possible accommodations or modifications to learning programs. This will be documented in an Individual Education Plan.

Our college curriculum, leadership and management practices promote and affirm principles of multicultural diversity. We will ensure that learning experiences recognise value and build on students’ backgrounds and experiences.

Our college offers a package of programs and strategies including attendance strategies, tutorial programs, student scholarships, School for Student Leadership, Individual Education Plans and Managed Individual Pathways Plans for Koori students.
First Aid Policy

Rationale:
All students, staff and visitors have the right to feel safe and well, and know that they will be attended to with due care when in need of first aid.

Aims:
- To administer first aid to children when in need in a competent and timely manner.
- To communicate children’s health problems to parents when considered necessary.
- To provide supplies and facilities to cater for the administering of first aid.
- To maintain a sufficient number of staff members trained with a level II first aid certificate.

Implementation:
- Ensure that First Aid information is included in any induction of new employees.
- Ensure that First Aid information is given to any contractors who come on site.
- A sufficient number of staff (including at least one administration staff member) to be trained to a level II first aid certificate, and with up-to-date CPR qualifications. Staff to be trained on an annual basis updates to asthma management, anaphylaxis and epilepsy management.
- A first aid room will be available for use at all times. A comprehensive supply of basic first aid materials will be stored in a locked cupboard in the first aid room.
- First aid kits will also be available in each wing of the school, as well as the staff room and administration offices.
- Any children in the first aid room will be supervised by a staff member at all times.
- All injuries or illnesses that occur will be referred to the administration first aid officers who will manage the incident.
- A confidential up-to-date register located in the first aid room will be kept of all injuries or illnesses experienced by children that require first aid.
- All staff will be provided with basic first aid management skills, including blood spills, and a supply of protective disposable gloves will be available for use by staff.
- Any children with injuries involving blood must have the wound covered at all times.
- No medication including headache tablets will be administered to children without the express written permission of parents or guardians.
- Any student who is collected from school by parents/guardians as a result of an injury, or who is administered treatment by a doctor/hospital or ambulance officer as a result of an injury, or has an injury to the head, face, neck or back, or where a teacher considers the injury to be greater than “minor” will be reported on DET Accident/Injury form, and entered onto CASES 21.
- Parents of ill children will be contacted to take the children home.
- Parents who collect children from school for any reason (other than emergency) must sign the child out of the school in a register maintained in the school office.
• All staff have the authority to call an ambulance immediately in an emergency. If the situation and time permit, a teacher may confer with others before deciding on an appropriate course of action.

• All school camps will have at least one first aid trained staff member at all times.

• A comprehensive first aid kit will accompany all camps, along with a mobile phone.

• All children attending camps or excursions will have provided a signed medical form providing medical detail and giving teachers permission to contact a doctor or ambulance should instances arise where their child requires treatment. Copies of the signed medical forms to be taken on camps and excursions, as well as kept at school.

• All children, especially those with a documented asthma management plan, will have access to Ventolin and a spacer at all times.

• The DET policy and guidelines on anaphylaxis management will be implemented at the College.

• The First Aid Manager and/or delegate is to be responsible for the purchase and maintenance of first aid supplies, first aid kits, ice packs and the general upkeep of the first aid room.

• At the commencement of each year, requests for updated first aid information will be sent home via the newsletter, including requests for any asthma management plans, high priority medical forms, and reminders to parents of the policies and practices used by the school to manage first aid, illnesses and medications throughout the year. It is the responsibility of parents to keep the College informed with updated information.

• General organisational matters relating to first aid will be communicated to staff at the beginning of each year with updates if and when required.

• It is recommended that all students have personal accident insurance and ambulance cover.

• The current DET guidelines, Code of Practice and DET First Aid Policy are used as current documents. This policy provides guidelines specific to Kyneton Secondary College.

**Responsibility:**
First Aid Manager

**Reference:**
OHS Advisory Service on 1300 074 715

http://www.education.vic.gov.au/hr/ohs/hazards/firstaid.htm


Anaphylaxis Policy

Rationale:
Kyneton Secondary College will fully comply with Ministerial Order 706 and the associated Guidelines published and amended by the Department from time to time.

The school also acknowledges its responsibility to develop and maintain an Anaphylaxis Management Policy.

Individual Anaphylaxis Management Plans:
The Principal is responsible for ensuring that an Individual Anaphylaxis Management Plan (Appendix E, Anaphylaxis Guidelines 2016: Department of Education and Training (DET)) is developed, in consultation with the student’s Parents, for any student who has been diagnosed by a Medical Practitioner as being at risk of anaphylaxis.

The Individual Anaphylaxis Management Plan will be in place as soon as practicable after the student enrols and where possible before their first day of school.

The Individual Anaphylaxis Management Plan will set out the following:
- information about the student’s medical condition that relates to allergy and the potential for anaphylactic reaction, including the type of allergy/allergies the student has (based on a written diagnosis from a Medical Practitioner);
- strategies to minimise the risk of exposure to known and notified allergens while the student is under the care or supervision of School Staff, for in-school and out-of-school settings including in the school yard, at camps and excursions, or at special events conducted, organised or attended by the School;
- the name of the person(s) responsible for implementing the strategies;
- information on where the student's medication will be stored;
- the student's emergency contact details; and
- an up-to-date ASCIA Action Plan for Anaphylaxis completed by the student’s medical practitioner.

School Staff will then implement and monitor the student’s Individual Anaphylaxis Management Plan. The student’s Individual Anaphylaxis Management Plan will be reviewed, in consultation with the student’s Parents in all of the following circumstances:
- annually;
- if there is an identified and significant increase in the student’s potential risk of exposure of allergens at school.
- as soon as practicable after the student has an anaphylactic reaction at school; and
- when the student is to participate in an off-site activity, such as camps and excursions, or at special events conducted, organised or attended by the school.
It is the responsibility of the Parents to:

- provide the ASCIA Action Plan for Anaphylaxis from the student’s medical practitioner and provide a copy to the school as soon as practicable;
- inform the School in writing if their child’s medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes and if relevant, provide an updated ASCIA Action Plan;
- provide an up to date photo for the ASCIA Action Plan when that Plan is provided to the School and when it is reviewed;
- provide the School with an Adrenaline Auto-injector that is current and not expired for their child; and
- participate in annual reviews of their child’s Plan.

Prevention Strategies:

School Staff are reminded that they have a duty of care to take reasonable steps to protect a student in their care from risks of injury that are reasonably foreseeable.

This section details the Risk Minimisation and Prevention Strategies that the College will put in place for all relevant in-school out-of-school settings which include the following:

- In classrooms, including class rotations, specialist and elective classes;
- In canteen;
- In the yard, including before and after school during which yard supervision is provided, between classes and other breaks, during recess and lunchtimes;
- Special events including incursions, sporting events, carnival or class parties, excursions and camps.

**In-school Setting**

<table>
<thead>
<tr>
<th>Classrooms</th>
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<tbody>
<tr>
<td>1. Keep a copy of the student's Individual Anaphylaxis Management Plan on students medical record electronically and with the year level coordinator.</td>
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<tr>
<td>2. Liaise with Parents about food-related activities ahead of time.</td>
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<tr>
<td>3. Use non-food treats where possible, but if food treats are used in class it is recommended that Parents of students with food allergy provide a treat box with alternative treats. Treat boxes should be clearly labelled and only handled by the student.</td>
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<tr>
<td>4. Never give food from outside sources to a student who is at risk of anaphylaxis.</td>
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<tr>
<td>5. Treats for the other students in the class should not contain the substance to which the student is allergic. It is recommended to use non-food treats where possible.</td>
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<tr>
<td>6. Products labelled 'may contain traces of nuts' should not be served to students allergic to nuts. Products labelled 'may contain milk or egg’ should not be served to students with milk or egg allergy and so forth.</td>
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</tbody>
</table>
7. Be aware of the possibility of hidden allergens in food and other substances used in cooking, food technology, science and art classes (e.g. egg or milk cartons, empty peanut butter jars). Students with a food allergy need special care when doing food technology. An appointment should be organised with the student’s parents prior to the student undertaking this subject. Helpful information is available at: [www.allergyfacts.org.au/images/pdf/foodtech.pdf](http://www.allergyfacts.org.au/images/pdf/foodtech.pdf)

8. Ensure all cooking utensils, preparation dishes, plates, and knives and forks etc are washed and cleaned thoroughly after preparation of food and cooking.

9. Have regular discussions with students about the importance of washing hands, eating their own food and not sharing food.

10. A designated staff member should inform casual relief teachers, specialist teachers and volunteers of the names of any students at risk of anaphylaxis, the location of each student’s Individual Anaphylaxis Management Plan and Adrenaline Auto-injector, the School’s Anaphylaxis Management Policy, and each individual person’s responsibility in managing an incident. ie seeking a trained staff member.

### Canteens


   Helpful resources for food services:

2. Canteen staff, including volunteers, should be briefed about students at risk of anaphylaxis and, where the Principal determines in accordance with clause 12.1.2 of the Order, have up to date training in an Anaphylaxis Management Training Course as soon as practical after a student enrols.

3. Display the student’s name and photo in the canteen as a reminder to School Staff.

4. Products labelled 'may contain traces of nuts' should not be served to students allergic to nuts.

5. Canteens should provide a range of healthy meals/products that exclude peanut or other nut products in the ingredient list or a ‘may contain...’ statement.

6. Make sure that tables and surfaces are wiped down with warm soapy water regularly.

7. Food banning is not generally recommended. Instead, a ‘no-sharing’ with the students with food allergy approach is recommended for food, utensils and food containers. However, school communities can agree to not stock peanut and tree nut products (e.g. hazelnuts, cashews, almonds, etc.), including chocolate/hazelnut spreads.

8. Be wary of contamination of other foods when preparing, handling or displaying food. For example, a tiny amount of butter or peanut butter left on a knife and used elsewhere may be enough to cause a severe reaction in someone who is at risk of anaphylaxis from cow’s milk products or peanuts.
### Yard

1. If a School has a student who is at risk of anaphylaxis, sufficient School Staff on yard duty must be trained in the administration of the Adrenaline Auto-injector (i.e. EpiPen®) to be able to respond quickly to an anaphylactic reaction if needed.

2. The Adrenaline Auto-injector and each student’s Individual Anaphylaxis Management Plan are easily accessible from the yard, and staff should be aware of their exact location. (Remember that an anaphylactic reaction can occur in as little as a few minutes).

3. Schools must have an emergency response procedure in place so the student’s medical information and medication can be retrieved quickly if a reaction occurs in the yard. This may include options of all yard duty staff carrying emergency cards in yard-duty bags, walkie talkies or yard-duty mobile phones. All staff on yard duty must be aware of the School’s Emergency Response Procedures and how to notify the general office/first aid team of an anaphylactic reaction in the yard.

4. Yard duty staff must also be able to identify, by face, those students at risk of anaphylaxis.

5. Students with anaphylactic responses to insects should be encouraged to stay away from water or flowering plants. School Staff should liaise with Parents to encourage students to wear light or dark rather than bright colours, as well as closed shoes and long-sleeved garments when outdoors.

6. Keep lawns and clover mowed and outdoor bins covered.

7. Students should keep drinks and food covered while outdoors.

### Special events

1. If a School has a student at risk of anaphylaxis, sufficient School Staff supervising the special event must be trained in the administration of an Adrenaline Auto-injector to be able to respond quickly to an anaphylactic reaction if required.

2. School Staff should avoid using food in activities or games, including as rewards.

3. For special occasions, School Staff should consult Parents in advance to either develop an alternative food menu or request the Parents to send a meal for the student.

4. Parents of other students should be informed in advance about foods that may cause allergic reactions in students at risk of anaphylaxis and request that they avoid providing students with treats whilst they are at School or at a special School event.

5. Party balloons should not be used if any student is allergic to latex.

6. If students from other schools are participating in an event at your school, consider requesting information from the participating schools about any students who will be attending the event who are at risk of anaphylaxis. Agree on strategies to minimise the risk of a reaction while the student is visiting the school. This should include a discussion of the specific roles and responsibilities of the host and visiting school.

   Students at risk of anaphylaxis should bring their own adrenaline auto injector with them to events outside their own school.
### Out-of school Setting

#### Travel to and from School

1. School Staff should consult with Parents of students at risk of anaphylaxis and the bus service provider to ensure that appropriate risk minimisation and prevention strategies and processes are in place to address an anaphylactic reaction should it occur on the way to and from School on the bus. This includes the availability and administration of an Adrenaline Auto-injector. The Adrenaline Auto-injector and ASCIA Action Plan for Anaphylaxis must be with the student even if this child is deemed too young to carry an Adrenaline Auto-injector on their person at School.

2. Parents of students who walk to school are encouraged to have their student carry an Adrenaline Auto-injector in their school bag to ensure it is available for use between home and school. This is in addition to the Adrenaline Auto-injector kept in the school First Aid Cupboard.

#### Field trips/excursions/sporting events

1. If a School has a student at risk of anaphylaxis, sufficient School Staff supervising the special event must be trained in the administration of an Adrenaline Auto-injector and be able to respond quickly to an anaphylactic reaction if required.

2. A School Staff member or team of School Staff trained in the recognition of anaphylaxis and the administration of the Adrenaline Auto-injector must accompany any student at risk of anaphylaxis on field trips or excursions.

3. School Staff should avoid using food in activities or games, including as rewards.

4. The Adrenaline Auto-injector and a copy of the Individual Anaphylaxis Management Plan for each student at risk of anaphylaxis should be easily accessible and School Staff must be aware of their exact location.

5. For each field trip, excursion etc, a risk assessment should be undertaken for each individual student attending who is at risk of anaphylaxis. The risks may vary according to the number of anaphylactic students attending, the nature of the excursion/sporting event, size of venue, distance from medical assistance, the structure of excursion and corresponding staff-student ratio.

   All School Staff members present during the field trip or excursion need to be aware of the identity of any students attending who are at risk of anaphylaxis and be able to identify them by face.

6. The School should consult Parents of anaphylactic students in advance to discuss issues that may arise; to develop an alternative food menu; or request the Parents provide a meal (if required).

7. Parents may wish to accompany their child on field trips and/or excursions. This should be discussed with Parents as another strategy for supporting the student who is at risk of anaphylaxis.

8. Prior to the excursion taking place School Staff should consult with the student’s Parents and Medical Practitioner (if necessary) to review the student’s Individual Anaphylaxis Management Plan to ensure that it is up to date and relevant to the particular excursion activity.
9. If the field trip, excursion or special event is being held at another school, that school should be notified ahead of time that a student at risk of anaphylaxis will be attending, and appropriate risk minimisation strategies discussed ahead of time so that the roles and responsibilities of the host and visiting school are clear.

Students at risk of anaphylaxis should take their own adrenaline auto-injector with them to events being held at other schools.

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**Camps and remote settings**

1. Prior to engaging a camp owner/operator’s services the School should make enquiries as to whether it can provide food that is safe for anaphylactic students. If a camp owner/operator cannot provide this confirmation to the School, then the School should consider using an alternative service provider.

2. The camp cook should be able to demonstrate satisfactory training in food allergen management and its implications on food-handling practices, including knowledge of the major food allergens triggering anaphylaxis, cross-contamination issues specific to food allergy, label reading, etc.

3. Schools must not sign any written disclaimer or statement from a camp owner/operator that indicates that the owner/operator is unable to provide food which is safe for students at risk of anaphylaxis. Schools have a duty of care to protect students in their care from reasonably foreseeable injury and this duty cannot be delegated to any third party.

4. Schools should conduct a risk assessment and develop a risk management strategy for students at risk of anaphylaxis. This should be developed in consultation with Parents of students at risk of anaphylaxis and camp owners/operators prior to the camp dates.

5. School Staff should consult with Parents of students at risk of anaphylaxis and the camp owner/operator to ensure that appropriate risk minimisation and prevention strategies and processes are in place to address an anaphylactic reaction should it occur. If these procedures are deemed to be inadequate, further discussions, planning and implementation will need to be undertaken in order for the school to adequately discharge its non-delegate duty of care.

6. If the School has concerns about whether the food provided on a camp will be safe for students at risk of anaphylaxis, it should raise these concerns in writing with the camp owner/operator and also consider alternative means for providing food for those students.

7. Use of substances containing allergens should be avoided where possible.

8. Camps should be strongly discouraged from stocking peanut or tree nut products, including nut spreads. Products that ‘may contain’ traces of nuts may be served, but not to students who are known to be allergic to nuts.

   If eggs are to be used there must be suitable alternatives provided for any student known to be allergic to eggs.

9. The student's Adrenaline Auto-injector, Individual Anaphylaxis Management Plan, including the ASCIA Action Plan for Anaphylaxis and a mobile phone must be taken on camp. If mobile phone access is not available, an alternative method of communication in an emergency must be considered, e.g. a satellite phone.
10. Prior to the camp taking place School Staff should consult with the student’s Parents to review the students Individual Anaphylaxis Management Plan to ensure that it is up to date and relevant to the circumstances of the particular camp.

11. School Staff participating in the camp should be clear about their roles and responsibilities in the event of an anaphylactic reaction. Check the emergency response procedures that the camp provider has in place. Ensure that these are sufficient in the event of an anaphylactic reaction and ensure all School Staff participating in the camp are clear about their roles and responsibilities. All attending staff are to familiarise themselves with the student’s individual anaphylaxis management plan.

12. Contact local emergency services and hospitals well prior to the camp. Advise full medical conditions of students at risk, location of camp and location of any off camp activities. Ensure contact details of emergency services are distributed to all School Staff as part of the emergency response procedures developed for the camp.

13. Schools should consider taking an Adrenaline Auto-injector for General Use on a school camp, even if there is no student at risk of anaphylaxis, as a backup device in the event of an emergency.

14. Schools should consider purchasing an Adrenaline Auto-injector for General Use to be kept in the first aid kit and including this as part of the Emergency Response Procedures.

15. The Adrenaline Auto-injector should remain close to the student and School Staff must be aware of its location at all times.

16. The Adrenaline Auto-injector should be carried in the school first aid kit; however, Schools can consider allowing students, particularly adolescents, to carry their Adrenaline Auto-injector on camp. Remember that all School Staff members still have a duty of care towards the student even if they do carry their own Adrenaline Auto-injector.

17. Students with anaphylactic responses to insects should always wear closed shoes and long-sleeved garments when outdoors and should be encouraged to stay away from water or flowering plants.

18. Cooking and art and craft games should not involve the use of known allergens.

19. Consider the potential exposure to allergens when consuming food on buses and in cabins.

**Overseas travel**

1. Review and consider the strategies listed under “Field Trips/Excursions/Sporting Events” and “Camps and Remote Settings”. Where an excursion or camp is occurring overseas, Schools should involve Parents in discussions regarding risk management well in advance.

2. Investigate the potential risks at all stages of the overseas travel such as:
   - travel to and from the airport/port;
   - travel to and from Australia (via aeroplane, ship etc);
   - various accommodation venues;
   - all towns and other locations to be visited;
   - sourcing safe foods at all of these locations; and
   - risks of cross contamination, including exposure to the foods of the other students; hidden allergens in foods; whether the table and surfaces that the student may use will be adequate cleaned to prevent a reaction; and whether the other students will wash their hands when handling food.
3. Assess where each of these risks can be managed using minimisation strategies such as the following:
   - translation of the student’s Individual Anaphylaxis Management Plan and ASCIA Action Plan
   - sourcing of safe foods at all stages
   - obtaining the names, address and contact details of the nearest hospital and Medical Practitioners at each location that may be visited
   - obtaining emergency contact details
   - determine the ability to purchase additional auto-injectors.

4. Record details of travel insurance, including contact details for the insurer. Determine how any costs associated with medication, treatment and/or alteration to the travel plans as a result of an anaphylactic reaction can be paid.

5. Plan for appropriate supervision of students at risk of anaphylaxis at all times, including that:
   - there are sufficient School Staff attending the excursion who have been trained in accordance the Anaphylaxis Guidelines 2016;
   - there is an appropriate level of supervision of anaphylactic students throughout the trip, particularly at times when they are taking medication and eating food;
   - there will be capacity for adequate supervision of any affected student(s) requiring medical treatment, and that adequate supervision of other students will be available; and
   - staff/student ratios should be maintained during the trip, including in the event of an emergency where the students may need to be separated.

6. The School should re-assess its Emergency Response Procedures, and if necessary adapt it to the particular circumstances of the overseas trip. Keep a record of relevant information such as the following:
   - dates of travel;
   - name of airline, and relevant contact details;
   - itinerary detailing the proposed destinations, flight information and the duration of the stay in each location;
   - hotel addresses and telephone numbers;
   - proposed means of travel within the overseas country;
   - list of students and each of their medical conditions, medication and other treatment (if any);
   - emergency contact details of hospitals, ambulances, and Medical Practitioners in each location;
   - details of travel insurance
   - plans to respond to any foreseeable emergency including who will be responsible for the implementation of each part of the plans;
   - possession of a mobile phone or other communication device that would enable the School Staff to contact emergency services in the overseas country if assistance is required.
School Management and Emergency Response:

The School’s Anaphylaxis Management Policy must include procedures for emergency response to anaphylactic reactions.

A complete and up to date list of students identified as having a medical condition that relates to allergy and the potential for anaphylactic reaction is available from General Office staff through CASES21.

The ASCIA Action Plans are located in the:

- First Aid Office with First Aid Officer
- On the college Staff Infonet
- Student’s individual auto-injector container in the First Aid Cupboard in General Office Kitchenette
- Home Economics Office, with Generic Epipen®
- Kyneton Sporting Complex (sports equipment cupboard), with generic Epipen®
- In the Student’s Individual auto-injector container which is kept with the designated Anaphylaxis First Aid Trained Staff member on school excursions
- In the Student’s Individual auto-injector container which is kept with the designated Anaphylaxis First Aid Trained Staff member on school camps
- In the Student’s Individual auto-injector container which is kept with the First Aid Coordinator or designated Anaphylaxis First Aid Trained Staff member at special events conducted or organised by the school

Information about the storage and accessibility of Adrenaline Auto-injectors:

- Students individual Adrenaline Auto-Injectors are located in the First Aid Cupboard in General Office Kitchenette. Each student’s auto-injector is kept in an individual container clearly labelled with their name and photo.
- Generic Adrenaline Auto-injectors (Epipen®) located in:
  - First Aid Cupboard in General Office Kitchenette
  - Sports Equipment Cupboard in Kyneton Sporting Complex
  - Home Economics Office.

Communication with School Staff, students and Parents is to occur in accordance with the communication plan (see below).

School principals have overall responsibility for implementing strategies and processes for ensuring a safe and supportive environment for students at risk of anaphylaxis.

All school staff has a duty of care to take reasonable steps to protect a student in their care from risks of injury that are reasonably foreseeable.

The first aid coordinator and school nurse should take a lead role in supporting the Principal and other School Staff to implement the School’s Anaphylaxis Management Policy.

Parents have an important role in working with the School to minimise the risk of anaphylaxis.
To assist Principals, School Staff, First Aid Coordinators and School Nurses, and Parents of a student at risk of anaphylaxis in meeting their responsibility, a summary of some of the key obligations under Ministerial Order 706, and suggested prevention strategies can be found in the 2016 DET Anaphylaxis Guidelines.

When a student with a medical condition that relates to allergy and the potential for anaphylactic reaction is under the care or supervision of the School outside of normal class activities, including in the school yard, at camps and excursions, or at special events conducted, organised or attended by the School, the Principal must ensure that there are a sufficient number of School Staff present who have been trained in accordance with policy under ‘staff training’.

In the event of an anaphylactic reaction, the Emergency Response Procedures in this policy must be followed, together with the School’s general first aid and emergency response procedures and the student’s ASCIA Action Plan.

For the roles and responsibilities of Principals, School Staff, First Aid Coordinators and School Nurses, Parents of a student at risk of anaphylaxis please see the DET Anaphylaxis Guidelines 2016.

**Adrenaline Auto-injectors for General Use:**

The Principal of the school is responsible for arranging for the purchase of additional Adrenaline Auto-injector(s) for general use and as a back-up to those supplied by parents.

The Principal will determine the number and type of Adrenaline Auto-injector(s) for general use to purchase and in doing so consider all of the following:

- the number of students enrolled at the School who have been diagnosed as being at risk of anaphylaxis;
- the accessibility of Adrenaline Auto-injectors that have been provided by Parents of students who have been diagnosed as being at risk of anaphylaxis;
- the availability and sufficient supply of Adrenaline Auto-injectors for General Use in specified locations at the School, including in the school yard, and at excursions, camps and special events conducted or organised by the School; and
- the Adrenaline Auto-injectors for General Use have a limited life, usually expiring within 12-18 months, and need to be checked regularly and replaced at the School’s expense, either at the time of use or expiry, whichever is first.

**Storage of Adrenaline Auto-injectors**

At Kyneton Secondary College, Adrenaline Auto-injectors:

- for individual students, or for general use, will be stored correctly and be able to be accessed quickly.
- will be stored in an unlocked, easily accessible place away from direct light and heat but not in a refrigerator or freezer;
- will be clearly labelled with the student's name and be stored with a copy of the student's ASCIA Action Plan;
- for General Use will be clearly labelled and distinguishable from those for students at risk of anaphylaxis; and
- Trainer Adrenaline Auto-injectors (which do not contain adrenaline or a needle) will not be stored in the same location due to the risk of confusion.

**When to use Adrenaline Auto-injectors for General Use**

It is recommended that Adrenaline Auto-injectors for General Use be used when:
• a student’s prescribed Adrenaline Auto-injector does not work, is misplaced, out of date or has already been used; or
• a student is having a suspected first time anaphylactic reaction and does not have a medical diagnosis for anaphylaxis; or
• when instructed by a medical officer after calling 000.

ASCIA advises that no serious harm is likely to occur from mistakenly administering adrenaline to an individual who is not experiencing anaphylaxis. Further information is available from ASCIA at: www.allergy.org.au/health-professionals/anaphylaxis-resources/adrenaline-autoinjectors-for-general-use www.allergy.org.au/health-professionals/anaphylaxis-resources//adrenaline-autoinjectors-faqs

Communication Plan
The Principal is responsible for ensuring that a communication plan is developed to provide information to all school staff, students and parents about anaphylaxis and the school’s anaphylaxis policy.

This communication plan includes strategies for advising school staff, students and parents about how to respond to an anaphylactic reaction of a student in an In-school (eg. in the classroom, school yard, school buildings and sites including gymnasium and hall) and Out-of school (eg. on excursion, school camps, and at special events conducted, organised or attended by the school) environment.

The Communication Plan must include procedures to inform volunteers and casual relief staff of students who are at risk of anaphylaxis and of their role in responding to an anaphylactic reaction experienced by a student in their care.

It is the responsibility of the principal of a school to ensure that the school staff are:

• Adequately trained by completing the 22300VIC or 10313NAT course every 3 years or by completing the ASCIA e-training every 2 years
  AND
• Briefed at least twice per calendar year through an in-house school briefing in accordance with the Ministerial Order.

Self-administration of the Adrenaline Auto-injector
The decision whether a student can carry their own Adrenaline Auto-injector should be made when developing the student’s Individual Anaphylaxis Management Plan, in consultation with the student, the student’s Parents and the student’s Medical Practitioner.

It is important to note that students who ordinarily self-administer their Adrenaline Auto-injector may not physically be able to self-administer due to the effects of a reaction. In relation to these circumstances, School Staff must administer an Adrenaline Auto-injector to the student, in line with their duty of care for that student.

If a student self-administers an Adrenaline Auto-injector, one member of the School Staff should supervise and monitor the student, and another member of the School Staff should contact an ambulance (on emergency number 000).

If a student carries their own Adrenaline Auto-injector, it may be prudent to keep a second Adrenaline Auto-injector (provided by the Parent) on-site in an easily accessible, unlocked location that is known to all School Staff.
Responding to an incident
A member of the school staff should remain with the student who is displaying symptoms of anaphylaxis at all times. As per instructions on the ASCIA Action Plan for Anaphylaxis:

‘Lay the person flat. Do not allow them to stand or walk. If breathing is difficult allow them to sit.’

Another member of the school staff should immediately locate the student's adrenaline autoinjector and the student’s ASCIA Action Plan for Anaphylaxis.

The adrenaline autoinjector should then be administered following the instructions in the student's ASCIA Action Plan for Anaphylaxis. Where possible, only school staff with training in the administration of an adrenaline autoinjector should administer the student’s adrenaline autoinjector. However, it is imperative that an adrenaline autoinjector is administered as soon as signs of anaphylaxis are recognised. If required, the adrenaline autoinjector can be administered by any person following the instructions in the student’s ASCIA Action Plan for Anaphylaxis.

It is important that in responding to an incident, the student does not stand and is not moved unless in further danger (e.g. the anaphylactic reaction was caused by a bee sting and the bee hive is close by). The ambulance should transport the student by stretcher to the ambulance, even if symptoms appear to have improved or resolved. The student must be taken to the ambulance on a stretcher if adrenaline has been administered.

In-School Environment Emergency Response
Staff may use office phones or personal mobile phones to raise the alarm that a reaction has occurred in a classroom or in the yard, which triggers getting an Adrenaline Auto-injector to the child and other emergency response protocols.

<table>
<thead>
<tr>
<th>In-School Emergency Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Staff member must remain with the student. Lay the student flat. Do not allow the student to stand or walk. If breathing is difficult for them, allow them to sit. Another staff member contacts the General Office* and retrieves the students Adrenaline Autoinjector, a second adrenaline autoinjector for general use &amp; Individual Anaphylaxis Management Plan (includes the ASCIA Action Plan).</td>
</tr>
<tr>
<td>2. Give Adrenaline autoinjector and note the time.</td>
</tr>
<tr>
<td>3. General Office* will immediately call an ambulance (000). They must remain on line and, if possible, take a portable phone to where the student is as the 000 call-taker will want updates of the student’s condition.</td>
</tr>
<tr>
<td>4. Nominate a staff member to wait for an ambulance at a designated school entrance to direct the ambulance officers to the student.</td>
</tr>
<tr>
<td>5. If a student is having a first time severe allergic reaction or anaphylaxis without any prior diagnosis, the staff member should follow first aid procedure and use the adrenaline autoinjector for general use in the first instance and call the ambulance. If there is not an adrenaline autoinjector available, then contact 000 for medical advice.</td>
</tr>
<tr>
<td>6. Reassure the student experiencing the reaction as they are likely to be feeling anxious and frightened as a result of the reaction and the side-effects of the adrenaline. Watch the student closely in case of a worsening condition. Ask another member of the School Staff to move other students away and reassure them elsewhere.</td>
</tr>
<tr>
<td>7. Further adrenaline doses may be given if no response after 5 minutes.</td>
</tr>
</tbody>
</table>
8. General Office to contact parents/guardian.
9. The used auto-injector/s must be handed to the ambulance paramedics along with the time/s of administration.
10. If the staff member finds that the parents are unable to meet the child at hospital, the staff member will travel with the student to hospital.

**Out-of School Environment Emergency Response**

Excursions and Camps - Each individual camp and excursion requires risk assessment for each individual student attending who is at risk of anaphylaxis. Therefore emergency procedures will vary accordingly. A team of School Staff trained in anaphylaxis need to attend each event, and appropriate methods of communication need to be discussed, depending on the size of excursion/camp/venue. It is imperative that the process also addresses:

- the location of Adrenaline Auto-injectors i.e. who will be carrying them. Is there a second medical kit? Who has it?;
- ‘how’ to get the Adrenaline Auto-injector to a student; and
- ‘who’ will call for ambulance response, including giving detailed location address. e.g. Melway reference if city excursion, and best access point or camp address/GPS location.

The student’s Adrenaline Auto-injector should be taken personally by the classroom teacher to the activity or excursion, along with a Generic Adrenaline Auto-injector, from the First Aid Office. They will ensure the Adrenaline Auto-injector’s are stored correctly (at room temperature and away from light) in an unlocked, easily accessible place.

A mobile telephone must be taken to any off school campus activity attended by an anaphylactic student.

**Out-of School Emergency Response:**

<p>| | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>1.</td>
<td>Staff member must remain with the student whilst another Staff member retrieves the students Adrenaline Auto-injector &amp; Individual Anaphylaxis Management Plan (includes the ASCIA Action Plan).</td>
</tr>
<tr>
<td>2.</td>
<td>Lay the student flat. Do not allow the student to stand or walk. If breathing is difficult for them, allow them to sit but not to stand.</td>
</tr>
<tr>
<td>3.</td>
<td>Once the Adrenaline Auto-injector is retrieved, administer as per ASCIA Action Plan.</td>
</tr>
<tr>
<td>4.</td>
<td>Note the time you administered the Adrenaline Auto-injector.</td>
</tr>
<tr>
<td>5.</td>
<td>Immediately call an ambulance (000/112).</td>
</tr>
<tr>
<td>6.</td>
<td>Staff member to contact parents/guardian or nominate a person to.</td>
</tr>
<tr>
<td>7.</td>
<td>Nominate a staff member to wait for an ambulance at a designated entrance.</td>
</tr>
<tr>
<td>8.</td>
<td>Reassure the student experiencing the reaction as they are likely to be feeling anxious and frightened as a result of the reaction and the side-effects of the adrenaline. Watch the student closely in case of a worsening condition. Ask another member of the School Staff to move other students away and reassure them elsewhere.</td>
</tr>
<tr>
<td>9.</td>
<td>In the situation where there is no improvement or severe symptoms progress (as described in the ASCIA Action Plan), a second injection (of the same dosage) may be administered after five minutes, if a second auto-injector is available (such as the Adrenaline Auto-injector for General Use).</td>
</tr>
<tr>
<td>10.</td>
<td>The used auto-injector must be handed to the ambulance paramedics along with the time of administration.</td>
</tr>
<tr>
<td>11.</td>
<td>The staff member will be required to contact the General Office to inform the Principal of the incident.</td>
</tr>
<tr>
<td>12.</td>
<td>If the staff member finds that the parents are unable to meet the child at hospital, the staff member will travel with the student to hospital.</td>
</tr>
</tbody>
</table>
**If an Adrenaline Auto-injector is administered, the School must:**

1. **Immediately** call an ambulance (000)

2. Lay the student flat – if breathing is difficult, allow them to sit. Do not allow the student to stand or walk. If breathing is difficult for them, allow them to sit but not to stand. If vomiting or unconscious, lay them on their side (recovery position) and check their airway for obstruction.

3. Reassure the student experiencing the reaction as they are likely to be feeling anxious and frightened as a result of the reaction and the side-effects of the adrenaline. Watch the student closely in case of a worsening condition. Ask another member of the School Staff to move other students away in a calm manner and reassure them. These students should be adequately supervised during this period.

4. In the situation where there is no improvement or **severe symptoms** progress (as described in the ASCIA Action Plan), further adrenaline doses may be administered every five minutes, if other auto-injectors are available (such as the Adrenaline Auto-injector for General Use).

5. Then contact the student's emergency contacts.

6. **For government schools - later**, contact Security Services Unit, Department of Education & Training to report the incident on 9589 6266 (available 24 hours a day, 7 days a week). A report will then be lodged on IRIS (Incident Reporting Information System).

**Always call an ambulance as soon as possible (000)**

When using a standard phone call 000 (**triple zero**) for an ambulance. If calling from a mobile phone which is out of range, call 112.

**First-time reactions**

If a student appears to be having a severe allergic reaction, but has not been previously diagnosed with an allergy or being at risk of anaphylaxis, the school staff should follow the school's first aid procedures. This should include immediately:

- locating and administering an adrenaline autoinjector for general use
- following instructions on the ASCIA Action Plan for Anaphylaxis general use
- (which should be stored with the general use adrenaline autoinjector)

Followed by calling the ambulance (000).

**Post-incident support**

An anaphylactic reaction can be a very traumatic experience for the student, staff, parents, students and others witnessing the reaction. In the event of an anaphylactic reaction, students and school staff may benefit from post-incident counselling, provided by the school nurse, guidance officer, student welfare coordinator or school psychologist.

**Review**

After an anaphylactic reaction has taken place that has involved a student in the school's care and supervision, it is important that the following review processes take place:

1. The adrenaline autoinjector must be replaced by the parent as soon as possible.

2. In the meantime, the principal should ensure that there is an interim Individual Anaphylaxis Management Plan should another anaphylactic reaction occur prior to the replacement adrenaline autoinjector being provided by the parents.

3. If the adrenaline autoinjector for general use has been used this should be replaced as soon as possible.

4. In the meantime, the principal should ensure that there is an interim plan in place should another anaphylactic reaction occur prior to the replacement adrenaline autoinjector for general use being provided.
5. The student's Individual Anaphylaxis Management Plan should be reviewed in consultation with the student's parents.

6. The school's Anaphylaxis Management Policy should be reviewed to ascertain whether there are any issues requiring clarification or modification in the Policy. This will help the school to continue to meet its ongoing duty of care to students.

**Communication Plan:**

It is the responsibility of the principal of a school to ensure that the school staff are:

- adequately trained (by completing the 22300VIC or 10313NAT course every 3 years, or by completing the ASCIA e-training every 2 years)
  
  AND

- briefed at least twice per calendar year through an in-house school briefing in accordance with the Ministerial Order (Chapter 5).

**Raising Staff Awareness**

Relevant school staff to be briefed at least twice per year by a staff member who has current anaphylaxis management training (see Chapter 5 for further detail). However, it is best practice for a school to brief **all** school staff on a regular basis regarding anaphylaxis and the school’s anaphylaxis management policy.

In addition, it is recommended that School Anaphylaxis Supervisor(s) or other designated staff member(s) including the Daily Organiser, be responsible for briefing all volunteers and casual relief staff, and new school staff (including administration and office staff, canteen staff, sessional teachers, and specialist teachers) on the above information and their role in responding to an anaphylactic reaction experienced by a student in their care.

**Raising Student Awareness**

Peer support is an important element of support for students at risk of anaphylaxis.

School staff can raise awareness in their school through fact sheets or posters displayed in hallways, canteens and classrooms. Class teachers can discuss the topic with students in class, with a few simple key messages such as the following:

1. Always take food allergies seriously – severe allergies are no joke.
2. Don't share your food with friends who have food allergies.
3. Wash your hands after eating.
4. Know what your friends are allergic to.
5. If a school friend becomes sick, get help immediately even if the friend does not want you to.
7. Don't pressure your friends to eat food that they are allergic to.

Source: Be a MATE kit, published by Anaphylaxis & Allergy Australia.

It is important to be aware that a student at risk of anaphylaxis may not want to be singled out or be seen to be treated differently. Also be aware that bullying of students at risk of anaphylaxis can occur in the form of teasing, tricking a student into eating a particular food or threatening a student with the substance that they are allergic to, such as peanuts. This is not acceptable behaviour and should not be tolerated. Talk to the students involved so they are aware of the seriousness of an anaphylactic reaction. Any
attempt to harm a student diagnosed at risk of anaphylaxis must be treated as a serious and dangerous incident and dealt with in line with the school’s anti-bullying policy. Schools can refer to the Bully Stoppers website, an anti-bullying resource for ideas and strategies for dealing with bullying situations. Further information about Bully Stoppers is available at: www.education.vic.gov.au/about/programs/bullystoppers/Pages/default.aspx

**Work with Parents**
Schools should be aware that parents of a child who is at risk of anaphylaxis may experience considerable anxiety about sending their child to school. It is important to develop an open and cooperative relationship with them so that they can feel confident that appropriate management strategies are in place at school.
Aside from implementing practical risk minimisation strategies in schools, the anxiety that parents and students may feel can be considerably reduced by regular communication and increased education, awareness and support from the school community.

**Raising school community awareness**
Kyneton Secondary College will continue to raise awareness about anaphylaxis in the school community so that there is an increased understanding of the condition. This can be done by providing information in the school newsletter, on the school website, at assemblies or parent information sessions.
Parent information sheets that promote greater awareness of severe allergies can be downloaded from the Royal Children’s Hospital website at: www.rch.org.au/allergy/parent_information_sheets/Parent_Information_Sheets/

**Staff Training**
Clause 12 of the Order requires school staff to undertake regular training in anaphylaxis management as part of the School Anaphylaxis Management Policy.
The Department has moved to an online model for anaphylaxis training. Under this model it is recommended that ALL Victorian school staff undertake the online training course.
The online training course will be free to all Victorian school staff (and the general public) and can be accessed at: [https://etrainingvic.allergy.org.au/](https://etrainingvic.allergy.org.au/)

**Please note:** in order to successfully complete this training staff will also be required to show the School Anaphylaxis Supervisor that they are able to appropriately and competently use an adrenaline autoinjector. This capability must be tested within 30 days of completion of the online training course.

**Who is required to undertake anaphylaxis management training?**
The Order specifies that school staff must undertake training in anaphylaxis management if they:
- conduct classes attended by students with a medical condition relating to allergy and the potential for anaphylactic reaction or
- are specifically identified and requested to do so by the school principal, based on the principal’s assessment of the risk of an anaphylactic reaction occurring while a student is under that staff member’s care, authority or supervision.
Schools are encouraged to consider whether volunteers at the school and regular casual relief teachers should also undertake training.
The Order states that these school staff must:
- successfully complete an anaphylaxis management training course (either online or face-to-face) and
- participate in the school’s twice yearly briefings conducted by the School Anaphylaxis Supervisor or another member of staff nominated by the principal who has completed an approved anaphylaxis management training course in the past two years.

**How soon must the training take place?**
The training should take place as soon as practicable after a student at risk of anaphylaxis enrolls and, where possible, before the student’s first day at school.
If for any reason a relevant staff member has not yet completed training, the principal is responsible for developing an interim Individual Anaphylaxis Management Plan in consultation with the student’s parents. The principal should also consider whether consultation with the School Anaphylaxis Supervisor, the school nurse, or the student’s treating medical practitioner is required when developing the interim plan.

**What type of training should be undertaken?**

Kyneton Secondary College utilises the online training course.  
**Online Training - ASCIA Anaphylaxis e-training for Victorian Schools**

The Department has worked with ASCIA to develop the online training course, which is compliant with the Order, for use in all Victorian schools.  

The Department recommends that ALL Victorian school staff undertake the online training course. This course is freely available to all Victorian school staff and has been introduced to reduce the burden of face-to-face training on schools and increase the quality and consistency of training.  

The online training course includes six modules on anaphylaxis emergency management:

- what are allergies and anaphylaxis  
- signs, symptoms and recommended action for allergy and anaphylaxis  
- adrenaline autoinjectors  
- ASCIA Action Plans  
- anaphylaxis management in Victorian schools  
- a final assessment module.

Completion of the online training course alone is **not** sufficient to meet the requirements of the Order. An appropriately qualified supervisor (for example, a School Anaphylaxis Supervisor, discussed in more detail below) will also need to assess a person’s competency in the administration of an adrenaline autoinjector.  

At the end of the online training course, participants who have passed the assessment module will be issued a certificate which needs to be signed by the School Anaphylaxis Supervisor to indicate that the participant has demonstrated their competency in using an adrenaline autoinjector device.  

School staff that complete the online training course will be required to repeat that training and the adrenaline autoinjector competency assessment **every two years**.

To access the **ASCIA Anaphylaxis e-training for Victorian Schools** go to: [https://etrainingvic.allergy.org.au/](https://etrainingvic.allergy.org.au/)

It is recommended that principals identify **two school staff per school** to become School Anaphylaxis Supervisors. These staff may include a school-funded school nurse, first aider or other health and wellbeing staff, or senior teachers. A key role of the Supervisors is to undertake competency checks on all staff that have successfully completed the online training course. These competency checks need to be undertaken by the Supervisor within 30 days of a relevant member of the school staff completing the online training course. To qualify as a School Anaphylaxis Supervisor, the nominated staff members need to complete an accredited short course that teaches them how to conduct a competency check on those who have completed the online training course.

**School Anaphylaxis Supervisor Role**

Each Supervisor will:

- ensure they have currency in the **Course in Verifying the Correct Use of Adrenaline Autoinjector Devices 22303VIC** (every 3 years) and the **ASCIA Anaphylaxis e-training for Victorian Schools** (every 2 years)
- ensure that they provide the principal with documentary evidence of currency in the above courses
- assess and confirm the correct use of adrenaline autoinjector (trainer) devices by other school staff undertaking the **ASCIA Anaphylaxis e-training for Victorian Schools**
• send periodic reminders to staff or information to new staff about anaphylaxis training requirements and liaise with the principal to ensure records of the anaphylaxis training undertaken by all school staff are stored on-site at the school

• provide access to the adrenaline autoinjector (trainer) device for practice use by school staff

• provide regular advice and guidance to school staff about allergy and anaphylaxis management in the school as required

• liaise with parents or guardians (and, where appropriate, the student) to manage and implement Individual Anaphylaxis Management Plans

• liaise with parents or guardians (and, where appropriate, the student) regarding relevant medications within the school

• lead the twice-yearly anaphylaxis school briefing

• develop school-specific scenarios to be discussed at the twice-yearly briefing to familiarise staff with responding to an emergency situation requiring anaphylaxis treatment; for example:
  - a bee sting occurs on school grounds and the allergic student is conscious
  - an allergic reaction where the student has collapsed on school grounds and the student is not conscious.

• develop similar scenarios for when staff are demonstrating the correct use of the adrenaline autoinjector (trainer) device.

Twice-yearly school briefings
In addition to the training outlined above, an in-house anaphylaxis school briefing with all school staff must be conducted twice a year, and should preferably be led by the School Anaphylaxis Supervisor or another member of staff who has current anaphylaxis training.

For the purposes of these Guidelines and the Order, this means that the member of the school staff has successfully completed an anaphylaxis management training course in the previous 2 years. This ensures that the designated staff member conducting the anaphylaxis briefing has current knowledge relating to anaphylaxis management and, importantly, in the correct use of an adrenaline autoinjector.

The briefing should include information on:

• the school’s legal requirements as outlined in Ministerial Order 706

• pictures of the students at the school at risk of anaphylaxis, their allergens, year levels and risk management plans that are in place

• signs and symptoms of anaphylaxis

• relevant anaphylaxis training

• ASCIA Action Plan for Anaphylaxis and how to administer an EpiPen®

• your school’s First Aid Policy and Emergency Response Procedures

• how to access on-going support and training.

Annual Risk Management Checklist
A school’s anaphylaxis management policy must require the principal to complete an annual Risk Management Checklist to monitor their compliance with the Order, these Guidelines, and their legal obligations.

Note: The annual checklist can be downloaded from www.education.vic.gov.au/school/teachers/health/Pages/anaphylaxischl.aspx
Handheld Technology Device Policy

Rationale:
Handheld Technology Devices are now common place. The way in which these Devices are being used at school is causing classroom disruption and is a potential threat to good order in the school ground. The use of such Devices for SMS messaging can interfere with hearing aids causing discomfort to the wearer. The student Code of Conduct clearly states that students are expected to “behave in a manner that is safe and respectful of the rights of all people and their property.” Disrupting the learning opportunities of other students and teacher’s rights to teach, and jeopardising school ground health and safety, is clearly unacceptable.

While it is our strong preference that Handheld Technology Devices are not brought to school, we recognise that, for a variety of reasons, some families want their children to have access to a Handheld Device before or after school.

Implementation:

• Students are not to bring Handheld Technology Devices to school unless their parents sanction it on health and safety grounds, for use when travelling to and from school only. In this case the accompanying pro forma (see over) must be completed

• The Handheld Technology Devices must remain switched off while at school, “silent and invisible”

• Should parents need to make contact with their child during the day they should call the General Office on 5421 1100. Similarly, any students who need to make a call during the day should go to the General Office (emergencies only) or see the Assistant Principal

• The use of SMS text messaging to send inappropriate messages, to bully or harass other students, is strictly prohibited

• Teachers have been advised to confiscate any Handheld Technology Device that they see. If any such Device disrupts a lesson or is used inappropriately it will be immediately confiscated from the student without argument. Any argument that results will be regarded as a serious breach of the Student Code of Conduct. Confiscated Devices will be handed in to the General office who will retain it until the end of the school day in the first instance. Further breaches of the Policy will result in the Device being retained until a parent/guardian can collect it at a mutually convenient time. A third breach results in loss of the privilege of bringing a Device for the remainder of the term
• For reasons of privacy, and due to community concerns, students are not to use the photographic/video capacity of any Handheld Technology Device. A breach of this rule will result in serious consequences and may have legal ramifications.

• Consent: Please ensure parent/guardian and students sign their consent on the final page of the enrolment form.

References:

Circular 397/2000 – Possible Health Effects of Mobile Phones
References: ASCIV – www.gsat.edu.au/-asciv
Schools Reference Guide: 7.10 – Asset Recording and Control
Child Protection Reporting Policy

Rationale:
To define the roles and responsibilities of school staff in protecting the safety and wellbeing of children and young people and to enable staff to:

- identify indicators that a child or young person may be in need of protection.
- make a report about a child or young person who may be in need of protection
- comply with reporting obligations under child protection law and criminal law and fulfil their duty of care.

Policy:
1. Purpose of this policy

The purpose of this policy is to explain the roles and responsibilities of school staff to protect the safety and wellbeing of children and young people. Detailed information that all staff in Victorian government schools must follow is found at: http://www.education.vic.gov.au/school/principals/spag/safety/Pages/childprotection.aspx

2. Mandatory Reporters

All staff who are Victorian Institute of Teaching (VIT) registered teachers (including principals) or who have been granted permission to teach by the VIT are ‘mandatory reporters’. This means that in the course of undertaking their professional duties, they must report to the Department of Health and Human Services (DHHS) Child Protection a belief on reasonable grounds that a child is in need of protection from significant harm as a result of sexual abuse or physical injury and the child’s parents are unable or unwilling to protect the child. They must report as soon as practicable after forming the belief.

There may be times when two or more mandated staff members, for example a teacher and a principal, have formed a belief about the same child or young person on the same occasion. In this situation it is sufficient for only one of the mandated staff members to report to Child Protection. The other staff member is obliged to ensure that the report has been made and that all of the grounds for their own belief were included in the report made by the other staff member.

If one staff member has a different view from another staff member about making a report and the staff member continues to hold the belief that a child is in need of protection, that person is obliged to make a report to Child Protection.

3. Non-mandated staff members
Any person, who believes on reasonable grounds that a child is in need of protection, may report their concerns to Child Protection. This means that any person, including non-mandated school staff, is able to make a report to Child Protection or Victoria Police when they believe that a child or young person is at risk of harm and in need of protection, and the child’s parents are unable or unwilling to protect the child.

In order to discharge duty of care, staff members, **whether or not mandated**, need to report a belief formed in the course of undertaking their professional duties. A report must be made as soon as practicable after forming the belief, and on each occasion on which they become aware of any further reasonable grounds for the belief.

4. **Failure to disclose offence**

In addition to mandatory reporting and duty of care obligations, **any adult** who forms a reasonable belief that a sexual offence has been committed by an adult against a child under 16 must report that information to police. Failure to disclose the information to police is a criminal offence except in limited circumstances, such as where the information has already been reported to Child Protection or the child is older than 16 when the belief is formed. More information about the offence can be found at [http://www.justice.vic.gov.au/home/safer-communities/protecting+children+and+families/failure+to+disclose+offence](http://www.justice.vic.gov.au/home/safer-communities/protecting+children+and+families/failure+to+disclose+offence).

5. **Duty of care**

School staff have a duty of care to take reasonable steps to protect the safety, health and wellbeing of children in their care.

If a staff member has concerns about the safety, health and wellbeing of children in their care it is important to take immediate action.

In the case of a child who may be in need of protection or therapeutic treatment, or where there are significant concerns about the wellbeing of a child, school staff can discharge this duty of care by taking action which includes the following:

- Reporting their concerns to Child Protection, Victoria Police or another appropriate agency
- Notifying the principal or a member of the school leadership team of their concerns and the reasons for those concerns.

Duty of care obligations are separate and additional to mandatory reporting and ‘failure to disclose’ reporting obligations.

6. **Making a report**

Staff **do not require** the permission of parents, carers or guardians to make a report to Child Protection, nor are they required to tell parents, carers or guardians that they have done so.


Reports to Child Protection and Victoria Police are confidential unless you consent or a court or tribunal decides that it is necessary in the interests of justice for your identity to be disclosed.

7. **Staff training**
As part of their initial induction to the school, staff will be informed of child protection reporting requirements and Department policy [http://www.education.vic.gov.au/school/principals/spag/safety/Pages/childprotection.aspx](http://www.education.vic.gov.au/school/principals/spag/safety/Pages/childprotection.aspx) and will be provided with supporting documentation in their staff handbook.

**Reporting child protection concerns:**

Mandatory reporters, who believe on reasonable grounds that a child or young person is in need of protection from physical injury or sexual abuse, must report their concerns to Department of Health and Human Services (DHHS) Child Protection.

All other school staff members who form a belief on reasonable grounds that a child or young person:

- is in need of protection, should report their concerns to DHHS Child Protection or Victoria Police.
- is displaying sexually abusive behaviours and is in need of therapeutic treatment should report their concerns to DHHS Child Protection.

If staff have significant concerns for the wellbeing of a child or young person they should report their concerns to DHHS Child Protection or Child FIRST.

In cases where staff have concerns about a child or young person, they should also discuss their concerns with the principal or a member of the school leadership team.

**Reporting criminal child sexual abuse-failure to disclose offence:**

Any staff member who forms a reasonable belief that a sexual offence has been committed in Victoria by an adult against a child under 16 must disclose that information to police. Failure to disclose the information to police is a criminal offence, except in limited circumstances such as where the information has already been reported to DHHS Child Protection.

The offence applies to all adults in Victoria, not just professionals who work with children. To read more information about the ‘failure to disclose’ offence, see: Department of Justice and Regulation – Failure to disclose offence

**Duty of care:**

School staff have a duty of care to protect the safety, health and wellbeing of children in their care. If a staff member has concerns about the safety, health and wellbeing of children in their care they should take immediate action.

In the case of a child who may be in need of protection or therapeutic treatment, or where there are significant concerns about the wellbeing of a child, school staff can discharge this duty of care by taking action which includes the following:

- reporting their concerns to the DHHS Child Protection or another appropriate agency (as identified above)
- notifying the principal or a member of the school leadership team of their concerns and the reasons for those concerns.
Protecting children from the risk of sexual abuse-failure to protect offence:

Any staff member in a position of authority, who becomes aware that an adult associated with their organisation (such as an employee, contractor, volunteer or visitor) poses a risk of sexual abuse to a child under the care, authority or supervision of the organisation, must take all reasonable steps to remove or reduce that risk. This may include, for example, removing the adult from child-related work pending investigation. If a staff member in a position of authority fails to take reasonable steps in these circumstances, this may amount to a criminal offence.

The offence applies only to adults in a position of authority within an organisation, including Principals, senior school staff, regional directors and other senior managers.

To read more information about the ‘failure to protect offence’, see: Department of Justice and Regulations – Failure to protect offence. Note: Department policies already require school staff to uphold a high standard of care in relation to child safety and wellbeing.

For more information about managing and responding to the risk of abuse see: Duty of care, Responding to Student Sexual Assault and Risk Management under Department resources below.

Forming a ‘reasonable belief’:

A ‘reasonable belief’ or a ‘belief on reasonable grounds’ is not the same as having proof but is more than mere rumor or speculation.

A ‘reasonable belief’ is formed if a reasonable person in the same position would have formed the belief on the same grounds. For example, a ‘reasonable belief’ might be formed if:

- a child states that they have been physically or sexually abused
- a child states that they know someone who has been physically or sexually abused (sometimes the child may be talking about themselves)
- someone who knows a child states that the child has been physically or sexually abused
- professional observations of the child’s behaviour or development leads a professional to form a belief that the child has been physically or sexually abused or is likely to be abused
- signs of abuse lead to a belief that the child has been physically or sexually abused.

Types of child abuse and indicators of harm:

Child abuse can have a significant effect on a child’s physical or emotional health, development and wellbeing.

Types of child abuse include:

- physical abuse
- sexual abuse
- emotional abuse
- neglect
- medical neglect
- family violence
- human trafficking (including forced marriage)
- sexual exploitation (including pornography and prostitution).

A report should be made to DHHS Child Protection in circumstances where, for example:
• the child is engaging in risk-taking behaviour
• female genital mutilation has occurred, or there is a risk of it occurring
• there is a risk to an unborn child
• a child or young person is exhibiting sexually-abusive behaviours
• there are indications that a child is being groomed. For information see: Department of Justice and Regulation – Grooming offence.

There are many indicators of child abuse and neglect. The presence of a single indicator, or even several indicators, does not prove that abuse or neglect has occurred. However, the repeated occurrence of an indicator, or the occurrence of several indicators together, should alert teachers to the possibility of child abuse and neglect.

Note: For full definitions for all of the types of child abuse and a comprehensive list of the indicators of harm, see: Appendix 2 in Protecting the safety and wellbeing of children and young people under Department resources below.

When to Report:
The following table sets out when to report a concern that a child or a young person has been abused, or is in need of protection.

<table>
<thead>
<tr>
<th>Type of Reporting</th>
<th>By Whom</th>
<th>To Whom</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mandatory Reporting - DHHS Child Protection</td>
<td>Mandatory reporters</td>
<td></td>
</tr>
</tbody>
</table>
| Mandatory reporters must make a report as soon as practicable if, in the course of practising their profession or carrying out their duties, they form a belief on reasonable grounds that a child or young person is in need of protection, as a result of physical injury or sexual abuse, and the child’s parents are unable or unwilling to protect the child. | Teachers registered to teach or who have permission to teach pursuant to the Education and Training Reform Act 2006 (Vic)  
Principals of government and non-government schools  
Registered medical practitioners  
Nurses  
All members of the police force | DHHS Child Protection  
Victoria Police |
| Child in need of protection | Any person |                                |
| Any person may make a report if they believe on reasonable grounds that a child is in need of protection for any of the following reasons: | | |
| • The child has been abandoned and there is no other suitable person who is willing and able to care for the child. | | |
| • The child’s parents are dead or incapacitated and there is no other suitable person who is willing and able to care for the child. | | |
| • The child has suffered or is likely to suffer significant harm as a result of physical injury and the | | |
| • Any person | | |

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Ratified August 2016 Review October 2019
parents are unable or unwilling to protect the child.

- The child has suffered or is likely to suffer significant harm as a result of sexual abuse and their parents are unable or unwilling to protect the child.
- The child has suffered or is likely to suffer emotional or psychological harm and the parents are unable or unwilling to protect the child.
- The child’s physical development or health has been, or is likely to be significantly harmed and the parents are unable or unwilling to provide basic care, or effective medical or other remedial care.

**Child displaying sexually abusive behaviours and in need of therapeutic treatment**

Any person may make a report if they believe on reasonable grounds that a child who is 10 years of age or over, but under 15 years of age, is in need of therapeutic treatment because he or she has exhibited sexually-abusive behaviours.

**Significant concerns about wellbeing of a child**

Any person may make a report if they have significant concerns for the wellbeing of a child.

**Reasonable belief that a sexual offence has been committed by an adult against a child under 16.**

Any adult who forms a reasonable belief that a sexual offence has been committed in Victoria by an adult against a child under 16 must report that information to police. It is a criminal offence not to make a report, except in the following circumstances:

- The victim is 16 years of age or older and does not have an intellectual disability that limits his/her capacity to make an informed decision; and he/she

<table>
<thead>
<tr>
<th></th>
<th>Any person</th>
<th>DHHS Child Protection</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Child displaying sexually abusive behaviours and in need of therapeutic treatment</strong></td>
<td>Any person</td>
<td>DHHS Child Protection</td>
</tr>
</tbody>
</table>
| **Significant concerns about wellbeing of a child** | Any person | DHHS Child Protection  
|  
| **Reasonable belief that a sexual offence has been committed by an adult against a child under 16.** | Any person aged 18 or over | Victoria Police |
Reasonable excuses for failing to comply with the requirement include:

- a reasonable belief that the information has already been reported to police or DHHS Child Protection disclosing all of the information
- a reasonable fear that the disclosure will place someone (other than the alleged perpetrator) at risk of harm

Making a report:

This table describes how to make a mandatory report, to report child abuse or child protection concerns.

<table>
<thead>
<tr>
<th>Step</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>In case of emergency or if a child is in immediate danger contact Triple Zero (000) or the local police station. Alternatively, to report concerns about the immediate safety of a child within their family unit to DHHS Child Protection, call the Child Protection Crisis Line on 13 12 78 (24 hours 7 days, toll free)</td>
</tr>
<tr>
<td>2</td>
<td>Keep comprehensive notes that are dated and include the following information:</td>
</tr>
<tr>
<td></td>
<td>- information that has led to concerns about the child's safety (e.g. physical injuries, student behaviour)</td>
</tr>
<tr>
<td></td>
<td>- the source of this information (e.g. observation of behaviour, report from child or another person)</td>
</tr>
<tr>
<td></td>
<td>- the actions taken as a result of the concerns (e.g. consultation with principal, report to DHHS Child Protection etc.).</td>
</tr>
<tr>
<td>3</td>
<td>Discuss any concerns about the safety and wellbeing of students with the principal or a member of the school leadership team. The individual staff member should then make their own assessment about whether they should make a report about the child or young person and to whom the report should be made.</td>
</tr>
<tr>
<td>4</td>
<td>Gather the relevant information necessary to make the report. This should include the following information:</td>
</tr>
</tbody>
</table>
• full name, date of birth, and residential address of the child or young person
• the details of the concerns and the reasons for those concerns
• the individual staff member’s involvement with the child and young person
• details of any other agencies who may be involved with the child or young person, if known.

Make a report to the relevant agency

To report concerns that are life threatening phone 000 or the local police station. To find the nearest Victoria Police Sexual Offences and Child Abuse Investigation Team contact your local police station or click here)

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To report concerns about the immediate safety of a child within their family unit to DHS Child Protection, call the Child Protection Crisis Line on 13 12 78 (24 hrs 7 days, toll free)

To report concerns to DHHS Child Protection, contact your local child protection office.

Make a written record of the report which includes the following information:

6

• the date and time of the report and a summary of what was reported
• the name and position of the person who made the report and the person who received the report.

Notify relevant school staff and/or Department staff of a report to DHHS Child Protection or Child FIRST. For Victorian government schools, the allegations must be reported to the:

• principal or member of the school leadership team
• Department’s Security Services Unit on (03) 9589 6266
• relevant Regional Office
• Student Critical Incident Advisory Unit on (03) 9637 2934 or (03) 9637 2487.

In the case of international students, the principal must notify the International Education Division on (03) 9637 2990 to ensure that appropriate support is arranged for the student.

In the case of Koorie students, the principal must notify the Regional Office to ensure that the regional Koorie support officer can arrange appropriate support for the student.

Potential consequences of making a report:

This table describes the potential consequences of making a report.

<table>
<thead>
<tr>
<th>Potential consequence</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Confidentiality</td>
<td>The identity of a reporter must remain confidential unless:</td>
</tr>
<tr>
<td></td>
<td>• the reporter chooses to inform the child, young person or parent of the report.</td>
</tr>
<tr>
<td></td>
<td>• the reporter consents in writing to their identity being disclosed.</td>
</tr>
<tr>
<td></td>
<td>• a Court or Tribunal decides that it necessary for the identity of the reporter to be disclosed to ensure the safety and wellbeing of the child.</td>
</tr>
<tr>
<td></td>
<td>• a Court or Tribunal decides that, in the interests of justice, the reporter is required to provide evidence.</td>
</tr>
</tbody>
</table>
| Professional Protection | If a report is made in good faith:  
| | • it does not constitute unprofessional conduct or a breach of professional ethics on the part of the reporter.  
| | • the reporter cannot be held legally liable in respect of the report. |
| Interviews | DHHS Child Protection and/or Victoria Police may conduct interviews of children and young people at the school without the parent’s knowledge or consent.  
| | Interviewing children and young people at school should only occur in exceptional circumstances and if it is in the best interests of the child to proceed in this manner.  
| | DHHS Child Protection and/or Victoria Police will notify the principal or a member of the leadership team of their intention to interview the child or young person on the school premises.  
| | When officers from DHHS Child Protection or Victoria Police come to the school premises, the principal or a member of the leadership team should request to see identification before permitting them to have access to the child or young person.  
| | When a child or young person is being interviewed by DHHS Child Protection and/or Victoria Police, school staff must arrange to have a supportive adult present with the child or young person.  
| | For more information on these requests and school responsibilities, see: Police and DHHS Interviews |
| Support for the child or young person | The roles and responsibilities of staff members in supporting children who are involved with DHHS Child Protection may include the following:  
| | • acting as a support person for the child or young person  
| | • attending DHHS Child Protection case planning meetings  
| | • observing and monitoring the child’s behaviour  
| | • liaising with professionals. |
| Requests for Information | DHHS Child Protection and/or Child FIRST and/or Victoria Police may request information about the child or family for the purpose of investigating a report and assessing the risk to the child or young person.  
| | In certain circumstances, DHHS Child Protection can also direct school staff and Department staff to provide information or documents about the protection or development of the child. Such directions should be in writing and only be made by authorised persons within DHHS Child Protection. for more information see: Requests for Information About Students |
| Witness Summons | If DHHS Child Protection makes a Protection Application in the Children’s Court of Victoria, any party to the application may issue a Witness Summons to produce documents and/or to give evidence in the proceedings, see: Subpoenas and Witness Summonses |
Counselling assistance for former students:

In certain circumstances, the Department offers Counselling Assistance Payments to former students who report having been sexually abused while attending, or in connection with, a Victorian government school.

Schools that receive a report of sexual abuse from a former student should contact the Department’s Student Critical Incident Advisory Unit on (03) 9637 2934.

Related policies
- Duty of care
- Police and DHS Interviews
- Responding to Student Sexual Assault
- Requests for Information about Students
- Risk Management
- Subpoenas and Witness Summons

Related legislation
- Children, Youth and Families Act 2005
- Crimes Act 1958
- Education and Training Reform Act 2006
- Victorian Institute of Teaching Act 2001

Department resources
- A step-by-step guide to making a report to Child Protection or Child FIRST (PDF - 270Kb)
- Protecting the safety and wellbeing of children and young people
- Protecting Children - Mandatory Reporting and Other Obligations - elearning module log-in

Other resources
- Daniel Morcombe Child Safety Curriculum:
  Government schools, see: FUSE (Edumail password is required before searching Daniel Morcombe Child Safety Curriculum)
  Non-government schools, see: Scootle
- Department of Health and Human Services:
  Child Protection
  Child FIRST
- Victoria Police Sexual Offences and Child Abuse Investigation Teams (SOCT)
- Department of Justice and Regulation:
  Failure to disclose offence
  Failure to protect offence
  Grooming offence
Safe School Policy

**Rationale:**
Harassment, bullying and discrimination in any form is unacceptable, and potentially unlawful. As teachers, students and parents/guardians of this school community we have the responsibility to provide a safe and secure learning environment free from harassment and bullying where all people are treated with respect. This school will promote an environment in which all will have the right to feel safe and secure and the right to learn and teach.

Read in conjunction with College’s Code of Conduct.

**Aim:**
- To provide a supportive environment which encourages positive relationships between staff, students and parents/guardians where bullying and harassment is not acceptable
- To ensure all forms of bullying and harassment are recognised, reported, followed up appropriately and all those involved are given skills, strategies and support to reach a resolution

**Implementation:**
- Publish the policy in appropriate College publications and forums to promote community awareness
- Maintain a structure that enables students to develop a feeling of trust, connectedness and consistency with staff e.g. Home Room Teachers, Classroom Teacher, Student Managers
- Encourage staff, students, parents/guardians to model appropriate language and behaviour at all times in accordance with a Restorative Practice approach
- Provide professional development for staff to promote a safe school environment
- Staff, are required to reinforce the policy by promoting a positive and caring environment, be sensitive to indicators of bullying and initiate response and support where necessary
- Provide curriculum and programs that promote resilience, life and social skills, assertiveness, conflict resolution and problem solving
- Maintain a designated safe and quiet place for children to access at recess and lunch times
- Develop student leadership programs which promote the philosophy of a safe school
- Conduct regular surveys of College community to monitor student wellbeing
- Review procedures for students so that they feel more confident about going for help
- Public recognition and reward for positive behaviour and resolution of problems
• Promote the reporting of bullying incidents, students, staff, and parents/guardians reporting bullying incidents and ensure all incidents or allegations of bullying are fully investigated
• If bullying persists parents will be contacted and consequences implemented consistent with the Student’s Code of Conduct and Departmental regulations. These consequences will be individually based and may, involve exclusion from class/yard, withdrawal of privileges, school suspension
• In the cases of physical assault of a sexual nature, Department regulations mandate police involvement
• Students involved in unsafe practices will be requested to attend mediation and/or counselling with Student Support Personnel, whom if appropriate, may make referrals to outside agencies.

**Anti- Bullying:**

**Definition:**
A person is bullied when one or more other people expose them regularly and over time to negative or harmful actions. Bullies are people who deliberately set out to intimidate, exclude, threaten and/or hurt others repeatedly. Bullying is a clear form of harassment. Bullying includes also Cyber bullying.

Cyber bullying can take many forms and use a range of technologies. Consider traditional forms of bullying e.g. threats, exclusion, spreading rumours, hurtful gossip and name calling. These all have virtual forms in online spaces.

Identity theft can occur through using an individual’s password and then presenting as the individual online. The perpetrator may then misrepresent this person through online bullying or inappropriate, inaccurate or suggestive messages or images. Cyber bullying allows a bully to assume anonymity. It also allows them to bully without seeing the distress their actions cause.

Technologies such as mobile phones can provide a bully with 24/7 access to their victim. Social networking sites such as MySpace allow bullying to be seen by a global audience. Combinations of technologies such as mobile phones with cameras and image/video share sites can also be used. Embarrassing or violent images or videos of victims may be shared and commented on by others, adding to the humiliation.

**Rationale:**
Kyneton Secondary College will provide a positive culture where bullying is not accepted, and in so doing, all will have the right of respect from others, the right to learn or to teach, and a right to feel safe and secure in their school environment.

**Aims:**
• To eliminate bullying at Kyneton Secondary College
• To reinforce within the school community what bullying is, and the fact that it is unacceptable
• To eliminate Cyber Bullying at Kyneton Secondary College
• Everyone within the school community to be alert to signs and evidence of bullying and to have a responsibility to report it to staff whether as observer or victim
• To ensure that all reported incidents of bullying are followed up appropriately and that support is given to both victims and perpetrators
• To seek parental and peer-group support and co-operation at all times
Implementation:

- Parents, teachers, students and the community will be aware of the school’s position on bullying
- The school will adopt a four-phase approach to bullying

**A. Primary Prevention:**

- Professional development for staff relating to bullying, harassment and proven counter measures
- Community awareness and input relating to bullying, its characteristics and the school’s programs and response
- To provide programs that promote resilience, life and social skills, assertiveness, conflict resolution and problem solving
- A bullying survey and yard survey will be administered and acted upon annually
- Each classroom teacher to clarify at the start of each year the school policy on bullying including Cyber Bullying
- The curriculum to include anti-bulling messages and strategies eg: ‘The Friendly Schools’ and ‘No Blame Approach to Bullying’ programs
- Student Representative Council, peer support delegates, staff and students to promote the philosophy of ‘No Put Downs’
- Electives and structured activities available to students at recess and lunch breaks

**B. Early Intervention:**

- Promote children and staff reporting bullying incidents involving themselves or others
- Classroom teachers and principal on a regular basis reminding students and staff to report incidents of bullying
- Parents encouraged to contact school if they become aware of a problem
- Safe Areas – a designated safe and quiet place for children to access at recess and lunch times
- Public recognition and reward for positive behaviour and resolution of problems.
- School Council will be informed of all bullying incidents

**C. Intervention:**

- Once identified each bully, victim and witnesses will be spoken with, and all incidents or allegations of bullying will be fully investigated and documented
- Students and staff identified by others as bullies will be informed of allegations
- Both bullies and victims will be offered counselling and support
- If student bullying occurs parents will be contacted and consequences implemented consistent with the school’s Student Code of Conduct
- If staff bullying is reported the principal will investigate which may lead to disciplinary action
D. Post Violation:

- Consequences for students will be individually based and may involve:
  - exclusion from class
  - exclusion from yard
  - school suspension
  - withdrawal of privileges
  - ongoing counselling from appropriate agency for both victim and bully
- Reinforcement of positive behaviours.
- Classroom Meetings.
- Support Structures.
- Ongoing monitoring of identified bullies.
- Rewards for positive behaviour.
- Consequences for staff will be individually based and may involve:
  - counselling
  - a period of monitoring
  - a formal support group
  - disciplinary actions

References:

- www.curriculum.edu.au/mindmatters
- Circular 41/2002 VicHealth Publicity for Partnership Campaign Together We Do Better: Department Participation
- www.bullyingnoway.com.au
Student Code of Conduct

At Kyneton Secondary College we aim to provide a caring, safe and harmonious learning environment where students have the opportunity to reach their full potential. The values of self-discipline, cooperation, tolerance and respect for individual differences will be fostered throughout the school community.

All students have the right to:
- Feel safe and be safe.
- Be treated in a fair and courteous manner.
- Express opinions and ideas.
- Be treated with respect.
- Learn.
- Have the opportunity to achieve their full potential.
- Work and play in a clean and pleasant environment.
- Have access to counselling and welfare services.

To ensure your rights all students have the responsibility to:
- Respect the rights of others to learn.
- Communicate with others in a courteous and respectful manner (without harassment or discrimination).
- Respect the property of others and the property of the College.
- Cooperate with college requirements in relation to uniform, attendance and punctuality.
- Maintain a clean and pleasant environment.
- Take full advantage of the educational opportunities offered by the College.
- To act in accordance with College goals and policies.

Breaches of these rights and responsibilities could include:
- Bullying.
- Disrespectful behaviour.
- Swearing.
- Putting people down.
- Intimidation/Abusive behaviour.
- Disruptive behaviour.
- Sexual harassment.
- Littering.
- Possessing, using or distributing illegal drugs/substances, weapons or alcohol.
- Damage to school property.
- Graffiti
- Theft.
Consequences-
Consequences for infringing the rights of others or not fulfilling responsibilities will vary according to the seriousness of the offence. Expected actions could include:

- Incident sheet/discipline notice to be filled in by the teacher.
- Student reply sheet to be filled in by the student.
- Verbal or written apology.
- Removal from classroom/yard.
- Discussion and/or counselling with Homeroom/Class Teacher/Student Managers/Year Level Coordinators/Student Welfare Coordinator, as appropriate.
- Interview with parents.
- Conduct card and/or Contract.
- Referral to Outside Agencies.
- Inquiry or conference with DSE Representatives.
- Loss of privileges.
- Detention(s).
- Suspensions from class/es.
- Suspension from school.
- Expulsion.
- Report to police.
- Repair and/or reimbursement for damage.

Please note that corporal punishment is not permitted at Kyneton Secondary College.
Kyneton Secondary College Classroom Behaviour Management Plan

First Time:
- Warning
- Rule re-stated

Second Time:
- Rule re-stated
- Planner/diary on desk
- Move students if necessary

Third Time:
- Note in planner/diary (parent informed)
- “Time Away”- sent to another class
- Detention Issued by classroom teacher:
  - recess/lunch
- Student Management Tool (SMT) completed

Fourth Time:
- Removal from class- Senior Class
- Meeting with subject teacher and YLC/subschool leader
- Parent meeting
- Student management tool completed
- Conditions of re-entry into classroom established

Serious Incident:
- Immediate Removal from classroom
- SUSPENSION:
  - Internal
  - External

- Student may also be required to attend student free days
- Student may be required to have a re-enrolment interview with Principal/Assistant Principal/Subschool leader
Statement of Community Rights and Responsibilities:

Every person in the school community has **rights** which bring them **responsibilities**

<table>
<thead>
<tr>
<th>We all have the right to:</th>
<th>We all have the responsibility to:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Be safe</td>
<td>• Do all we can to ensure that no one is hurt physically or emotionally</td>
</tr>
<tr>
<td>• Experience a broad range of curriculum which is appropriate to individual and collective needs</td>
<td>• To be thoughtful in our actions and to avoid hurt or injury to others</td>
</tr>
<tr>
<td>• Be treated with dignity, respect and courtesy</td>
<td>• Take full advantage of learning opportunities and allow others to do the same</td>
</tr>
<tr>
<td>• Have all property respected</td>
<td>• Treat one another with dignity, respect and courtesy</td>
</tr>
<tr>
<td>• Be provided with adequate facilities</td>
<td>• Respect personal and school property</td>
</tr>
<tr>
<td>• Express opinions in an appropriate manner</td>
<td>• Care for the College environment and facilities</td>
</tr>
<tr>
<td></td>
<td>• Listen with tolerance</td>
</tr>
</tbody>
</table>

**Consequences for Breaking School Rules:**

Listed below are samples of the consequences that will apply when students breach the Code of Conduct. It is indicative of the level or seriousness of offences and the likely school responses to incidents. Individuals and individual circumstances will be taken into account when sanctions are applied. The purpose of this list is to alert you to the possible consequences of inappropriate behaviour and to provide students, staff and the school community with guidelines to ensure the rights and needs of all people in the community are respected, monitored and effectively addressed. Note that not every listed consequence will be applied in every case. The three levels contained in this document reflect the increasing seriousness of problems [e.g. Level Three offences are regarded as extreme and will be dealt with accordingly]. Your cooperation as a member of our school’s community is assumed. Note that all school rules and consequences apply while students are at the school, engaged in school activities and on the way to and from school, or between campuses. False reporting of offences will be treated severely - as such actions completely undermine the school’s Code of Conduct processes.

**Camps and Excursion:**

Students who have breached the Code of Conduct may be excluded from excursions and camps. This will particularly apply to students who incur any form of suspension.

**Examinations:**

Examinations are held each semester for students in Years 9 to 11. It is expected that all students respect the rights of others to concentrate on the examination to enable each to perform to their best

1. The Student will be given one formal warning by the supervising teacher.
2. A second incident will result in removal from the room and instruction to report to the Assistant Principal or Sub School Leader.
3. Consequences will include advice to parents, loss of examination on the student’s record, a record of the incident in the student’s report for that subject [grade recorded as ‘N’ not ‘NA’] and community service detention arrangements.
Consequences of Inappropriate Behaviour:

(In exceptional circumstances steps 1-3 will be omitted and consequence 4 will take place. This would apply to students who are severely disruptive, use obscene language or continue refusing to follow instructions)

1st time: 1. Warning
2. Re-state the rule

2nd time: 1. Re-state rule.
(Ask student to re-state the rule. Inform student that if there is a next time, then they will be sent to time away and that a detention will be issued (Recess / lunchtime)
2. Planner/ diary on desk- Ask for student planner and reiterate that if behaviour does not stop parents will be informed. No planner= YLC follow up!
3. Move students if necessary

3rd time: 1. Ask student to re-state the rule and the consequence.

2. “Time Away”- sent to another class (must be accompanied by another student and also a note, 5- 10 mins only. Used to help calm the situation down if you need time for a breather. Do not send students into corridor. Teachers may want to buddy up with someone or get suggestions from homegroup teachers on who to best send students to. It is for a short time so ensure they are sent to a room that is close by.
3. Issue detention for a designated time (recess or lunch). Individual teacher to supervise the detention (yard duties that teachers are scheduled on can be used). If you have other commitments during recess and lunch, please see coordinator to work out alternate detention supervision or for extra support.
4. Note in Student Planner or parent contact made to inform them of the behaviour that has taken place and detention issued. Students must have this counter signed by guardian (teacher to follow up next class).
5. Student Management tool form completed to inform YLC and Subschool leader of the behaviour and the follow that has taken place.

4th time: 1. Removal from class (senior classes only). Incident / Student Management Tool form completed. Send with a student and a note.
2. Parents contacted by Coordinator or sub-school leader.
3. Conditions of re-entry into classroom established- Restorative chat with student, classroom teacher and sub-school leader. Appropriate consequence is given to student with consultation with classroom teacher.
4. Parent meeting to be held if required
Serious Incident: Suspension – Internal or external.
- Students may also be required to attend school on student-free days.
- Students may be required to have a re-enrolment interview (continuing serious inappropriate behaviour) with the Principal, Assistant Principal and parent.

Consistent wording/ questioning we can use with the students:
- What are you doing?
- What are you meant to be doing?
- What are the rules?
- How are you breaking the rules?
- Do you want to be here or in time away/ senior class?
- How are you going to fix this behaviour?
- How are your actions affecting others?

<table>
<thead>
<tr>
<th>Time Away Card</th>
<th>Student Name: ______________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time Sent Out:</td>
<td>____________________</td>
</tr>
<tr>
<td>Return Time:</td>
<td>____________________</td>
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</table>
**Level One:**
The classroom teacher or the teacher “on the spot” is in charge of the situation and manages any problems with the Home Group teacher being kept informed or involved as appropriate. If contact with the family is needed the Yr Level Coordinator will coordinate this process.

<table>
<thead>
<tr>
<th>Examples of Offences</th>
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</table>
| 1A) Lateness to School                     | 1 & 2 | **All of the following steps must be taken:** Between 8.55 am - 9.08 am  
• Students go to Home Group Rooms.  
After 9.00 am  
• Go to the General Office  
• Collect Late Pass for Class Teacher.  
• If no Pass is provided upon entering class, the classroom teacher gives detention at that time. N.B. Late Pass forwarded to Home Group Teacher. |
| 1B) Lateness to Class without a note       | 1 & 2 | • Remind student of school rule.  
• Class Teacher keeps records and time is made up – as appropriate and note made in Student Study Planner.  
• Persistent lateness to class - detention held by class teacher. |
| 1C) Failure to bring Study Planner to class| 1 & 6 | • Remind student of school rules.  
• Detention and/or parent contact where appropriate. Room 14 |
| 1D) Lack of equipment and books for classes.| 1 & 2 | • Remind student of school rule.  
• Teacher warning for first incident and a note in the Student Study Planner.  
• Parent contact coordinated by Home Group Teacher for repeated incidents, and detention given where appropriate. |
| 1E) Lack of homework.                      | 1 & 2 | • Remind student of school rule.  
Note recorded in Study Planner and work is submitted the next lesson. Detentions may apply.  
• Issue "Notification of Work Not Submitted” form.  
• Subject teachers to inform parents after consultation with Home Group teacher when significant problems arise.  
Arrangement for catching up with work to be negotiated. |
| 1F) General misbehaviour - class, buildings and yard. | 1 & 2 | **At Time of Incident:**  
• Remind student of school rule.  
• Student asked to stop with warning of logical consequences.  
• Follow up with a logical consequence.  
**Follow Up:**  
• Discuss with Home Group teacher for advice.  
• Parent and coordinator contact for repeated offences.  
• Consequences may include:  
  - Conduct book and Work Card  
  - Counselling  
  - Agreements/Contracts, etc.  
  - Detention (class or yard duty)  
  - Restricted Access at recess/lunch. |
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<th>Examples of Offences</th>
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</tr>
</thead>
<tbody>
<tr>
<td>1G) Accessing other people’s Property without permission</td>
<td>3, 5 &amp; 6</td>
<td>• Remind student of school rule. &lt;br&gt;• Note in Study Planner &lt;br&gt;• Class teacher detention where appropriate.</td>
</tr>
<tr>
<td>1H) Being in buildings or other areas designated “out of bounds”.</td>
<td>2 &amp; 4</td>
<td>• Remind student of school rule. &lt;br&gt;• Removal from area &amp; warning. &lt;br&gt;• Community service for repeated offences (refer page 17). &lt;br&gt;• Restricted lunch/recess areas. &lt;br&gt;• Detention Issued- Room 14</td>
</tr>
<tr>
<td>1I) General swearing and offensive language.</td>
<td>2, 3 &amp; 6</td>
<td>• Remind student of school rule. &lt;br&gt;• Apology made. &lt;br&gt;• Class Teacher Detention as appropriate. &lt;br&gt;• Refer to Level 2H(Suspension) if involving staff.</td>
</tr>
<tr>
<td>1J) Eating/drinking in class or buildings.</td>
<td>2, 5 &amp; 6</td>
<td>• Remind student of school rule. &lt;br&gt;• Removal of item/s (confiscation if necessary). &lt;br&gt;• Clean-up of immediate area if necessary. &lt;br&gt;• Yard Duty to improve the environment where warranted</td>
</tr>
<tr>
<td>1K) Use/possession of chewing gum “whiteout”, permanent markers &amp; similar pens.</td>
<td>2, 5 &amp; 6</td>
<td>• Remind student of school rule. &lt;br&gt;• Confiscation/removal of item/s. &lt;br&gt;• Refer to Level 2I if damage is caused. Detention/Yard Duty Issued</td>
</tr>
<tr>
<td>1L) Use of walk/Discmans, iPods, MP3 players, mobile phones (including camera phones), gameboys and similar technologies that interfere with educational progress during school hours. NB Mobile phones must be turned off during school hours.(Silent &amp; Out of sight).</td>
<td>1, 2, &amp; 5</td>
<td>• Remind student of school rule. &lt;br&gt;• Confiscation for the rest of the day (Item to be stored in the front office safe) &lt;br&gt;<strong>OR</strong> &lt;br&gt;• Repeat offences - parent contact and item to be collected by parent. &lt;br&gt;• Phones can be used with permission of teacher</td>
</tr>
<tr>
<td>1M) Littering and spitting.</td>
<td>2, 5 &amp; 6</td>
<td>• Remind student of school rule. &lt;br&gt;• Clean up of immediate area. &lt;br&gt;• Yard Duty as appropriate (refer to page 17)</td>
</tr>
<tr>
<td>1N) Riding bikes &amp; scooters, roller-blading in school grounds or use of other items in a careless or dangerous manner. (Note: Skateboards and laser pens are banned from school).</td>
<td>2 &amp; 4</td>
<td>• Remind student of school rule. &lt;br&gt;• Depending on circumstances a detention may be issued and the item confiscated for the rest of the day. Skateboard confiscated and collected at the end of the day. Parents to be contacted to collect board for repeat offences. &lt;br&gt;• Laser pens will need to be claimed by a parent.</td>
</tr>
<tr>
<td>Examples of Offences</td>
<td>Rules</td>
<td>Consequence</td>
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| 1O)  Wearing incorrect uniform, including appropriate sport/PE uniform.            | 2 & 6 | **Out of Uniform With a Note:**  
- Uniform Pass will be issued before the start of the day by the Duty Officer in Sickbay  
- Parent contact for repeat offenders will apply.  

**Out of Uniform Without a Note:**  
- Remind student of the rule.  
- If no note, a Class Teacher Detention will apply in Rm14  
- Parent contact for repeat offenders will apply, even if notes are provided.  

**Out of Uniform on the occasion of an excursion:**  
- Student will not be permitted to attend the excursion. Alternate program will be organised for the student by the Assistant Principal or Sub School Leader. Parent contact may be required. |
| 1P)  Water fights and possession of water bombing devices.                         | 2, 5 & 6 | • Remind student of school rule.  
• Confiscation of offending material.  
• Clean-up of area.  
• Class teacher yard duty detention. |
**Level Two:**
The class teacher or teacher “on the spot” handles the situation with the involvement of the Home Group teacher, relevant Level Coordinator and the Sub School Leaders as appropriate.

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<thead>
<tr>
<th>Examples of Offences</th>
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</table>
| 2A) Defiant and/or continued refusal to cooperate | 2, 3 & 6 | • A reliable student will be sent with a note to the relevant Year Level Coordinator, Sub-school Leader or Assistant Campus Principal for assistance.  
  • Incident Report completed.  
  • A conference with student, teacher and relevant staff will take place to determine (among other things):  
    - the need for a family conference;  
    - Detention;  
    - In-House Suspension;  
    - Formal Suspension;  
    - Written Agreements;  
    - Voluntary transfer arrangements.  
  • the need for counselling other class members and witnesses will be addressed as soon as possible.  
  • Action taken. |
| 2B) Truancy/Wagging: | 1 & 6 | • Remind student of school rule.  
  • Complete Incident Report immediately and give to Coordinator  
  • On all occasions parent contact is vital and Coordinator Detention will apply.  
  • Counselling and conferences as appropriate.  
  • Monitoring attendance through Attendance Card or Book.  
  • Repeat offence: Internal 1 day Suspension |
  (a) Leaving class without permission | | See 2B (a)  
  (b) Not attending individual classes or scheduled duties | 1 & 6 | See 2B (a)  
  (c) Leaving premises without permission | 1 & 6 |  
  (d) Extensive unapproved absences | 1 & 6 |  
  (e) School refusal | 3,4& 6 |  
  • Home Group teachers to notify Coordinator.  
  • Parent contact made by Coordinator or Home Group teacher.  
  • Counselling & referrals.  
  • Planning conferences to deal with the situation.  
  • Home Group teacher to advise Coordinator.  
  • Student Welfare Coordinator  
  • Parent contact, counselling and referral by Sub School Leaders  
  • Restricted areas at lunch/recess  
  • NB: VCE students are subject Victorian Curriculum & Assessment Authority requirements.  
  • NB: 1.VCE students are subject to KSC VCE attendance requirements.  
  • 2.Student Youth Allowance contacted where appropriate by SWC. |
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</table>
| 2C) (a) Acts that diminish the school's reputation | 3 & 6 | • Incident Report to Coordinator.  
• Parent contact as appropriate.  
• Possible bans from excursions or other events/activities outside school.  
• Coordinator Detentions, In-House or Formal Suspension as appropriate. Room 14 |
| (b) Out of bounds | 3 & 6 | • Incident Report to Coordinator.  
• Official EO Warning where appropriate recorded on student file for first incident.  
• Application of the KSC Anti-Bullying Policy.  
• For further incidents, Coordinator will contact parents for a conference and the following will apply:  
  - In-House Suspension or Formal Suspension. 1-2 days, as appropriate;  
  - Agreements and written apology as appropriate;  
  - Counselling and referral as appropriate.  
• Verbal Abuse Students- 1 day In-school Suspension |
| 2D) Harassment / Bullying [Any verbal (including racial, sexual or religious) or physical conduct which is unsolicited, unwelcome, threatening or repeated and regarded as offensive. Any persistent behaviour or act which causes another to feel uncomfortable and distressed. This includes setting up others.] [Physical violence - see Level 3B]. | 3, 4 & 6 | • Incident Report completed and given to Coordinator.  
• Official EO Warning where appropriate recorded on student file for first incident.  
• Application of the KSC Anti-Bullying Policy.  
• For further incidents, Coordinator will contact parents for a conference and the following will apply:  
  - In-House Suspension or Formal Suspension. 1-2 days, as appropriate;  
  - Agreements and written apology as appropriate;  
  - Counselling and referral as appropriate.  
• Verbal Abuse Students- 1 day In-school Suspension |
| 2E) Smoking. | 2 & 4 | • Confiscation of cigarette/s, lighter, matches.  
• Incident Report to Coordinator.  
• All incidents will result in suspension |
| 2F) Possession of cigarettes, lighters/matches. | 2 & 4 | • Confiscation.  
• Incident Report to Coordinator.  
• Parent contact |
| 2G) Minor Theft. | 3, 5 & 6 | • Incident Report to Coordinator.  
• Replacement or recompense of item.  
• In-House Suspension 1-2 days |
| 2H) Swearing at or abuse of staff, or visitors to the school. | 3 & 6 | • Incident Report to Coordinator.  
• In-House Suspension or Formal 2 day Suspension as appropriate.  
• Written apology.  
• Counselling and reconciliation processes as required. |
| 2J) Causing Intruder/s to enter and/or be in the school grounds / facilities. | 2, 4, 5 & 6 | • Incident Report to Coordinator  
• Parent contact.  
• In-House Suspension or Formal 1 Day Suspension as appropriate  
• Possible police contact.  
• Restricted Yard Access |
| 2K) (a) Behaviour endangering student’s own safety, or that of others. (b) Unsafe behaviour on bus/ Going on wrong bus | 2, 4 & 6 | • Incident Report to Coordinator.  
• Parent contact.  
• Coordinator Detention or In-House Suspension or Formal 1-2 Day Suspension as appropriate.  
• Not allowed to travel on bus |
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<tr>
<th>Examples of Offence</th>
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<th>Consequence</th>
</tr>
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</table>
| 2L) Possession and/or distribution of pornographic material | 3 & 6 | • Confiscation of material.  
• Report to parent with option for parent to collect material or destroy within one week.  
• Coordinator Detention.  
• Ban from computer facilities may be applicable. |
| 2M) Production and/or use of offensive material          | 3 & 6 | • Incident Report to Coordinator  
• Coordinator Detention, In-House or Formal 2 Days Suspension as appropriate.  
• Written apology.  
• Counselling as required. |
| 2N) Forgery                                             | 3 & 6 | • Incident Report to Coordinator.  
• Coordinator Detention, In-House 1 - 2 Days Suspension or Formal Suspension .  
• Parent contact. |
| 2O) Plagiarism                                          | 3 & 6 | • Incident Report to Coordinator.  
• Coordinator Detention, In-House Suspension or Formal 2 Days Suspension as appropriate for both the plagiarist and student who provided the material (where applicable).  
• Parent contact.  
• VCE students are subject to KSC, VCE and VCAA rules. |
| 2P) Infringements to the Student Drivers’ Policy        | 1 & 3 | • Warning to student and Assistant Campus Principal informed  
• Parents / Guardians Informed  
• Repeat Offences – Coordinator Detention or Formal Suspension as appropriate |
**Level Three:**
*The Sub School Leader will be involved and the Assistant Principal as appropriate, where a serious incident posing danger or threat occurs.*

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<thead>
<tr>
<th>Examples of Offences</th>
<th>Rules</th>
<th>Consequences</th>
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</table>
| 3A) Distribution, acquisition and/or use of controlled or illegal substances [including alcohol] | 3,4 & 6 | • Confiscation.  
• Removal of student from situation and medical care as appropriate.  
• Immediate referral to Principal.  
• Parents immediately informed.  
• Police informed as appropriate.  
• Parent Conference.  
• Formal Suspension. 2-5 Days  
• Written agreement.  
• KSC counselling and referrals.  
The offence may lead to the expulsion process. |
| 3B) Violent behaviour [including inciting fighting, assaults and other reckless aggressive behaviour] | 3,4 & 6 | • Removal of student/s from other students.  
• Incident Report to Coordinators/Assistant Campus Principal /SSL  
• Parents informed immediately.  
• Police informed as appropriate.  
• Parent Conference.  
• Suspension.-2 Days External Inciting 1 Day External  
• Written Agreement.  
• Written Apology - as appropriate.  
• KSC counselling and referral. |
| 3C) Other illegal activities [including carrying knives, weapons, dangerous goods, etc]. | 3,4 & 6 | • Confiscation.  
• Incident Report to Coordinators/Assistant Campus Principal /SSL  
• Parents informed immediately.  
• Police informed as required by law.  
• Conference.  
• Immediate withdrawal from classes.  
• Suspension.-5 Days  
• KSC counselling and referral.  
The offence may lead to the expulsion process. |
| 3D) Vandalism [Destruction of property through reckless behaviour or deliberate action] | 3,5 & 6 | • Incident Report to Coordinator.  
• Parent contact.  
• Repair or recompense for damage negotiated as appropriate.  
• Extensive community service arrangements.  
• Formal Suspension.- 2 Days |
| 3E) Major Theft | 3,5 & 6 | • Incident Report to Coordinators/Assistant Principal  
• Parents Informed Immediately  
• Police informed as required by law  
• Replacement of item/s  
• Suspension (3-5 days)  
• Written agreements |
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</table>
| 3F) Computer Offences | All students are required to follow the guidelines of the Computer & Internet Acceptable User Policy (Published in Student Planner) | 2,3,5 & 6 | **First Offence**  
• Incident Report to the Assistant Campus Principal/Coordinator.  
• Withdrawal of access to computers/internet for an appropriate time (up to 100 school days) as determined by the policy.  
• Parents informed.  
• Recompense as appropriate  
• Community Service  
• Contract as appropriate.  
**Second Offence**  
• As for first offence.  
• Banning of use of computers facilities as determined by the Policy. Review to occur before access is reinstated.  
• Contract as appropriate |
| 3G) Offences relevant to 4.2.4 & 4.4.2 of the Department of Education & Training’s Student Discipline Procedures. | 2,3,4,5,6 | As per “Department of Education & Training Guidelines for Developing the Student Code of Conduct”. |
| 3H) Offences relevant to the Racial and Religious Tolerance Act, 2001. Acts that engage in conduct that incites hatred against, or serious contempt for, a person’s racial or religious background, including:  
• serious contempt for and severe ridicule of people’s racial or religious and practices  
• writing racist graffiti  
• making a racist speech  
• displaying racist posters or stickers  
• engaging in racist or religious vilification  
• making offensive racist comments in a publication (including Internet, email) | 2,3,4,5,6 |  
• Incident Report to Level Coordinator/Assistant Campus Principal/Learning Technology Manager (if applicable)  
• Removal of offensive material  
• Parents informed  
• Parent conference – if necessary  
• Written apology  
• Suspension -3 Days External  
• Loss of Computer Privileges (if applicable) |
| 3I) Use of mobile camera phone at school. | 3,4,5 & 6 |  
• Confiscation for the rest of the day (Item to be given to the Assistant Campus Principal – phone to be stored in the General office safe).  
• Parent contact and item to be collected by parent only, not student.  
• Formal Suspension 1 Day internal |
Detentions:
A two-tier detention system is in place with increasing severity between levels. The intention is for students to take the consequences of their behaviour at class teacher level, and for the class teacher to carry through with clear and logical consequences for misdemeanours in class, in buildings or in the yard.

Very few students should be referred to Coordinator’s level. A tally is kept of Coordinator level detentions.

NB:
1. No student can be detained for a detention beyond 15 minutes duration without at least 24 hours’ notice to the parent/guardian.
2. No student can be detained for a detention if the detention slip is not signed by the parent/guardian.

Class Teacher Detentions:
These are held at the discretion of the class teacher with at least 24 hours’ notice to parents.

Class teacher detentions can be held for up to 30 minutes duration.

If the student fails to attend or fails to provide the signed detention slip, the teacher may complete an Incident Report Form and discuss it with the relevant Coordinator. Students who appear without the signed slip must not be detained.

Class Teacher Detentions for lateness to school or Being out of Uniform without a Parent Explanation:

Green Detention Slip-
Class teacher detention slips are to be completed by the receiving teacher with at least 24 hours’ notice for parents AND the detention is to be recorded in the appropriate detention book.

These detentions are held at times arranged within each campus and are supervised by all staff on a rotating roster. If the student fails to attend or fails to provide the signed detention slip, the student will be referred for a Coordinator detention. Students who appear without the signed slip must not be detained.

Instructions for the supervising teacher are in the detention book, which must be taken to the detention room. Both the student and teacher are to sign the detention book to note completion of the detention.

Coordinator Detentions:
Yellow Detention Slip -
1. Level two detentions will occur on all days of the week during which time there is to be no talking. (i.e. sitting silently). These detentions will be supervised by the Coordinators on a rotational basis.
2. Names of students for coordinator’s detention will be placed on the electronic list found on the staff server.
3. If a student does not attend a Coordinator Detention they will be formally suspended.

N.B. It should be noted that students who are suspended or who have repeated coordinator level detentions may be excluded from excursions, camps and/or other special events.
Consequences of Uniform Infringement:

Please see Level 1 –Number 1/O

Community Service:

Why?

This type of sanction is a logical consequence designed to help the student and the school when things “go wrong”. It is used to help students to make up for what damage they have done and better to understand their responsibilities as citizens of the school community. Firstly they repair immediate damage they caused. Then they can work on other school enhancement projects which will give them the opportunity to develop commitment to their environment.

Who?

Students involved in breaking the Code of Conduct Guidelines - especially related to safety, the environment and development of school pride and a sense of community.

How?

Generally students will be asked to do yard duty type activities after school between 3.10 & 3.40 using the guidelines as set out under “DETENTIONS”. For serious offences more specific services will be negotiated with the student, parents and the school.

In-House Suspension:

In-House Suspensions are used as a consequence of serious breaches of the Code of Conduct. Students spend the day at school completing class work in a room separate from other students or in set year 12 classes. The student will spend recess and lunch time at the front of the staff room away from peers. In-House Suspensions are held from 9.00am to 3.26pm.
Child Safe Policy

Rationale:
At Kyneton Secondary College we hold the care, safety and wellbeing of children and young people as a central and fundamental responsibility of our school. Our commitment is drawn from our school vision statement that: we work in partnership to own our learning, engaging with the wider community and preparing students for their futures as responsible, successful adults. We strive for excellence, developing confidence and embracing diversity in a respectful, sustainable environment. Our school has also adopted a Commitment to Child Safety Statement that articulates our zero tolerance of child abuse.

Aims
The purpose of this policy is to demonstrate the strong commitment of Kyneton Secondary College to the care, safety and wellbeing of all students at our school. It provides an outline of the policies, procedures and strategies developed to keep students safe from harm, including all forms of abuse in our school environment, on campus, online and in other locations provided by the school.

This policy takes into account relevant legislative requirements within the state of Victoria, including the specific requirements of the Victorian Child Safe Standards as set out in Ministerial Order No. 870.

This policy applies to school staff, including school employees, volunteers and contractors.

Principles
State schools have a moral and legal responsibility to create nurturing school environments where children and young people are respected, their voices are heard and they are safe and feel safe.

The following principles underpin our commitment to child safety at Kyneton Secondary College:

- All students deserve, as a fundamental right, safety and protection from all forms of abuse and neglect
- Our school works in partnership with families and the community to ensure that they are engaged in decision-making processes, particularly those that have an impact on child safety and protection
- All students have the right to a thorough and systematic education in all aspects of personal safety, in partnership with their parents/guardians/caregivers
- All adults in our school, including teaching and non-teaching staff, volunteers and contractors as well as the broader school community have a responsibility to care for children and young people, to positively promote their wellbeing and to protect them from any kind of harm or abuse
- The policies, guidelines and codes of conduct for the care, wellbeing and protection of students are based on honest, respectful and trusting relationships between adults and children and young people
• Policies and practices demonstrate compliance with legislative requirements and cooperation with
governments, the police and human services agencies
• All persons involved in situations where harm is suspected or disclosed must be treated with
sensitivity, dignity and respect
• Staff, volunteers, contractors, parents/guardians and students should feel free to raise concerns
about child safety, knowing these will be taken seriously by school leadership.
• Appropriate confidentiality will be maintained, with information being provided to those who
have a right or a need to be informed, either legally or pastorally

Definitions used in this Policy

• Child: A child or a young person enrolled as a student at the school
• Child abuse includes:
  o any act committed against a child involving: (i) a sexual offence (ii) an offence under
    section 49B(2) of the Crimes Act 1958 (grooming)
  o the infliction, on a child, of: (i) physical violence (ii) serious emotional or psychological
    harm (c) serious neglect of a child. (Ministerial Order No. 870)
• Child safety encompasses matters related to protecting all children from child abuse, managing
the risk of child abuse, providing support to a child at risk of child abuse, and responding to
incidents or allegations of child abuse (Ministerial Order No. 870)
• Child neglect: The failure by a parent or caregiver to provide a child (where they are in a position
to do so) with the conditions that are culturally accepted as being essential for their physical and
emotional development and wellbeing (Safe Schools Hub)
• Child physical abuse: Generally, child physical abuse refers to the non-accidental use of physical
force against a child that results in harm to the child. Physically abusive behaviours include
shoving, hitting, slapping, shaking, throwing, punching, kicking, biting, burning, strangling and
poisoning. The fabrication or induction of an illness by a parent or carer (previously known as
Munchausen syndrome by proxy) is also considered physically abusive behaviour (Safe Schools
Hub)
• Child protection: Statutory services designed to protect children who are at risk of serious harm
(Safe Schools Hub)
• Child sexual abuse: Any sexual activity between a child under the age of consent (16) and an
adult or older person (i.e. a person five or more years older than the victim) is child sexual abuse.
Child sexual abuse can also be:
  o any sexual behaviour between a child and an adult in a position of power or authority over
    them (e.g. a teacher). The age of consent laws do not apply in such instances due to the
    strong imbalance of power that exists between young people and authority figures, as well
    as the breaching of both personal and public trust that occurs when professional
    boundaries are violated
  o any sexual behaviour between a child and an adult family member, regardless of issues of
    consent, equality or coercion
  o sexual activity between peers that is non-consensual or involves the use of power or
    coercion
  o non-consensual sexual activity between minors (e.g. a 14-year-old and an 11-year-old), or
    any sexual behaviour between a child and another child or adolescent who, due to their
    age or stage of development, is in a position of power, trust or responsibility over the
    victim. Sexual activity between adolescents at a similar developmental level is not
    considered abuse. (Safe Schools Hub)
• Child Protection Reporting (Formally known as Mandatory Reporting): The legal requirement to report suspected cases of child abuse and neglect is known as mandatory reporting. Mandated persons include teachers, nurses, police, psychologists, psychiatrists and medical practitioners (Safe Schools Hub) (Refer to Kyneton Secondary College’s Child Protection Reporting Policy.)

• Reasonable Belief: When staff are concerned about the safety and wellbeing of a child or young person, they must assess that concern to determine if a report should be made to the relevant agency. This process of considering all relevant information and observations is known as forming a ‘reasonable belief’. A ‘reasonable belief’ or a ‘belief on reasonable grounds’ is not the same as having proof but is more than mere rumour or speculation. A ‘reasonable belief’ is formed if a reasonable person in the same position would have formed the belief on the same grounds.

• School environment means any physical or virtual place made available or authorised by the school governing authority for use by a child during or outside school hours, including: (a) a campus of the school (b) online school environments (including email and intranet systems) (c) other locations provided by the school for a child’s use (including, without limitation, locations used for school camps, sporting events, excursions, competitions, and other events) (Ministerial Order No. 870)

• School staff means an individual working in a school environment who is: (a) directly engaged or employed by a school governing authority (b) a volunteer or a contracted service provider (whether or not a body corporate or any other person is an intermediary) (Ministerial Order No. 870)

Commitments

All students enrolled at Kyneton Secondary College have the right to feel safe and be safe. The wellbeing of children in our care will always be our first priority and we do not and will not tolerate child abuse.

We aim to create a child-safe and child-friendly environment where children are free to enjoy life to the full without any concern for their safety. There is particular attention paid to the most vulnerable children, including Aboriginal and Torres Strait Islander children, children from culturally and/or linguistically diverse backgrounds, children with a disability and gender and sexually diverse students.

Our commitment to our students

• We commit to the safety and wellbeing of all children and young people enrolled in our school
• We commit to providing children and young people with positive and nurturing experiences
• We commit to listening to children and young people and empowering them by taking their views seriously, and addressing any concerns that they raise with us
• We commit to taking action to ensure that children and young people are protected from abuse or harm
• We commit to teaching children and young people the necessary skills and knowledge to understand and maintain their personal safety and wellbeing
• We commit to seeking input and feedback from students regarding the creation of a safe school environment

Our commitment to parents and guardians

• We commit to communicating honestly and openly with parents and carers about the wellbeing and safety of their children
• We commit to engaging with, and listening to, the views of parents and carers about our child-safety practice, policies and procedures
• We commit to transparency in our decision-making with parents and carers where it will not compromise the safety of children or young people
• We commit to acknowledging the cultural diversity of students and families, and being sensitive to how this may impact on student safety issues
• We commit to continuously reviewing and improving our systems to protect children from abuse

Our commitment to our school staff (school employees, volunteers and contractors.)

• We commit to providing all Kyneton Secondary College staff with the necessary support to enable them to fulfil their roles. This will include regular and appropriate learning opportunities
• We commit to providing regular opportunities to clarify and confirm policy and procedures in relation to child safety and young people’s protection and wellbeing. This will include annual training in the principles and intent of the Child Safety Policy and Child Safety Code of Conduct, and staff responsibilities to report concerns
• We commit to listening to all concerns voiced by Kyneton Secondary College staff, volunteers, and contractors about keeping children and young people safe from harm
• We commit to providing opportunities for Kyneton Secondary College school employees, volunteers and contractors to receive formal debriefing and counselling arising from incidents of the abuse of a child or young person

Everyone employed or volunteering at Kyneton Secondary College has a responsibility to understand the important and specific role he/she plays individually and collectively to ensure that the wellbeing and safety of all students is at the forefront of all they do and every decision they make.

**Responsibilities of School Leadership and School Staff**

The school has allocated roles and responsibilities for child safety as follows:

The principal, the school council and the school leaders at Kyneton Secondary College recognise their particular responsibility to ensure the development of preventative and proactive strategies that promote a culture of openness, awareness of and shared responsibility for child safety.

**Responsibilities of leadership include:**

• creating an environment for children and young people to be safe and to feel safe
• upholding high principles and standards for all staff, volunteers, and contractors
• promoting models of behaviour between adults and children and young people based on mutual respect and consideration
• ensuring thorough and rigorous practices are applied in the recruitment, screening and ongoing professional learning of staff
• ensuring that school personnel have regular and appropriate learning to develop their knowledge of, openness to and ability to address child safety matters
• providing regular opportunities to clarify and confirm legislative obligations, policy and procedures in relation to child and young people’s protection and wellbeing
• ensuring the school meets the specific requirements of the Victorian Child Safe Standards as set out in Ministerial Order No. 870.

**Responsibilities of school staff (school employees, volunteers and contractors) include:**

• treating children and young people with dignity and respect, acting with propriety, providing a duty of care, and protecting children and young people in their care
following the legislative and internal school processes in the course of their work, if they form a reasonable belief that a child or young person has been or is being abused or neglected
• providing a physically and psychologically safe environment where the wellbeing of children and young people is nurtured
• undertaking regular training and education in order to understand their individual responsibilities in relation to child safety and the wellbeing of children and young people
• assisting children and young people to develop positive, responsible and caring attitudes and behaviours which recognise the rights of all people to be safe and free from abuse following the school’s Child Safety Code of Conduct

Expectations of our School Staff – Child Safety Code of Conduct

Within the Kyneton Secondary College community, we expect school employees, volunteers and contractors to proactively ensure the safety of students at all times and to take appropriate action if there are concerns about the safety of any child at the school. All school staff must remain familiar with the relevant laws, the code of conduct, and policies and procedures in relation to child protection and to comply with all requirements. The Kyneton Secondary College Child Safety Code of Conduct recognises the critical role that school staff play in protecting the students in our care and establishes clear expectations of school employees, volunteers and contractors for appropriate behaviour with children in order to safeguard them against abuse and or neglect.

Our Code also protects school staff through clarification of acceptable and unacceptable behaviour.

Student Safety and Participation

At Kyneton Secondary College, we actively encourage all students to openly express their views and feel comfortable about giving voice to the things that are important to them.

We teach students about what they can do if they feel unsafe and enable them to understand, identify, discuss and report on child safety. We listen to and act on any concerns students, or their parents or carers, raise with us.

Kyneton Secondary College has a comprehensive Student Wellbeing program in place, overseen by Subschool Leaders, Year Level Coordinators and Form Teachers at every level. These are in turn supported by the Wellbeing and Equity teams comprised of appropriate and qualified staff. Regular meetings are held to discuss progress and concerns and students have the opportunity to meet with their relevant coordinators if the need arises.

Reporting and Responding

Our school records any child safety complaints, disclosures or breaches of the Child Safety Code of Conduct, and stores the records in accordance with security and privacy requirements. Our school complies with legal obligations that relate to managing the risk of child abuse under the Children, Youth and Families Act 2005 (Vic.), the Crimes Act 1958 (Vic.) and the recommendations of the Betrayal of Trust report.

Child protection reporting obligations fall under separate pieces of legislation with differing reporting requirements.

Our school’s Child Protection Reporting Policy (See policy) updated in June 2016, sets out the actions required under the relevant legislation when there is a reasonable belief that a child at our school is in
need of protection or a criminal offence has been committed, and provides guidance and procedures on how to make a report.

Our policy assists staff, volunteers and families to:

- identify the indicators of a child or young person who may be in need of protection
- understand how a ‘reasonable belief’ is formed
- make a report of a child or young person who may be in need of protection
- comply with mandatory reporting obligations under child protection law and their legal obligations relating to criminal child abuse and grooming under criminal law

Our school has also established internal processes to ensure that appropriate action is taken to respond to concerns about the wellbeing and/or safety of a student.

Our complaints and disclosure processes are outlined and detailed in the following policies and procedures:

- Student Engagement Policy
- Parent Concerns Policy
- Child Protection Reporting Policy

Screening and Recruitment of School Staff

Kyneton Secondary College will apply thorough and rigorous screening processes in the recruitment of employees and volunteers involved in child-connected work. Our commitment to child safety and our screening requirements are included in all advertisements for such employee, contractor and volunteer positions, and all applicants are provided with copies of the school’s Child Safety Code of Conduct and the Child Safety Policy.

When recruiting and selecting employees, contractors and volunteers involved in child-connected work, we make all reasonable efforts to:

- confirm the applicant’s Working with Children Check and National Police Check status and/or professional registration (as relevant)
- obtain proof of personal identity and any professional or other qualifications
- verify the applicant’s history of work involving children
- obtain references that address the applicant’s suitability for the job and working with children

We have processes for monitoring and assessing the continuing suitability of school staff to work with children, including regular reviews of the status of Working with Children Checks and staff professional registration requirements such as Victorian Institute of Teaching (VIT) registration.

Child Safety – Education and Training for School Staff

Kyneton Secondary College provides employees and volunteers with regular and appropriate opportunities to develop their knowledge of, openness to and ability to address child safety matters. This includes induction, ongoing training and professional learning to ensure that everyone understands their professional and legal obligations and responsibilities, and the procedures for reporting suspicion of child abuse and neglect. Our processes include:
• All new staff are provided with a copy of our Child Protection Reporting Policy
• All staff are provided with time to complete the online DET module: http://www.elearn.com.au/det/protectingchildren/
• A training register is kept of staff training
• All staff are provided with the link to the VRQA Child Safe Standards website for ongoing reference. http://www.vrqa.vic.gov.au/childsafety/Pages/default.html
• Time is allocated during Teaching & Learning meetings for professional learning in this area and to ensure that all staff are aware of their legal obligations

Risk Management

At Kyneton Secondary College we are committed to proactively and systematically identifying and assessing risks to student safety across our whole school environment, and reducing or eliminating (where possible) all potential sources of harm. We document, implement, monitor and periodically review our risk management strategies for child safety and ensure that the strategies change as needed and as new risks arise.

Relevant Legislation

• Children, Youth and Families Act 2005 (Vic.)
• Working with Children Act 2005 (Vic.)
• Education and Training Reform Act 2006 (Vic.)
• Equal Opportunity Act 2010 (Vic.)
• Privacy Act 1988 (Commonwealth)
• Crimes Act 1958 (Vic.) – Three new criminal offences have been introduced under this Act:
  o Failure to disclose offence: Any adult who forms a reasonable belief that a sexual offence has been committed by an adult against a child under 16 has an obligation to report that information to police. Failure to disclose the information to police is a criminal offence
  o Failure to protect offence: The offence will apply where there is a substantial risk that a child under the age of 16 under the care, supervision or authority of a relevant organisation will become a victim of a sexual offence committed by an adult associated with that organisation. A person in a position of authority in the organisation will commit the offence if they know of the risk of abuse and have the power or responsibility to reduce or remove the risk, but negligently fail to do so
  o Grooming offence: This offence targets predatory conduct designed to facilitate later sexual activity with a child. Grooming can be conducted in person or online, for example via interaction through social media, web forums and emails

Related Policies

Department of Education Policies include:


School Policies include:

Organisation Policies - VIT & Working with Children Policy, Parent Concerns, Internal Concerns, Privacy, Visitors, Volunteer, Camps and Excursions, Conduct and Safety on School Buses, Student Driving and Surveillance Camera.


Education Policies – Student Leadership, Digital Citizenship, Acceptable eUse, eSmart and Use of Data.

**Breach of Policy**

Where an employee is suspected of breaching any obligation, duty or responsibility within this Policy, Kyneton Secondary College may start the process under Complaints, Misconduct and Unsatisfactory Performance guidelines for managing employment concerns. This may result in disciplinary consequences.

Where the principal is suspected of breaching any obligation, duty or responsibility within this policy, the concerned party is advised to contact the Regional Director. Relevant notification should also be made to the Department of Education and Training.

Where any other member of the school community is suspected of breaching any obligation, duty or responsibility within this policy, the school is to take appropriate action, including in accordance with: Child Protection – Reporting Obligations, Complaints Policy, Working with Children Checks Policy, and/or contact Department of Education (Conduct and Ethics Branch and Legal Branch) and Department of Health and Human Services (DHHS).

**References - Responding to allegations of student sexual assault**

- www.education.vic.gov.au/school/principals/spag/safety/Pages/sexualassault.aspx#1
- Government Schools Website:
  - www.education.vic.gov.au/childhood/providers/regulation/Pages/childsafestandards
- Safe Schools Hub 2014, National Safe Schools Framework Glossary, Australian Government Department of Education and Training
- Victorian Institute of Teaching for Victorian Teaching Profession Codes of Conduct and Ethics and information about employee responsibilities to report action against registered teachers in response to allegations and concerns about registered teachers
- Website: www.vit.edu.au
Child Safety – Code of Conduct

Rationale
In order to ensure that all children are safe in accordance with the school’s Commitment to Child Safety, the following Code of Conduct outlines acceptable and unacceptable behaviours for all staff, volunteers, contractors and school council members at Kyneton Secondary College.

Purpose
This Code of Conduct has a specific focus on safeguarding children and young people at Kyneton Secondary College against sexual, physical, psychological and emotional abuse or neglect. It is intended to complement other professional and/or occupational codes.

All staff, volunteers, contractors and school council members at Kyneton Secondary College are expected to actively contribute to a school culture that respects the dignity of its members and follows the school’s core values. They are required to observe child safe principles and expectations for appropriate behaviour towards and in the company of children, as noted below.

Acceptable behaviours
All staff, volunteers, contractors and school council members are responsible for supporting the safety of children by:

- Adhering to the school’s child safe policy and upholding the school’s statement of commitment to child safety at all times
- Taking all reasonable steps to protect students from abuse
- Treating everyone in the school community with respect
- Listening and responding to the views and concerns of children, particularly if they are telling you that they or another child has been abused or that they are worried about their safety/or the safety of another child.
- Promoting the cultural safety, participation and empowerment of Aboriginal and Torres Strait Islander children
- Empowering children with culturally and/or linguistically diverse backgrounds (for example by having a zero tolerance of discrimination)
- Promoting the safety, participation and empowerment of children with a disability (for example, during personal care activities)
- Promoting the safety, participation and empowerment of gender and sexually diverse students
- Reporting any allegations of child abuse and/or child safety concerns to the school’s leadership
- Understanding and complying with all reporting obligations as they relate to mandatory reporting and reporting under the Crimes Act 1958
- Ensuring as quickly as possible that the child(ren) are safe if an allegation of child abuse is made
- Reporting to the Victorian Institute of Teaching, any charges, committals for trial or convictions in relation to a sexual offence by a registered teacher, or certain allegations or concerns about a registered teacher
Unacceptable behaviours
All staff, volunteers, contractors and school council members must not:

- Ignore or disregard any suspected or disclosed child abuse
- Develop any ‘special’ relationships with children that could be seen as favouritism (for example, the offering of gifts or special treatment of specific children)
- Exhibit or initiate behaviours with children that may be construed as unnecessarily physical contact
- Put children at risk of abuse
- Engage in open discussion of a mature or adult nature in the presence of children (for example, personal, social activities)
- Use inappropriate language in the presence of children
- Discriminate against any child, including because of age, gender, race, culture, vulnerability, sexuality, ethnicity or disability
- Have any online social contact with the child (including by social media, email, instant messaging etc) or their family (unless necessary eg by providing families with e-newsletters or assisting students with their school work)
- Inappropriately exchange personal contact details such as phone number, social networking sites or personal email addresses
- Photograph or video a child without the consent of the parent or guardians
- Work with children whilst under the influence of alcohol or illegal drugs
- Consume alcohol or drugs at school or school events in the presence of children
### Specific Expectations and Requirements of Public Sector Employees, Teachers, Psychologists, Nurses and Speech Pathologists employed within the school

<table>
<thead>
<tr>
<th>CHILD SAFETY CODE OF CONDUCT – KEY AREAS</th>
<th>Public sector (further information provided in section 3a) below the table)</th>
<th>Teachers (further information provided in section 3b) below the table)</th>
<th>Psychologists (further information provided in section 3c) below the table)</th>
<th>Nurses (further information provided in section 3d) below the table)</th>
<th>Speech pathologists (further information provided in section 3e) below the table)</th>
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<tbody>
<tr>
<td>1. Adhering to the school’s child safe policy</td>
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<td>3. Treat everyone in the school community with respect</td>
<td>6.1 Fair and Objective 6.4 Equity and Diversity 7.1 Leading by Example 7.3 Supporting Others</td>
<td>1.2: Treat students with dignity 1.6: Professional relationship with parents 1.7: Collaborative relationships with students and families 1.8: Collegiality</td>
<td>A.1. Justice A.2. Respect B.3. Professional responsibility</td>
<td>4. Respect of people receiving care 8. Trusting relationships 9. Building the community’s trust</td>
<td>1. Values (Respect and Care, Professionalism) 3.4 Duties to our Colleagues</td>
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<td>5. Promote cultural safety, participation and empowerment of Aboriginal and Torres Strait Islander children, children with culturally and/or linguistically diverse backgrounds and children with a disability</td>
<td>6.4 Equity and Diversity 7.1 Leading by Example 8.4 Protecting Human Rights</td>
<td>1.2: Treat students with dignity</td>
<td>A.1. Justice A.2. Respect</td>
<td>4. Respect of people receiving care 8. Trusting relationships</td>
<td>1. Values (Respect and Care) 2. Principles (Fairness) 3.1 Duties to our Clients and to the Community</td>
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<td>9. Inappropriate consumption of alcohol or drugs</td>
<td>3.11 Drugs and Alcohol</td>
<td>1.5: Professional relationship with students at all times 2.1: Personal conduct 3.1: Professionalism and competence</td>
<td>B.1. Competence</td>
<td>1. Practise in a safe and competent manner</td>
<td>1. Values (Professionalism, Quality Standards and Continuing Competence) 2. Principles (Professional integrity) 3.1 Duties to our Clients and to the Community</td>
</tr>
</tbody>
</table>
Section 3a) Code of Conduct for Victorian Public Sector Employees

**INTEGRITY – public officials should demonstrate integrity.**

3.6 Reporting Unethical Behaviour Public sector employees comply with legislation, policies and lawful instructions in the performance of their work. Public sector employees report to an appropriate authority workplace behaviour that violates any law, rule or regulation or represents corrupt conduct, mismanagement of public resources, or is a danger to public health or safety or to the environment. Public sector employers inform their employees of their rights and responsibilities under ‘whistleblower’ and similar legislation.

3.10 Criminal Offences Public sector employees advise their manager if they are charged with a criminal offence, which is punishable by imprisonment or, if found guilty, could reasonably be seen to affect their ability to meet the inherent requirements of the work they are engaged to perform.

3.11 Drugs and Alcohol Public sector employees carry out their work safely and avoid conduct that puts themselves or others at risk. This includes the misuse of alcohol, drugs or other substances when at work or when engaged in work related activities. The misuse of alcohol, prescribed drugs, illegal drugs and other substances is an issue for both employers and employees as it impacts on both work and personal life and in some cases the reputation of their public sector body. Public sector employees who are on medication that could affect their work performance or the safety of themselves or others inform their manager or supervisor to ensure any necessary precautions or adjustments to work can be put in place.

**RESPECT – public officials should demonstrate respect for colleagues, other public officials and members of the Victorian community.**

6.1 Fair and Objective Treatment Public sector employees promote an environment that encourages respect. Public sector employees are fair, objective and courteous in their dealings with the Government, community and other public sector employees.

6.2 Privacy and Confidentiality Public sector employees understand the importance of privacy and confidentiality. Confidential information requires special treatment and protection. Those people who provide confidential information to public sector employees have the right to expect this information will be treated as confidential. Public sector employees with access to confidential information ensure it remains confidential, and at all times act in accordance with legislation and policies relating to dealing with private information.

6.4 Equity and Diversity Public sector employees follow the spirit as well as the letter of the law relating to discrimination, harassment, bullying and victimisation. Public sector employees create an environment that is free of discrimination, harassment and bullying. Valuing and promoting diversity is an important element of demonstrating respect.

**LEADERSHIP – public officials should demonstrate leadership.**

7.1 Leading by Example Public sector employees model the behaviours based on the public sector values and at all times act in an ethical manner. Leadership is about positive influence, inspiring and empowering others. Providing sound advice, delivering high quality services and encouraging best practice demonstrates responsiveness. Being honest, using powers correctly, identifying and dealing with inappropriate conduct, avoiding conflicts of interest and developing and maintaining public trust demonstrates integrity. Making decisions that are free of bias, considering all relevant facts and ensuring policies and programs are implemented fairly demonstrates impartiality. Being transparent, responsible, using resources efficiently and inviting scrutiny demonstrates accountability. Treating others fairly, eliminating discrimination, harassment and bullying, and focusing on improving outcomes demonstrates respect.
7.3 Supporting Others Public sector employees work co-operatively with their colleagues and other public sector body employees. They support and learn from them and accept differences in personal style. They respect, and seek when necessary, the professional opinions of colleagues in their area of competence, and acknowledge their contribution. Public sector employees, managers and supervisors provide other public sector employees with support and guidance.

**HUMAN RIGHTS – public officials should respect and promote the human rights set out in the Charter of Human Rights and Responsibilities.**

8.2 Making Decisions and Providing Advice Consistent with Human Rights Public sector employees ensure their own decisions, advice and policy development properly considers the human rights set out in the Charter, and respects the human rights of others.

8.4 Protecting Human Rights Public sector employees seek to protect the human rights of colleagues, other public officials and members of the Victorian community by raising concerns regarding circumstances that could breach those rights, and reporting any suspected breaches in accordance with procedures established by their public sector employer.
Section 3b) The Victorian Teaching Profession Code of Conduct

**PRINCIPLE 1.2: Teachers treat their students with courtesy and dignity**

Teachers:

a) work to create an environment which promotes mutual respect  
b) model and engage in respectful and impartial language  
c) protect students from intimidation, embarrassment, humiliation or harm  
d) enhance student autonomy and sense of self-worth and encourage students to develop and reflect on their own values  
e) respect a student’s privacy in sensitive matters, such as health or family problems, and only reveal confidential matters when appropriate. That is:  
   • if the student has consented to the information being used in a certain way  
   • to prevent or lessen a serious threat to life, health, safety or welfare of a person (including the student)  
   • as part of an investigation into unlawful activity  
   • if the disclosure is required or mandated by law  
   • to prevent a crime or enforce the law  
f) refrain from discussing students’ personal problems in situations where the information will not be treated confidentially  
g) use consequences commensurate with the offence when disciplining students.

**PRINCIPLE 1.5: Teachers are always in a professional relationship with the students in their school, whether at school or not**

Teachers hold a unique position of influence and trust that should not be violated or compromised. They exercise their responsibilities in ways that recognise that there are limits or boundaries to their relationships with students. The following examples outline some of those limits.

A professional relationship will be violated if a teacher:  

a) has a sexual relationship with a student  
b) uses sexual innuendo or inappropriate language and/or material with students  
c) touches a student without a valid reason  
d) holds conversations of a personal nature or has contact with a student via written or electronic means including email, letters, telephone, text messages or chat lines, without a valid context  
e) accepts gifts, which could be reasonably perceived as being used to influence them, from students or their parents.

A professional relationship may be compromised if a teacher:  

a) attends parties or socialises with students  
b) invites a student or students back to their home, particularly if no-one else is present.

**PRINCIPLE 1.6: Teachers maintain a professional relationship with parents (guardians and caregivers)**

Teachers should be respectful of and courteous to parents. Teachers:

a) consider parents’ perspectives when making decisions which have an impact on the education or wellbeing of a student  
b) communicate and consult with parents in a timely, understandable and sensitive manner  
c) take appropriate action when responding to parental concerns.

**PRINCIPLE 1.7: Teachers work in collaborative relationships with students’ families and communities**

Teachers recognise that their students come from a diverse range of cultural contexts and seek to work collaboratively with students’ families and communities within those contexts.
PRINCIPLE 1.8: Collegiality is an integral part of the work of teachers
Teachers demonstrate collegiality by:
a) treating each other with courtesy and respect
b) valuing the input of their colleagues
c) using appropriate forums for constructive debate on professional matters
d) sharing expertise and knowledge in a variety of collaborative contexts
e) respecting different approaches to teaching
f) providing support for each other, particularly those new to the profession
g) sharing information relating to the wellbeing of students.

PRINCIPLE 2.1: The personal conduct of a teacher will have an impact on the professional standing of that teacher and on the profession as a whole
Although there is no definitive boundary between the personal and professional conduct of a teacher, it is expected that teachers will:
a) be positive role models at school and in the community
b) respect the rule of law and provide a positive example in the performance of civil obligations
c) not exploit their position for personal or financial gain
d) ensure that their personal or financial interests do not interfere with the performance of their duties
e) act with discretion and maintain confidentiality when discussing workplace issues.

PRINCIPLE 3.1: Teachers value their professionalism, and set and maintain high standards of competence
Teachers:
c) complete their duties in a responsible, thorough and timely way.

PRINCIPLE 3.2: Teachers are aware of the legal requirements that pertain to their profession.
In particular, they are cognisant of their legal responsibilities in relation to:
• discrimination, harassment and vilification
• negligence
• mandatory reporting
• privacy
• occupational health and safety
• teacher registration.
Section 3c) The Australian Psychological Society Code of Ethics

GENERAL PRINCIPLE A: RESPECT FOR THE RIGHTS AND DIGNITY OF PEOPLE AND PEOPLES

A.1. Justice
A.1.1. Psychologists avoid discriminating unfairly against people on the basis of age, religion, sexuality, ethnicity, gender, disability, or any other basis proscribed by law.
A.1.2. Psychologists demonstrate an understanding of the consequences for people of unfair discrimination and stereotyping related to their age, religion, sexuality, ethnicity, gender, or disability.
A.1.3. Psychologists assist their clients to address unfair discrimination or prejudice that is directed against the clients.

A.2. Respect
A.2.1. In the course of their conduct, psychologists:
(a) communicate respect for other people through their actions and language;
(b) do not behave in a manner that, having regard to the context, may reasonably be perceived as coercive or demeaning;
(c) respect the legal rights and moral rights of others; and
(d) do not denigrate the character of people by engaging in conduct that demeans them as persons, or defames, or harasses them.
A.2.2. Psychologists act with due regard for the needs, special competencies and obligations of their colleagues in psychology and other professions.
A.2.3. When psychologists have cause to disagree with a colleague in psychology or another profession on professional issues they refrain from making intemperate criticism.
A.2.4. When psychologists in the course of their professional activities are required to review or comment on the qualifications, competencies or work of a colleague in psychology or another profession, they do this in an objective and respectful manner.
A.2.5. Psychologists who review grant or research proposals or material submitted for publication, respect the confidentiality and proprietary rights of those who made the submission.

A.3. Informed consent
A.3.1. Psychologists fully inform clients regarding the psychological services they intend to provide, unless an explicit exception has been agreed upon in advance, or it is not reasonably possible to obtain informed consent.
A.3.2. Psychologists provide information using plain language.
A.3.3. Psychologists ensure consent is informed by:
(a) explaining the nature and purpose of the procedures they intend using;
(b) clarifying the reasonably foreseeable risks, adverse effects, and possible disadvantages of the procedures they intend using;
(c) explaining how information will be collected and recorded;
(d) explaining how, where, and for how long, information will be stored, and who will have access to the stored information;
(e) advising clients that they may participate, may decline to participate, or may withdraw from methods or procedures proposed to them;
(f) explaining to clients what the reasonably foreseeable consequences would be if they decline to participate or withdraw from the proposed procedures;
(g) clarifying the frequency, expected duration, financial and administrative basis of any psychological services that will be provided;
(h) explaining confidentiality and limits to confidentiality (see standard A.5.);
(i) making clear, where necessary, the conditions under which the psychological services may be terminated; and
(j) providing any other relevant information.
A.3.4. Psychologists obtain consent from clients to provide a psychological service unless consent is not required because:
(a) rendering the service without consent is permitted by law; or
(b) a National Health and Medical Research Council (NHMRC) or other appropriate ethics committee has waived the requirement in respect of research.
A.3.5. Psychologists obtain and document informed consent from clients or their legal guardians prior to using psychological procedures that entail physical contact with clients.
A.3.6. Psychologists who work with clients whose capacity to give consent is, or may be, impaired or limited, obtain the consent of people with legal authority to act on behalf of the client, and attempt to obtain the client’s consent as far as practically possible.
A.3.7. Psychologists who work with clients whose consent is not required by law still comply, as far as practically possible, with the processes described in A.3.1., A.3.2., and A.3.3.

A.4. Privacy
Psychologists avoid undue invasion of privacy in the collection of information. This includes, but is not limited to:
(a) collecting only information relevant to the service being provided; and
(b) not requiring supervisees or trainees to disclose their personal information, unless self-disclosure is a normal expectation of a given training procedure and informed consent has been obtained from participants prior to training.

A.5. Confidentiality
A.5.1. Psychologists safeguard the confidentiality of information obtained during their provision of psychological services. Considering their legal and organisational requirements, psychologists:
(a) make provisions for maintaining confidentiality in the collection, recording, accessing, storage, dissemination, and disposal of information; and
(b) take reasonable steps to protect the confidentiality of information after they leave a specific work setting, or cease to provide psychological services.
A.5.2. Psychologists disclose confidential information obtained in the course of their provision of psychological services only under any one or more of the following circumstances:
(a) with the consent of the relevant client or a person with legal authority to act on behalf of the client;
(b) where there is a legal obligation to do so;
(c) if there is an immediate and specified risk of harm to an identifiable person or persons that can be averted only by disclosing information; or
(d) when consulting colleagues, or in the course of supervision or professional training, provided the psychologist: (i) conceals the identity of clients and associated parties involved; or (ii) obtains the client’s consent, and gives prior notice to the recipients of the information that they are required to preserve the client’s privacy, and obtains an undertaking from the recipients of the information that they will preserve the client’s privacy.
A.5.3. Psychologists inform clients at the outset of the professional relationship, and as regularly thereafter as is reasonably necessary, of the:
(a) limits to confidentiality; and
(b) foreseeable uses of the information generated in the course of the relationship.
A.5.4. When a standard of this Code allows psychologists to disclose information obtained in the course of the provision of psychological services, they disclose only that information which is necessary to achieve the purpose of the disclosure, and then only to people required to have that information.
A.5.5. Psychologists use information collected about a client for a purpose other than the primary purpose of collection only:
(a) with the consent of that client;
(b) if the information is de-identified and used in the course of duly approved research; or
(c) when the use is required or authorised by or under law.
GENERAL PRINCIPLE B: PROPRIETY

B.1. Competence
B.1.1. Psychologists bring and maintain appropriate skills and learning to their areas of professional practice.
B.1.2. Psychologists only provide psychological services within the boundaries of their professional competence. This includes, but is not restricted to: (a) working within the limits of their education, training, supervised experience and appropriate professional experience; (b) basing their service on the established knowledge of the discipline and profession of psychology; (c) adhering to the Code and the Guidelines; (d) complying with the law of the jurisdiction in which they provide psychological services; and (e) ensuring that their emotional, mental, and physical state does not impair their ability to provide a competent psychological service.
B.1.3. To maintain appropriate levels of professional competence, psychologists seek professional supervision or consultation as required.
B.1.4. Psychologists continuously monitor their professional functioning. If they become aware of problems that may impair their ability to provide competent psychological services, they take appropriate measures to address the problem by: (a) obtaining professional advice about whether they should limit, suspend or terminate the provision of psychological services; (b) taking action in accordance with the psychologists’ registration legislation of the jurisdiction in which they practise, and the Constitution of the Society; and (c) refraining, if necessary, from undertaking that psychological service.

B.3. Professional responsibility
Psychologists provide psychological services in a responsible manner. Having regard to the nature of the psychological services they are providing, psychologists:
(a) act with the care and skill expected of a competent psychologist;
(b) take responsibility for the reasonably foreseeable consequences of their conduct;
(c) take reasonable steps to prevent harm occurring as a result of their conduct;
(d) provide a psychological service only for the period when those services are necessary to the client;
(e) are personally responsible for the professional decisions they make;
(f) take reasonable steps to ensure that their services and products are used appropriately and responsibly;
(g) are aware of, and take steps to establish and maintain proper professional boundaries with clients and colleagues; and
(h) regularly review the contractual arrangements with clients and, where circumstances change, make relevant modifications as necessary with the informed consent of the client.

GENERAL PRINCIPLE C: INTEGRITY

C.1. Reputable behaviour
C.1.1. Psychologists avoid engaging in disreputable conduct that reflects on their ability to practise as a psychologist.
C.1.2. Psychologists avoid engaging in disreputable conduct that reflects negatively on the profession or discipline of psychology.
C.3. **Conflict of interest**

C.3.1. Psychologists refrain from engaging in multiple relationships that may:
(a) impair their competence, effectiveness, objectivity, or ability to render a psychological service;
(b) harm clients or other parties to a psychological service; or
(c) lead to the exploitation of clients or other parties to a psychological service.

C.3.2. Psychologists who are at risk of violating standard C.3.1., consult with a senior psychologist to attempt to find an appropriate resolution that is in the best interests of the parties to the psychological service.

C.3.3. When entering into a multiple relationship is unavoidable due to over-riding ethical considerations, organisational requirements, or by law, psychologists at the outset of the professional relationship, and thereafter when it is reasonably necessary, adhere to the provisions of standard A.3. (Informed consent).

C.3.4. Psychologists declare to clients any vested interests they have in the psychological services they deliver, including all relevant funding, licensing and royalty interests.

C.4. **Non-exploitation**

C.4.1. Psychologists do not exploit people with whom they have or had a professional relationship.

C.4.2. Psychologists do not exploit their relationships with their assistants, employees, colleagues or supervisees.

C.4.3. Psychologists:
(a) do not engage in sexual activity with a client or anybody who is closely related to one of their clients;
(b) do not engage in sexual activity with a former client, or anybody who is closely related to one of their former clients, within two years after terminating the professional relationship with the former client;
(c) who wish to engage in sexual activity with former clients after a period of two years from the termination of the service, first explore with a senior psychologist the possibility that the former client may be vulnerable and at risk of exploitation, and encourage the former client to seek independent counselling on the matter; and
(d) do not accept as a client a person with whom they have engaged in sexual activity.
Section 3d) Code of Professional Conduct for Nurses in Australia

CONDUCT STATEMENT 1. Nurses practise in a safe and competent manner
1. Nurses are personally accountable for the provision of safe and competent nursing care. It is the responsibility of each nurse to maintain the competence necessary for current practice. Maintenance of competence includes participation in ongoing professional development to maintain and improve knowledge, skills and attitudes relevant to practice in a clinical, management, education or research setting.
2. Nurses are aware that undertaking activities not within their scopes of practice may compromise the safety of persons in their care. These scopes of practice are based on each nurse’s education, knowledge, competency, extent of experience and lawful authority.
3. Nurses, reasonably and in good faith, advise their immediate supervisors or employers of the scopes of their practice including any limitations.
4. When an aspect of care is delegated, nurses ensure the delegation does not compromise the safety or quality of care of people.
5. Nurses practise in a safe and competent manner that is not compromised by personal health limitations, including the use of alcohol or other substances that may alter a nurse’s capacity to practise safely at all times. Nurses whose health threatens their capacity to practise safely and competently have a responsibility to seek assistance to redress their health needs. This may include making a confidential report to an appropriate authority.

CONDUCT STATEMENT 2. Nurses practise in accordance with the standards of the profession and broader health system
1. Nurses are responsible for ensuring the standard of their practice conforms to professional standards developed and agreed by the profession, with the object of enhancing the safety of people in their care as well as their partners, family members and other members of the person’s nominated network. This responsibility also applies to the nurses’ colleagues.
2. Nurses practise in accordance with wider standards relating to safety and quality in health care and accountability for a safe health system, such as those relating to health documentation and information management, incident reporting and participation in adverse event analysis and formal open disclosure procedures.
3. Nurses’ primary responsibility is to provide safe and competent nursing care. Any circumstance that may compromise professional standards, or any observation of questionable, unethical or unlawful practice, should be made known to an appropriate person or authority. If the concern is not resolved and continues to compromise safe and competent care, nurses must intervene to safeguard the individual and, after exhausting internal processes, may notify an appropriate authority external to their employer organisation.
4. Nurses recognise their professional position and do not accept gifts or benefits that could be viewed as a means of securing the nurses’ influence or favour.

CONDUCT STATEMENT 3. Nurses practise and conduct themselves in accordance with laws relevant to the profession and practice of nursing
1. Nurses are familiar with relevant laws and ensure they do not engage in clinical or other practices prohibited by such laws or delegate to others activities prohibited by those laws.
2. Nurses witnessing the unlawful conduct of colleagues and other co-workers, whether in clinical, management, education or research areas of practice, have both a responsibility and an obligation to report such conduct to an appropriate authority and take other appropriate action as necessary to safeguard people and the public interest.
3. Where nurses make a report of unlawful or otherwise unacceptable conduct to their employers, and that report has failed to produce an appropriate response from the employers, nurses are entitled and obliged to take the matter to an appropriate external authority.

4. Nurses respect the possessions and property of persons, people in their care and those of their colleagues, and are stewards of the resources of their employing organisations.

CONDUCT STATEMENT 4. Nurses respect the dignity, culture, ethnicity, values and beliefs of people receiving care and treatment, and of their colleagues

1. In planning and providing effective nursing care, nurses uphold the standards of culturally informed and competent care. This includes according due respect and consideration to the cultural knowledge, values, beliefs, personal wishes and decisions of the persons being cared for as well as their partners, family members and other members of their nominated social network. Nurses acknowledge the changing nature of families and recognise families can be constituted in a variety of ways.

2. Nurses promote and protect the interests of people receiving treatment and care. This includes taking appropriate action to ensure the safety and quality of their care is not compromised because of harmful prejudicial attitudes about race, culture, ethnicity, gender, sexuality, age, religion, spirituality, political, social or health status, lifestyle or other human factors.

3. Nurses refrain from expressing racist, sexist, homophobic, ageist and other prejudicial and discriminatory attitudes and behaviours toward colleagues, co-workers, persons in their care and their partners, family and friends. Nurses take appropriate action when observing any such prejudicial and discriminatory attitudes and behaviours, whether by staff, people receiving treatment and care or visitors, in nursing and related areas of health and aged care.

4. In making professional judgements in relation to a person’s interests and rights, nurses do not contravene the law or breach the human rights of any person, including those deemed stateless such as refugees, asylum seekers and detainees.

CONDUCT STATEMENT 5. Nurses treat personal information obtained in a professional capacity as private and confidential

The treatment of personal information should be considered in conjunction with the Guidelines to the National Privacy Principles 2001, which support the Privacy Act 1988 (Cwth). Many jurisdictions also have legislation and policies relating to privacy and confidentiality of personal health information including health care records

1. Nurses have ethical and legal obligations to protect the privacy of people requiring and receiving care. This encompasses treating as confidential information gained in the course of the relationship between those persons and nurses and restricting the use of the information gathered for professional purposes only.

2. Nurses, where relevant, inform a person that in order to provide competent care, it is necessary to disclose information that may be important to the clinical decision-making by other members of a health care team or a nominated carer.

3. Nurses where practicable, seek consent from the persons requiring or receiving care or their representatives before disclosing information. In the absence of consent, nurses use professional judgement regarding the necessity to disclose particular details, giving due consideration to the interests, wellbeing, health and safety of the person in their care. Nurses recognise that they may be required by law to disclose certain information for professional purposes.

CONDUCT STATEMENT 7. Nurses support the health, wellbeing and informed decision-making of people requiring or receiving care

1. Nurses inform the person requiring nursing care and, where that person wishes, their nominated family members, partners, friends or health interpreter, of the nature and purpose of recommended nursing care, and assist the person to make informed decisions about that care.
2. In situations where a person is unable or unwilling to decide or speak independently, nurses endeavour to ensure their perspective is represented by an appropriate advocate, including when the person is a child.

CONDUCT STATEMENT 8. Nurses promote and preserve the trust and privilege inherent in the relationship between nurses and people receiving care

1. An inherent power imbalance exists within the relationship between people receiving care and nurses that may make the persons in their care vulnerable and open to exploitation. Nurses actively preserve the dignity of people through practised kindness and respect for the vulnerability and powerlessness of people in their care. Significant vulnerability and powerlessness can arise from the experience of illness and the need to engage with the health care system. The power relativities between a person and a nurse can be significant, particularly where the person has limited knowledge; experiences pain and illness; needs assistance with personal care; belongs to a marginalised group; or experiences an unfamiliar loss of self-determination. This vulnerability creates a power differential in the relationship between nurses and persons in their care that must be recognised and managed.

2. Nurses take reasonable measures to establish a sense of trust in people receiving care that their physical, psychological, emotional, social and cultural wellbeing will be protected when receiving care. Nurses recognise that vulnerable people, including children, people with disabilities, people with mental illness and frail older people in the community, must be protected from sexual exploitation and physical harm.

3. Nurses have a responsibility to maintain a professional boundary between themselves and the person being cared for, and between themselves and others, such as the person’s partner and family and other people nominated by the person to be involved in their care.

4. Nurses fulfil roles outside the professional role, including those as family members, friends and community members. Nurses are aware that dual relationships may compromise care outcomes and always conduct professional relationships with the primary intent of benefit for the person receiving care. Nurses take care when giving professional advice to people with whom they have a dual relationship (e.g. a family member or friend) and advise them to seek independent advice due to the existence of actual or potential conflicts of interest.

5. Sexual relationships between nurses and persons with whom they have previously entered into a professional relationship are inappropriate in most circumstances. Such relationships automatically raise questions of integrity in relation to nurses exploiting the vulnerability of persons who are or who have been in their care. Consent is not an acceptable defence in the case of sexual or intimate behaviour within such relationships.

6. Nurses should not be required to provide nursing care to persons with whom they have a pre-existing nonprofessional relationship, reassignment of the persons to other nurses for care should be sought where possible.

7. Nurses take all reasonable steps to ensure the safety and security of the possessions and property of persons requiring and receiving care.

CONDUCT STATEMENT 9. Nurses maintain and build on the community’s trust and confidence in the nursing profession

1. The conduct of nurses maintains and builds public trust and confidence in the profession at all times.

2. The unlawful and unethical actions of nurses in their personal lives risk adversely affecting both their own and the profession’s good reputation and standing in the eyes of the public. If the good standing of either individual nurses or the profession were to diminish, this might jeopardise the inherent trust between the nursing profession and the public necessary for effective therapeutic relationships and the effective delivery of nursing care.

3. Nurses consider the ethical interests of the nursing profession and the community when exercising their right to freedom of speech and participating in public, political and academic debate, including publication.
Section 3e) Speech Pathology Australia Code of Ethics

1. VALUES

We accept these fundamental values which apply to our interaction with clients, colleagues, professionals, ourselves and the community.

**Integrity**
In our professional work, we seek to protect the individuality and privacy of all with whom we interact.
In our professional judgement and decisions, we do not discriminate on the basis of race, religion, gender, sexual preference, marital status, age, disability, beliefs, contribution to society or socioeconomic status.

**Professionalism**
We act in an objective and professional manner to help individuals, groups and communities, particularly with regard to communication and swallowing.
We provide professional services irrespective of our personal interests, aims and opinions.

**Respect and Care**
We respect the rights and dignity of our clients and we respect the context in which they live. We maintain our personal health and wellbeing to effectively fulfil our professional responsibilities.

**Quality Standards and Continuing Competence**
We value knowledge sharing and the contribution that others make to our work and our profession.
We maintain our currency of professional knowledge and practice and acknowledge the limits of these.
We value clear and timely communication with our clients, the community and all with whom we interact.

2. PRINCIPLES

We recognise and adhere to the principles of care, objectivity, accuracy and accountability in all activities.
We accept the following principles as the basis for our decision-making.
We recognise that these principles are of equal value and are interrelated.

**2.1 Beneficence and non-maleficence**
We seek to benefit others through our activities (beneficence).
We also seek to prevent harm, and do not knowingly cause harm (non-maleficence).

**2.2 Truth**
We tell the truth.

**2.3 Fairness (Justice)**
We provide accurate information.
We strive to provide clients with access to services consistent with their need.
We deal fairly with everyone with whom we come in contact.

**2.4 Autonomy**
We respect the rights of our clients to self-determination and autonomy.

**2.5 Professional integrity**
We are respectful and courteous.
We are competent and follow the Association’s Code of Ethics.
We honour our commitments to clients, colleagues and professional organisations.
We comply with federal and state laws.
3. STANDARDS OF PRACTICE

In this Code, we identify the standards of practice which apply principally to:
• our clients and the community;
• our employers and ourselves;
• our profession; and
• our colleagues.

The Code is organised into these sections so that you may choose to go directly to the section most relevant to your current need.
The Standards which apply principally to one group may also apply to the other groups, therefore there is some repetition.

3.1 Duties to our Clients and to the Community

3.1.1 Consent
We ensure informed consent has been obtained from clients for the services we offer.

3.1.2 Accurate and Timely Information
We make sure that our clients and the community receive accurate and current information in a timely manner. This includes information relating to:
• clinical assessment and research results and the implications of these;
• the nature and extent of the services available to clients and the consequences of these services;
• the commitment required by the client;
• their rights; and
• fees for services and other associated costs.

We educate the community about communication, eating and drinking disorders, and the assistance which the speech pathology profession can provide.

We do not guarantee the results of a therapeutic procedure or of prescribed devices or therapies unless this can be reasonably expected based on the best available evidence.

We ensure our promotional and advertising materials are accurate, based on evidence and do not misrepresent the profession.

3.1.3 Professional Competence
We make sure that we always practise the highest standards of professional competence.

We fulfill our undertakings to our clients.

We maintain our capacity and competence to practise.

In particular, we:
• continually update and extend our professional knowledge and skills through activities such as participating in professional development, and/or engaging the support of a mentor or supervisor;
• communicate our professional opinion about client management to other team members in a timely manner;
• ensure that our clients receive appropriate referrals so as to enable them to receive comprehensive diagnosis and treatment;
• recognise our competence and do not practice beyond these limits;
• keep current and accurate documentation;
• comply with the Association’s current position papers and best practise documents.

3.1.4 Confidentiality
We treat as confidential all information we handle in the course of our professional services.

We do not disclose information about our clients, or the confidences they share with us, unless:
• our clients consent to this;
• the law requires us to disclose it; or
• there are compelling moral and ethical reasons for us to disclose it.

3.1.5 Client Relationships
We will ensure that we do not exploit relationships with our clients for emotional, sexual or financial gain.
3.1.6 Service Planning and Provision
At all times we endeavour to ensure our services are accessible and there is equity of access to services for our clients; such equity being determined by objective consideration of need and not compromised by prejudice or favour.
We are innovative and evaluate the services we provide on an ongoing basis to ensure that they are as effective as possible.
We provide services only if our clients can reasonably expect to benefit from them.
We advocate for services where a need is identified.
We will, in consultation with our clients, make sure that their interests are expressed and protected.

3.1.7 Safety and Welfare
We take every precaution to ensure client safety, whether this is in everyday practice, during the conduct of procedures and/or within clinical trials.
We comply with all relevant legislation, standards and procedures so as to avoid injury to our clients, our colleagues and members of the public.
We ensure that the equipment we use (such as speech instrumentation) is calibrated and in proper working order, and our resources (such as assessment tools and communication aids) are current, valid and culturally appropriate.

3.2 Duties to our Employers

3.2.1 Professional Conduct
We work with our employers to provide safe, high quality care.
We meet our responsibilities to our employers by:
• exercising due care and attention to detail;
• providing cost-effective service while preserving quality of care;
• contributing to the development of our employers’ policies and procedures;
• alerting our employers to gaps in service and proactively offering best practice solutions to these;
• observing relevant statutes, legislation and regulation; and
• observing our employers’ Codes of Conduct.
If a conflict arises between our employers’ policies/codes of conduct, legislative requirements and our professional values, codes and standards, we try to negotiate change through appropriate channels.
If this does not resolve the conflict, we may seek the support of the Association in an ethical and confidential manner.

3.3 Duties to our Profession and Ourselves

3.3.1 Professional Standards
We uphold and advance the values, ethics, knowledge and skills of our profession. We understand and reflect the Code in our everyday practice and dealings as a professional.
In particular, we:
• hold appropriate qualifications;
• practise professionally within the scope of our level of education, training and expertise;
• represent our training and competence accurately;
• maintain, consolidate and extend our competence;
• exercise independent professional judgment when we provide professional services; and
• identify and act on concerns we may have about colleagues’ professional competence or conduct.

3.3.3 Professional Reputation
We uphold the reputation of our profession.
We avoid behaviour that would bring the profession into disrepute, such as:
• delivering services which research has shown to be ineffective;
• not fulfilling commitments made implicitly or explicitly;
• disparaging the skills, knowledge or services of our colleagues.
their professional identity, integrity and ethical practice.
3.3.7 Conflict of Interest
We avoid conflicts of interest. In particular, we do not:
• use inaccurate or misleading ways to promote the sale or distribution of products or services;
• accept private financial benefits (including tips, commissions, or other rewards);
• use our employers resources inappropriately for personal needs or benefit; or
• sell products to our clients unless we reasonably believe that they will be of benefit.

3.4 Duties to our Colleagues

3.4.1 Professional Standards
We treat our colleagues with honesty, fairness, respect and good faith.
We work co-operatively with colleagues to meet the needs of clients, the community and the profession by, for example, participating in research, student education and advocacy, and sharing our knowledge and expertise.
We support our colleagues to reflect on their practice and professional conduct. We assist them to access relevant continuing education and support when required.
We do not exploit relationships with our colleagues, students or supervisors.

3.4.2 Our Staff
If we manage, supervise or employ staff we:
• treat them fairly and without discrimination, bullying or harassment;
• inform them fully about their terms and conditions;
• inform them about, and involve them in, decision making processes, especially those which affect their employment;
• respect their industrial and professional rights;
• make sure that they have equitable access to resources;
• make them aware of their rights if a dispute arises and give them access to counselling support and advice;
• give them regular supervision, feedback, and access to continuing education and mentoring;
• recognise and, where appropriate, formally acknowledge their contributions to clinical practice, teaching, research or administration; and
• classify and remunerate them appropriately.

3.4.4 Conflict of Interest
We anticipate, disclose and resolve any potential, perceived or actual conflicts of interest proactively. This may include situations such as:
the selection, supervision and/or assessment of a member of our family or someone with whom we have a close personal, business or professional relationship; or
working in both private practice and within the public system;
referring clients to those working in private practice with whom we have a personal relationship.
Commitment to Child Safety

Kyneton Secondary College is committed to safety and wellbeing of all children and young people. This will be the primary focus of our care and decision-making.

Kyneton Secondary College has zero tolerance for child abuse.

Kyneton Secondary College is committed to providing a child safe environment where children and young people are safe and feel safe, and their voices are heard about decisions that affect their lives. Particular attention will be paid to the cultural safety of Aboriginal children, children from culturally and/or linguistically diverse backgrounds, as well as the safety of children with a disability and gender and sexually diverse students.

Every person involved in Kyneton Secondary College has a responsibility to understand the important and specific role he/she plays individually and collectively to ensure that the wellbeing and safety of all children and young people is at the forefront of all they do and every decision they make.

In its planning, decision-making and operations Kyneton Secondary College will:

1. Take a preventative, proactive and participatory approach to child safety
2. Value and empower children to participate in decisions which affect their lives
3. Foster a culture of openness that supports all persons to safely disclose risks of harm to children
4. Respect diversity in cultures and child rearing practices while keeping child safety paramount
5. Provide written guidance on appropriate conduct and behaviour towards children
6. Engage only the most suitable people to work with children and have high quality staff and volunteer supervision and professional development
7. Ensure children know who to talk with if they are worried or are feeling unsafe, and that they are comfortable and encouraged to raise such issues
8. Report suspected abuse, neglect or mistreatment promptly to the appropriate authorities
9. Share information appropriately and lawfully with other organisations where the safety and wellbeing of children is at risk
10. Value the input of and communicate regularly with families and carers

Kyneton Secondary College provides a safe environment for the education of our students. Our absolute commitment to student safety extends to all of our educational activities, including those internal or external to the school environment and those activities that occur during the school day or outside of school hours.
Restraint of a Student Policy

- School Policy Advisory Guide
- Governance
- Safety Response
- Restraint of Student

**Purpose of this policy**

To ensure schools are informed about the Department's policy about student restraint including that it is only used when certain conditions are met and that appropriate standards and procedures are followed. Detailed guidance is available for school staff in the Guidance for Responding to Violent and Dangerous Student Behaviours of Concern.

**Definitions**

In this policy, physical *restraint* means the use of physical force to prevent, restrict or subdue movement of a student’s body or part of their body. Physical restraint should only be used when it is immediately required to protect the safety of the student or any other person.

In some limited circumstances, it may also be necessary to restrain a student from violent or dangerous behaviours by secluding them in an area where such action is immediately required to protect the safety of the student or any other person.

*Seclusion* is the involuntary confinement of a student alone in a room or area from which the student is physically prevented from leaving. This includes situations where a door is locked as well as where the door is blocked by other objects or held closed by staff. It does not include timeout, which is a behaviour management technique that is part of a Behaviour Support Plan, involves the monitored separation of the student in a non-locked setting, and is implemented for the purpose of calming.

Further detail and guidance for staff is provided in the Guidance for Responding to Violent and Dangerous Student Behaviours of Concern.

**Policy:**

Regulation 15 of the Education and Training Reform Regulations 2007 provides that:

“A member of staff of a Government school may take any reasonable action that is immediately required to restrain a student of the school from acts or behaviour dangerous to the member of staff, the student, or any other person.”
When physical restraint or seclusion may be used

Physical restraint has been associated with injury and increased trauma to the student and the staff member responsible for the physical restraint. School staff may only use physical restraint on a student when it is immediately required to protect the safety of the student or any other person noting that:

- for physical restraint to be immediately required there should be no less restrictive action that could be taken to avert the danger in the circumstances
- staff should use the minimum force needed to protect against the danger of harm
- staff should apply the physical restraint for the minimum duration required and remove it once the danger has passed.

As with physical restraint, seclusion should only be used when it is immediately required to protect the safety of the student or any other person, as permitted by Regulation 15.

The decision about whether to use physical restraint or seclusion rests with the professional judgment of the staff member/s involved, who will need to take into account both their duty of care to their students, their right to protect themselves from harm and obligations under the Charter of Human Rights and Responsibilities Act 2006 (the Charter). In taking into account the Charter, staff should consider the Guidance for Responding to Violent and Dangerous Student Behaviours of Concern.

When physical restraint or seclusion should not be used

Physical restraint and seclusion should not be used unless immediately required to protect the safety of the student or any other person (see above).

Rooms or areas designed specifically for the purpose of seclusion or which are used solely or primarily for the purpose of seclusion are not permitted in Victorian government schools.

Restraint and seclusion must not be included in a Behaviour Support Plan or be used as a routine behaviour management technique, to punish or discipline a student or to respond to:

- a student’s refusal to comply with a direction, unless that refusal to comply creates an imminent risk to the safety of the student or another person
- a student leaving the classroom/school without permission, unless that conduct causes an imminent risk to the safety of the student or another person
- verbal threats of harm from a student, except where there is a reasonable belief that the threat will be immediately enacted
- property destruction caused by the student unless that destruction is placing any person at immediate risk of harm.

Any restraint which covers the student’s mouth or nose, in any way restricts breathing, takes the student to the ground into the prone or supine position, involves the hyperextension of joints, or application of pressure to the neck, chest or joints, must not be used.
**Mechanical restraint**

Mechanical restraints should never be used in schools to restrict a student’s freedom of movement, unless the restraint is for a therapeutic purpose with written evidence of the prescription / recommendation, or if required to travel safely in a vehicle.

**How to Restrain**

If applying physical restraint in the limited circumstances set out above, staff must:

- use the minimum force required to avoid the dangerous behavior or risk of harm
- only restrain the student for the minimum duration required and stop restraining the student once the danger has passed.

Staff should ensure the type of restraint used is consistent with a student’s individual needs and circumstances, including:

- the age/size of the student
- gender of the student
- any impairment of the student e.g. physical, intellectual, neurological, behavioural, sensory (visual or hearing), or communication
- any mental or psychological conditions of the student, including any experience of trauma
- any other medical conditions of the student
- the likely response of the student
- the environment in which the restraint is taking place.

Staff should monitor the student for any indicators or distress. Staff should talk to the student throughout the incident, making it clear to the student why the physical restraint is being applied. Staff should also calmly explain that the physical restraint will stop once it is no longer necessary to protect the student and/or others.

The Department has issued detailed guidance for schools and staff to assist with responding to violent and dangerous student behaviours. This guidance includes information about legal obligations, resources for training, and fact sheets for parents, see Guidance for Responding to Violent and Dangerous Student Behaviours of Concern.

**Actions after restraint has been used**

This table explains the follow up actions that must be undertaken after a student has been physically restrained or secluded.
<table>
<thead>
<tr>
<th>Action</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reporting of the physical restraint/seclusion</td>
<td>The staff member(s) involved in the incident must immediately notify the principal of the incident. A staff member should contact the student’s parents and provide them with details of the incident as soon as possible. The incident may need to be reported to:</td>
</tr>
<tr>
<td></td>
<td>- the Security Services Unit (previously known as the Emergency Management Unit), see: Reporting (emergency and incidents)</td>
</tr>
<tr>
<td></td>
<td>- Edusafe see: Report an Injury, Incident or Hazard</td>
</tr>
<tr>
<td></td>
<td>- WorkSafe, see: WorkSafe Notification.</td>
</tr>
<tr>
<td>Providing supports for those involved</td>
<td>Following the use of restraint on a student, appropriate supports must be offered to following people:</td>
</tr>
<tr>
<td></td>
<td>- The student who has been restrained or secluded and their parents/guardians. This may include participation in decisions involving the student’s behaviour management, Student Support Group meetings, the development of a student Behaviour Support Plan, and involvement of Student Support Services. For policy advice on the prevention of endangering behaviour and promoting positive behaviours see: Student Engagement and Inclusion Guidance. For detailed guidance on Responding to Violent and Dangerous Student Behaviours of Concern</td>
</tr>
<tr>
<td></td>
<td>- Other students and staff members who were involved in or witnessed the incident. This may include a debriefing in relation to the incident, and counselling support.</td>
</tr>
<tr>
<td>Maintain records of the incident</td>
<td>A written record of the incident and the physical restraint or seclusion used must be made by the principal as soon as practicable. This record should be added to a student’s file on CASES 21 or SOCS as appropriate. The record should detail:</td>
</tr>
<tr>
<td></td>
<td>- the name of the student/s and staff member/s involved</td>
</tr>
<tr>
<td></td>
<td>- date, time and location of the incident</td>
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<tr>
<td></td>
<td>- names of witnesses (staff and other students)</td>
</tr>
<tr>
<td></td>
<td>- what exactly happened (a brief factual account)</td>
</tr>
<tr>
<td></td>
<td>- any action taken to de-escalate the situation</td>
</tr>
<tr>
<td></td>
<td>- why physical intervention was used (if applicable)</td>
</tr>
<tr>
<td></td>
<td>- the nature of any physical intervention used</td>
</tr>
<tr>
<td></td>
<td>- how long the physical intervention lasted</td>
</tr>
<tr>
<td>Action</td>
<td>Description</td>
</tr>
<tr>
<td>--------</td>
<td>-------------</td>
</tr>
<tr>
<td></td>
<td>names of witnesses (staff and other students)</td>
</tr>
<tr>
<td></td>
<td>the student’s response and the outcome of the incident</td>
</tr>
<tr>
<td></td>
<td>any injuries or damage to property</td>
</tr>
<tr>
<td></td>
<td>immediate post incident actions, such as first aid or contact with emergency services</td>
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<tr>
<td></td>
<td>details of contact with the student’s parent/carer</td>
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<tr>
<td></td>
<td>details of any post-incident support provided or organised. The principal should also arrange for all staff who were involved/present at the incident to prepare a statement / record of their involvement or observations of the incident.</td>
</tr>
</tbody>
</table>

Plan for the future

Post-incident, the school should consider the preventative and de-escalation strategies that might reduce the likelihood of an incident happening again. For example – reviewing and amending the student’s Behaviour Support Plan, consider the training needs of staff working closely with the student/s involved in the incident.

Related policies

- Accident Recording and Reporting
- Duty of Care
- Personal Liability of School Employees
- Reporting (emergency and incidents)
- Risk Management
- Safety Management
- Student Engagement
- Suspensions
- WorkSafe Notification.

Related legislation and regulations

- Charter of Human Rights and Responsibilities Act 2006 (Vic)
- *Disability Discrimination Act 1992 (Cth)*
- Education and Training Reform Regulations 2007 (Vic)
- Equal Opportunity Act 2010 (Vic)
- Occupational Health and Safety Act 2004 (Vic)

Department resources

- Guidance to Responding to Violent and Dangerous Student Behaviours of Concern
- Student Engagement and Inclusion Guidance
- Health Safety and Worksafe
- Program for Students with Disabilities
Communicating by Text Message-Parent Information Form

Kyneton Secondary College is bringing you the next generation in school-parent communications. Personalised SMS text messages sent direct to and from your mobile phone are the best solution for student safety, attendance management and significant event reminders.

Benefiting Your Child and Their Education

- **You have the right to know that your child is safe.**
  If your child has not arrived at school, you need to know immediately. A personalised text message will be sent by the school to your mobile phone.
- **Your child deserves the best possible chance of success.**
  Your child needs to be at school to maximize their learning. If your child is not at school an SMS text message will immediately inform you that a problem may exist, allowing swift intervention. **Regular attendance** is a key factor in **school success**.
- **You deserve the most responsive delivery system available.**
  Letters are slow and can be intercepted. Phone calls can be intrusive and may not reach parents in time. A text message direct to your mobile phone is fast, effective and discrete.
- **You must have immediate notification in times of crisis.**
  There may be times when the College will need to reach a large number of parents instantly. It could be because the school bus is late returning from an excursion, or it might be something much more serious.
- **You deserve a communication tool which fits your busy lifestyle.**
  Sending a text message to the College is the most cost and time effective option for busy parents.

Working Together For Our Children: What Parents Must Do

Kyneton Secondary College is taking important steps to benefit your child. This is a shared responsibility, and parents must also help the College.

- **Keep your mobile phone details up to date.**
- **Notify the school in advance when your child is absent.**
  An SMS text message can be sent to the College on 0427011777 or leave a message on our dedicated attendance line 5422 6810.
- **Respond to messages from the school.**
  If you receive an absence message from the school, please respond by either a return SMS, leaving a message on our dedicated attendance line 5422 6810 or by phoning the College on 5421 1100. The school needs to know why your child is/was absent.

**If you don't have a mobile phone...** Details of low-cost phone plans ideal for parents who want to benefit from the new system are available from mobile phone providers. The school will maintain its existing contact methods for parents who do not have mobile phones.

Appendix 1: Communicating by Text-Parent Information Form
Name of Student _____________________________________________ Form________

Parent Declaration:
I / We, have read the College Policy (attached) regarding acceptable use of Handheld Technology Devices

I/ We, give permission for _______________________________ (student’s name) to have a Handheld Technology Device at school, for health and safety reason, for use when travelling to and from school only, and I support the College imposed consequences should the Handheld Technology Device belonging to our son / daughter cause a disruption or be used inappropriately.

The number of the Handheld Technology Device is: ________________________________

Name of Parent/Guardian:_____________________________________________

Signature of Parent/Guardian:_____________________________________ Date:___________

Student Declaration:
I, ___________________________________________ (student name) have read and agree to the conditions as outlined in the Handheld Technology Device Policy. I understand that a Handheld Technology Device cannot be used whilst at school, or on an official school function. I accept that, should I violate any of these conditions, my mobile phone will be confiscated without argument.

Student Signature of:______________________________________________ Date____________

Please return this permission form to the General Office.
Enrolment Form – Privacy Information for Parents

This confidential enrolment form asks for personal information about the student, family members and others that provide care for them. The main purpose for collecting this information is so that Kyneton Secondary College can register the student and allocate staff and resources to provide for their educational and support needs.

Health information is asked for so that staff at Kyneton Secondary College can properly care for the student. This includes information about any medical condition or disability the student may have, medication they may rely on while at school, any known allergies and contact details of the student’s doctor. Kyneton Secondary College depends on all relevant health information being provided because withholding some health information may put the student’s health at risk.

Kyneton Secondary College requires information about all parents, guardians or carers so that we can take account of family arrangements. Family Court Orders setting out any access restrictions and parenting plans should be made available to Kyneton Secondary College. Please tell us as soon as possible about any changes to these arrangements. Please do not hesitate to contact the Principal or Assistant Principals if you would like to discuss, in strict confidence, any matters relating to family arrangements.

Emergency Contacts:
These are people that Kyneton Secondary College may need to contact in an emergency. Please ensure that the people named are aware that they have been nominated as emergency contacts and agree to their details being provided Kyneton Secondary College.

Student Background Information:
This includes information about a person’s country of birth, aboriginality, language spoken at home and parent occupation. This information is collected so that Kyneton Secondary College receives appropriate resource allocations for their students. It is also used by the Department to plan for future educational needs in Victoria. Some information is sent to Commonwealth government agencies for monitoring, reporting, planning and resource allocation. All of this information is kept strictly confidential and the Department will not otherwise disclose the information to others without your consent or as required by law.
**Visa Status:**
This information is required to enable Kyneton Secondary College to process the student’s enrolment.

**Updating Your School Records:**
Please let Kyneton Secondary College know if any information needs to be changed by sending updated information to the school office. During the student’s time with Kyneton Secondary College we will also ask via the newsletter for parents to update enrolment information. Please use this opportunity to let us know of any changes.

**Access to the Student Record Held by School:**
In most circumstances the student can access records about them that are held by Kyneton Secondary College. Please contact the Principal to arrange this. Sometimes access to certain information, such as information provided by someone else, may require a Freedom of Information request. We will advise you if this is required and tell you how you can do this.

If you have any concerns about the confidentiality of this information please contact the Principal. The Department can also provide you with more detailed information about privacy policies that govern the collection and use of information requested on this form. Please call the Department's Privacy Manager on (03) 9637 3601 if you would like this information.
Student Code of Conduct – Information for Parents

Rationale:
The Student Code of Conduct is a Policy based upon a statement of Rights and Responsibilities. A clearly stated set of Rules and Consequences protects the rights and clarify the responsibilities of individuals.

These clearly stated College rules apply at school, when travelling to and from school, on school excursions, camps and any school-related activity.

It is an expectation of the College that students will attend school; will actively engage in their own education; will not interfere with rights of other students and staff and will make a genuine effort to complete work that reflects their abilities.

It is the genuine desire of the College that students are academically challenged to reach their full potential, develop a strong sense of connectedness with the College through active participation in the curriculum, programs and activities offered and feel safe in a physical, emotional and social sense.

Recognising that welfare and academic success are interrelated, students will be supported in their academic endeavours by a welfare structure that aims to assist students to manage and resolve issues so that they may realise their educational potential.

Part of this welfare support is this clear statement of student Rights and Responsibilities and a clear set of College Rules and likely Consequences for breaches.

Rights and Responsibilities:

<table>
<thead>
<tr>
<th>Students have the following Rights:</th>
<th>Students have the following Responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>• The right to feel safe at school</td>
<td>• To behave safely and treat staff and other students with respect</td>
</tr>
<tr>
<td>• The right to a high quality education free from interference from others</td>
<td>• To obey school rules</td>
</tr>
<tr>
<td>• The right to be treated with respect and in a fair and equitable manner</td>
<td>• To take care of own, school and other people’s property</td>
</tr>
<tr>
<td>• To be made aware of assessment and promotion requirements</td>
<td>• To attend class prepared to learn and to actively engage in class activities</td>
</tr>
<tr>
<td>• To participate in decisions regarding their course of study and educational pathway</td>
<td>• To demonstrate a positive work ethic, be aware of work expectations &amp; complete work by due dates</td>
</tr>
<tr>
<td>• To be assessed fairly on the basis of work produced</td>
<td>• To respect the right of other students to learn without interference</td>
</tr>
</tbody>
</table>
College Rules and Consequences:

**RULES** protect the **RIGHTS** and clarify the **RESPONSIBILITIES** of individuals.

**College Rules apply at school, when travelling to and from school, on school excursions, camps and any school-related activity.**

<table>
<thead>
<tr>
<th>RULE</th>
<th>BREACH</th>
<th>CONSEQUENCE</th>
</tr>
</thead>
</table>
| I will behave in a manner that is safe and respectful of the rights of all people and their property. | • Disrespectful behaviour  
• Swearing  
• Putting people down  
• Racial/religious vilification  
• Intimidation / Abusive behaviour  
• Disruptive behaviour  
• Sexual harassment  
• Littering  
• Possessing, using or distributing illegal drugs / substances, weapons or alcohol  
• Damage to school property  
• Graffiti  
• Theft | A graduated series of consequences will be used depending upon the severity of the breach. These measures will vary to take account of the age, disabilities and impairments of the students, and the nature and seriousness of breaches of the code of conduct. Consequences are likely to include:  
• Warning  
• Move within class/out of class  
• Referral to YLC/HG teacher  
• Referral to appropriate welfare person/agency  
• Parent/guardian contact  
• Daily Monitoring Sheets  
• Detention (recess or lunch)  
• Yard-duty/clean-up  
• After school detention  
• In-school suspension  
• Suspension  
• Expulsion |}

| I will attend College and classes punctually and be fully prepared for classes. | • Lateness without satisfactory explanation  
• Truancy  
• Being out of bounds  
• Leaving the school grounds without permission  
• Not taking books / equipment to class | It should be noted that the examples of consequences are not finite. |}

| I will wear the school uniform. | Not wearing full school uniform | Breaches Resulting in Suspension: While the circumstances of all incidents are taken into consideration, generally, behaviours that result in suspension include:  
• Failure to comply with a teacher’s instruction  
• Interference with the educational opportunities of other students  
• Behaviour that disrupts the good order of the class/school  
• Engaging in discriminative behaviour  
• Deliberately & consistently fails to take advantage of the educational opportunity provided by the school  
• Fighting/physical assault  
• Abusive language  
• Smoking (1st & subsequent offences)  
• Leaving the school grounds without permission  
• Dangerous/unsafe behaviour  
• Damage to school or personal property  
• Theft Possessing or using illegal substances |

| I will follow instructions from members of staff. | Ignoring / refusing to follow instructions | Breaches of Rules  
It should be noted that the examples of behaviour listed as rule breaches are not finite.  
Any other behaviour considered to be in breach of College Rules will incur an appropriate consequence |}

I, ________________________________ hereby declare that I have read and explained to my child the above Student Code of Conduct and College Rules and Consequences. We confirm that we will work jointly with the College in supporting these.

Parent Signature : ________________________________

Dated: ________________

Student’s Name: _____________________

Student Signature : _____________________
FOR YOUR INFORMATION WE PROVIDE THE FOLLOWING:

Student Management Guidelines:

Successful implementation of the Student Code of Conduct depends upon an agreed understanding of the relationship between welfare and discipline. Effective student management embraces welfare and discipline concurrently.

Welfare is the provision of a caring, supportive and challenging environment in which an individual can feel physically, emotionally and morally safe and secure to pursue their education.

Discipline is a process of conforming to a standard of acceptable and agreed behaviour. The process of discipline involves individuals taking control of, and accepting responsibility for, their own actions. This further means that individuals accept consequences for behaviour that breaches agreed standards.

A graded series of consequences are invoked when a student’s behaviour does not comply with the School Code of Conduct. These measures vary to take account of factors such as the age, disabilities and impairments of the students, and the nature and seriousness of breaches of the code of conduct. The consequences aim to engender in students a sense of responsibility for their own behaviour. Therefore, they must be fair and consistently enforced by teachers both at a classroom and whole school level.

Logical consequences are different from punishment in that they focus upon preventing a recurrence of negative behaviour rather than instilling fear or eroding self-esteem.

The behaviour rather than the person is central to the discipline process, so that any disciplinary action aims to achieve:

- acceptance by the student that his / her behaviour was inappropriate
- a commitment from the student to act in an appropriate manner if faced with a similar situation in the future.

We look forward to working with you to provide your child with every opportunity to experience success and enjoyment throughout their Secondary education.
Kyneton Secondary College First Aid Response
Instruction Sheet

IN THE SCHOOL GROUNDS:

1. Staff member attending to student accesses Epipen.
2. Follow student’s anaphylaxis plan. Administer medication if documented. **If symptoms persist,** staff member **administers Epipen**, noting the time given. (If it is a student who is **not** a known anaphylactic **call an ambulance immediately and stay on the line at all times.** Have another staff member ring parents.

3. **Staff member calls ambulance** by mobile ph or nearest land line. **Dial 000 and stay on the line.**
4. Staff member contacts the office for assistance by the First Aid Officer.
5. Lay person flat, do not stand or walk. If breathing is difficult allow to sit.
6. First Aid staff will bring “Generic” Epipen in case another adrenaline injection is needed (**only by direction of ambulance officers**)
7. Nominated staff member to meet ambulance and direct to the location of the incident.
8. If parents unable to meet the child at hospital, staff member to travel with student to hospital if available.

OUTSIDE THE SCHOOL GROUNDS:

1. Qualified staff member in administering Epipen/ anapen must attend activity/excursion.
2. Epipen is taken personally by the classroom teacher to the activity or excursion, along with a Generic Epipen, from sick bay.
3. A mobile telephone must be taken to any off school campus activity attended by anaphylactic student.
4. In the event of an anaphylactic episode, the staff member follows the individual’s ASCIA Action Plan and administers medication if documented, followed by Epipen if reaction is worsening then rings 000 for an ambulance..
5. If it is a first time reaction and the student is not known as anaphylactic, you must ring 000 first and be guided by an ambulance officer.
6. Staff member contacts the General Office to inform the Principal of the incident.
7. Staff member contacts parents/guardian.

**Ref:**  *Anaphylaxis Guidelines for Victorian Government Schools*