

CHILD PROTECTION PROCEDURES FOR SCHOOLS

Education Division, Malta

September 199

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FOREWORD

Dr Louis Galea B.A., LL.D., MP
Minister of Education

It is time to make a serious advance in the fight against the age-old problem of child abuse. Most of us are now aware that abusing a child leaves serious consequences on that person. The girl or boy grows up with a significant additional burden in life, and much of their life is likely to be stunted, distorted, or disrupted. When all is said and done, the results are a great deal of avoidable human suffering and loss of autonomy and waste of human potential. Research shows that the experience of abuse is likely to seriously affect all aspects of the childhood and adult life of the victim or survivor.

Abuse disrupts the growth and development of children and their capacity to be happy, and their ability to make relationships while they are children and throughout their life. It affects their use of adult power when they get a job or create a family. It affects their ability to love and to make friends. It affects their sexuality. It affects their ideals and their values. It is a phenomenon that perpetuates itself from one generation to the next – because many child victims themselves grow into adult child abusers or defective parents. Early detection and professional handling of child abuse cases reduces the damage and the risk, and promotes healing and self-empowerment.

Professional handling of child abuse involves conducting investigations, and supporting the child - if necessary with medical and psychological therapy and social work with the family. Whether steps are taken such as legal action, disclosure to specific family members, and so on will depend principally on the interests of the child. Yes, it is the mark of a responsible adult that you may be hesitant of the consequences of reporting a case of apparent child abuse, but just think of the consequences of allowing abuse to continue.

In the education profession we are in the business of stimulating, developing, and enriching human potential. So all of us professional educators, and all of us parents, really have no choice but to be resolute enemies of child abuse. Ladies and gentlemen – this is not an issue on which any of us can sit on the fence. It transcends departmental territoriality, of unions, parties and social classes. It is an issue on which most of us can agree, a phenomenon that we can tolerate no longer.

Existing in many countries of the world, this phenomenon – of inflicting pain on our children and taking advantage of their weakness – exists no less in our small nation. For a number of years, one new case per day has been – and is still being – reported to our country’s main child abuse service, the Child Protective Services Unit. And many more go unreported. A Maltese psychologist reports that *most* of his work with adults involves cases of adult survivors of child abuse. Victims are from all social classes and all types of schools. As you see, the problem is a substantial one, and a challenge to our Christian heritage and family values. Early detection is crucial in order to stop the abuse, to provide protection to the victim and siblings, to control the abuser where appropriate, and to give support and therapy.

Most of us are not child abusers, but quite a number of us, as teachers and counsellors and neighbours, do have the choice of collaborating with the abusers but not reporting, by blaming the child, by closing an eye or two, or even suppressing a report by a child. With the publication of this document, there is no longer the option of thinking: I don't know what to do; there are no procedures; I don't know what would happen if I report it; nobody knows what to do; there is nothing to be done anyway.

Hopefully, these problems are now history. Between Units and Departments under the Ministries responsible for education and for social welfare, an exemplary dialogue has clarified and resolved the main issues of doubt and contention. These were such issues as definitions of different kinds of abuse; when to act; what to say and what not to say to the child; existence and clarity of procedures and authorisations; confidentiality; loyalty to an upset, fearful and secretive child; the rights of the child; and expected consequences of disclosure. There were also issues such as medical matters; legal matters; and the delineation and complementarity of official functions and roles such as those of specific Units, teachers, social workers, and school counsellors.

Administratively, the implementation of the Child Protection Procedures for Schools is through the Safe Schools Programme, which will eventually have responsibilities also as regards substance abuse, bullying, child labour, and absenteeism. These problems are often interrelated, and any necessary co-ordination is now easier than before. The administrative tools and the procedures are now in place.

Please, let us work together to try and eradicate this unacceptable feature of our society.

Foreword

Child abuse is one of the most demanding and complex tasks facing human service professionals today. The reality of this phenomenon is so evident that action is necessitated.

In September, 1996, the Education Division decided that a policy on child protection for schools should be formulated. A first draft of the Child Protection Procedures by Ms. Micheline Sciberras, Dip. Y.S., B.Ed. (Hons), M.A. (Durham) proposed clear referral procedures to all teaching and non-teaching employees of all educational establishments.

An Action Team was set up in February, 1999, with the mandate of extending further the consultation process, collating feedback and presenting the final version of the procedures for adoption by all educational establishments. The Action Team was also asked to propose an action plan for implementation. A final draft was drawn up after a consultation process was carried out with various professionals from the education, social welfare, health, legal, trade union and judicial fields.

The Child Protection Procedures presented here are the result of inter-agency multi-disciplinary networking. This document contains four parts. The first part is an introduction to the document and gives an exposition of the principles and obligations assumed by the Education Division. The second part contains essential background information. The third part sets out procedures and guidelines that should be followed by all employees. Whilst the final part gives additional information regarding salient issues. It is intended that this document is revised on a regular basis. Annual evaluation of policy operation and services rendered is suggested. It is vital to provide effective professional services that address the needs of the suffering child.

The Action Team

Mrs. Yvonne Mallia, Dip. App. Soc. Std., B.A. (Hons)

Dr. Antoine Schembri Wismayer, B.Sc (Hons), D. Clin. Psy. (U.K.)

Ms. Micheline Sciberras, Dip. Y.S., B.Ed. (Hons), M.A. (Durham)

September 1999

PART I Introduction

Principles

1. This document takes into consideration, the Convention on the Rights of the Child, the European Convention on Human Rights and the Laws forming part of the Constitution of Malta.
2. The Revised European Social Charter states that:

“With a view to ensuring the effective exercise of the right of children and young persons to grow up in an environment which encourages the full development of their personality and of their physical and mental capacities, the Parties undertake, either directly or in co-operation with public and private organisations, to take all appropriate and necessary measures designed:

 - i.
 - a to ensure that children and young persons, taking account of the rights and duties of their parents, have the care, the assistance, the education and the training they need, in particular by providing for the establishment or maintenance of institutions and services sufficient and adequate for this purpose;
 - b to protect children and young persons against negligence, violence or exploitation;
 - c to provide protection and special aid from the state for children and young persons temporarily or definitively deprived of their family’s support;
 - ii. to provide to children and young persons a free primary and secondary education as well as to encourage regular attendance at schools.”
3. As stipulated by the Education Act (1988) it is clearly the duty of the State to ensure that educational establishments cater:

“for the full development of the whole personality...” (CAP 327, Part 1, Section 4(b))
4. This policy adheres to the Paramountcy principle, which bases all its actions on the supreme interest of the child. The effects of many acts, whether of commission or omission, are always viewed in the best interest of the child.
5. It is imperative that minors, who may not be able to defend themselves against abuse, be safeguarded by the professionals and others working with them. This is in accordance with Article 19 of the UN Convention on the Rights of the Child (1989), which states that:

***“1. States Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child.*”**

- 2. Such protective measures should, as appropriate, include effective procedures for the establishment of social programmes to provide necessary support for the child and for those who have the care of the child, as well as for other forms of prevention and for identification, reporting, referral, investigation, treatment and follow-up of instances of child maltreatment described heretofore and, as appropriate, for judicial involvement.”***
6. Article 3 of the European Convention on Human Rights and Article 36 of the Constitution of Malta also grant every person protection against inhuman or degrading treatment or punishment. It thus follows that any administrative or legislative measures in this field, must also aim at protecting children from abuse, whilst at the same time safeguarding the right of parents/carers to bring up their children without being subject to undue interference by the State and to have their parental capabilities and responsibilities judged fairly.

Obligations

Recognising that Educators and others working in school settings are in a particularly good position to observe and identify cases of child abuse, it is an obligation on their part:

1. to know of the existence, purpose, contents of these “Child Protection Procedures”.
2. to refer suspected or actual child abuse cases to the appropriate services and through the proper channels.

For the purpose of fulfilling these obligations towards abused children the Education Division binds itself to:

1. ensure that each Head of School/Effective Head designates a member of staff for child protection matters. This member of staff will be nominated by the Head of School/Effective Head on an annual basis. The Head of School/Effective Head will ultimately be responsible for all cases of abuse (see procedure 4).
2. give to all school staff adequate initial and on-going training in the identification of cases and in handling of child abuse disclosures.
3. give instructions to all school staff on the application of these procedures.
4. provide prevention programmes regarding child abuse.
5. ensure that an integrated approach is adopted in cases of child abuse by Education Social Workers, Counsellors, School Psychologists and the Medical staff, since they all have an important role to play because of their concern for the welfare and development of children.

The provisions of this policy shall apply “*mutatis mutandis*” to all educational establishments.

- Educators are in a particularly good position to observe outward signs of abuse, changes in behaviour or failure to develop adequately. Thus, intervention and prevention are a central part of their role.
- Every member of staff has a duty to refer child protection concerns using the proper channels.
- Employees should know of the existence, purpose and whereabouts of the “**Child Protection Procedures**” manual. A copy of the procedures will be accessible to all members of staff.
- In the initial stages of its operation, all school staff will be given adequate training in the application of the procedures. Training will be carried out in accordance with established practice.
- There will be regular ongoing training in accordance to normal training practice.
- The onus to provide training will rest with the Child Safety Services (Child Abuse) [see Appendix I].
- The Education Division places great emphasis on the prevention of abuse, as well as providing intervention where abuse has already occurred.
- The Education Division is not an investigation agency, but has an important role in the recognition and referral of suspected or actual child abuse.

Definitions

For all intents and purposes of this document:

- the term “child” shall refer to any person under the age of 18.
- the terms “employee” and “member of staff” are used interchangeably and refer to any person in full or part-time employment with educational establishments. It also refers to any person who works with the said establishments on contract basis.
- the term “Child Protective Services Unit” (C.P.S.U.) refers to the unit, which at the moment of publication of this document was recognised by the Ministry of Social Policy and the Ministry of Education as being the official public entity with authority to investigate and manage Child Protection cases. Any changes to this situation will be amended accordingly.
- investigation of child abuse by the Child Protective Services Unit will include physical, sexual, emotional abuse and neglect. However, cases where absenteeism is the sole issue will be dealt with by the Education Welfare Section of the Education Division. In such cases, the Head of School/Effective Head should notify the school social worker.
- the term “Head of School/Effective Head” refers to the person who is recognised by the Education Division as the Head of School and in their absence the most senior member of staff.
- the term “trusted member of staff” refers to the person to whom the child has disclosed an experience of abuse.
- the term “advisory/support staff” refers to all professionals with the Education Student Services.
- the term “professional” refers to all those employees of the educational establishments or other agencies who, by way of their occupation, academic qualifications, official recognition/warrant and competence offer services to students.
- the term “designated member of staff” refers to a senior member of staff or member of the teaching staff nominated by the Head of School/Effective Head to be in charge of Child Protection Procedures. The Head of School/Effective Head may keep the designation himself/herself since final responsibility for referral remains with the Head of School/Effective Head.

PART II Background Information

1. Legal Obligations

- 1.1 The procedures are intended for the protection of *children*, under the age of 18, who are attending schools. This is in accordance with the laws of Malta and with the UN Convention on the Rights of the Child (1989). The application of the procedures adhere to the Principles enunciated in Part I of this document.
 - 1.1.1 It is vital to remember that at all stages of development, children are vulnerable in different ways and at different times. Child abuse does not solely appertain to a particular age bracket [see Appendix 4].

2. Application

- 2.1 These **Child Protection Procedures** apply to **all** educational establishments.
- 2.2 The duty to follow the **Child Protection Procedures** applies to:
 1. All staff of educational establishments, both teaching and non-teaching.
 2. Advisory/support staff in educational establishments.
 3. All contract workers within educational establishments (as stipulated in contracts of employment).

3. Recognising Abuse

3.1 Child Abuse involves the omission or commission of an act on a minor, which is detrimental to the development of the said minor. A child is considered to be abused if he/she is treated by an adult in a way that is unacceptable in a given culture at a given time. There may be co-existence of various forms of abuse. It is not necessary to establish an intent to cause harm to the child to conclude that the child has been subjected to abuse.

3.2 Abuse may be categorized under four main headings:

3.2.1 Neglect [see Appendix 2 for further details]:

The persistent or severe neglect of a child includes failure to protect a child from exposure to any kind of danger resulting in the significant impairment of the child's health or development. This may include any of the following:

- i. starvation or lack of adequate food;
- ii. extreme failure to carry out important aspects of care including hygiene, provision of shelter, adequate clothing and recreation;
- iii. leaving young children alone and unsupervised at home or outside;
- iv. failure to give the child adequate emotional support;
- v. failure to provide a child with adequate medical attention or educational provision when required.

3.2.2 Physical Abuse [see Appendix 2 for further details]:

Physical abuse includes actual or likely physical injury to a child or failure to prevent physical injury (or suffering) to a child. If a child or young person is physically hurt by an adult this could be abuse. If an adult physically hurts a child even as punishment, then this could be considered as abuse. Failure to provide adequate care of a child to ensure their safety will also fall under this category.

3.2.3 Sexual Abuse [see Appendix 2 for further details]:

Sexual activity between adults and children is always abusive because children by definition are unable to give consent. Sexual abuse is any sexual activity where adults try to use children for their own sexual intentions. This may involve contact sexual abuse, such as: petting, mutual masturbation, forced masturbation, vaginal and anal intercourse, prostitution, etc. It also includes non-contact sexual abuse, such as: pornography, voyeurism, exhibitionism, sexualised comments, etc. Sexual abuse may be perpetrated by both family and non-family members.

3.2.4 Emotional Abuse [see Appendix 2 for further details]:

Actual or likely severe adverse effects on emotional, social, cognitive and behavioural development of a child resulting in persistent or severe ill-treatment or rejection of a child.

3.3 School staff have considerable experience of the behaviour patterns of the whole range of children, and should not be afraid to trust their skills when they feel something is wrong. Although one should not refer cases haphazardly, if one has definite grounds for concern referral should be made immediately, even if there is not full proof of abuse.

4. Designated Personnel

4.1 The Head of School/Effective Head will designate child protection matters to a senior member of staff or to another member of the teaching staff deemed suitable for such a responsibility. This designation will be confirmed every scholastic year. The role of the designated member of staff will be to follow the Child Protection Procedures and inform the Head of School/Effective Head immediately. Henceforth, this professional will be referred to as the designated member of staff.

4.2 Should the designated member of staff be away the Head of School/Effective Head will assume responsibility for child protection procedures. The Head of School will notify the designated member of staff on his/her return.

4.3 The Head of School may choose to be the designated member of staff himself/herself.

5. The Duty to Refer

5.1 The **Child Protection Procedures** need to be followed even if abuse is suspected. It is appreciated that some of the procedures may have their distasteful aspects and that some members of staff may feel the greatest reservations about invoking official machinery. It is essential that there should be a clearly understood pattern which members of staff must follow when their suspicions are aroused in this respect. If we err at all, it should be on the side of vigilance.

5.1.1 Great attention needs to be given before a referral is made. Referrals will affect the child's personal life, and that of the alleged perpetrator. In accordance with Article 38 of the Constitution of Malta and Article 8 of the European Convention on Human Rights each individual has a right to privacy.

5.1.2 *“Everyone has the right to respect for his private and family life, his home and his correspondence”. (Article 8 of the European Convention on Human Rights)*

However, the Article permits interferences with this right as long as these are prescribed by law, and are *‘necessary in a democratic society and which are aimed at ‘the prevention of disorder or crime, the protection of health or morals, or... the protection of rights and freedoms of others.’*”

- 5.2 Neglecting serious cases of abuse means neglecting one’s professional duties. Thus, it is imperative that educators take the appropriate action, when there is a strong probability of abuse. Disciplinary action by the Education Division may be taken against a member of staff who does not pass on information about a known case of child abuse.
- 5.3 If any doubt arises whether a referral should be made or not, Child Safety Services [see Appendix 1] should be contacted for advice. The safety and welfare of the child is of paramount importance, and overrides all other considerations.

PART III Procedures

6. Making A Referral

6.1 School staff and other professionals working within educational establishments are to make a referral that same scholastic day to the school's designated member of staff. The Head of School/Effective Head is also notified immediately by the designated member of staff.

6.1.1 All information is gathered and referral is made immediately, that **same scholastic day**, by telephone to the Child Protective Services Unit. The telephone number is 249995/6.

6.1.2 If the designated member of staff is not available, the trusted member of staff should not delay, but refer concerns to a Head of School/Effective Head. Referral procedures will be followed accordingly.

6.1.3 The referring designated member of staff will note the name of the social worker receiving the referral and the date and time when it was made, as this information might be required as a contribution to any investigation conducted at a later date.

6.2 When a referral is made to the Child Protective Services Unit, one needs to have the following information at hand:

- a) Name of child
- b) Address of child
- c) Telephone Number
- d) Date of birth
- e) Name of School
- f) Address of School
- g) Telephone Number
- h) Father's Name
- i) Address
- j) Mother's Name
- k) Address
- l) Names/relations (e.g. siblings, step-parents/carers, significant others)
- m) Other Agencies involved
- n) Reasons for referral (fact and opinion)
- o) Alleged perpetrator
- p) Relation of victim (if applicable)
- q) Address
- r) Source of information
- s) Any other relevant information

- 6.3 The Head of School/Effective Head or any other member of staff (except the trusted member of staff) should not communicate with the child. No member of staff should contact any of the child's family (unless urgent medical treatment is required, see 10.1) or any other person regarding the issue of alleged child abuse.
- 6.3.1 At this stage, it is imperative that no contact is made with the parents/carers of the child by any professional concerned.
- 6.4 If the abuse has been perpetrated by another child refer both children (i.e.abuser and abused).
- 6.5 Should an allegation of abuse be disclosed on school premises to advisory/support employees or to contract employees, working in an educational establishment, referrals are still to be made by the designated member of staff.
- 6.5.1 Should an allegation of abuse be disclosed to professionals from Student Services of the Education Division, not on school premises but during working hours, a referral to the C.P.S.U. is made by the employee to whom the alleged abuse was disclosed. Once the referral is made the employee will notify the Head of School/Effective Head about the referral. This should be made clear to all clients when setting boundaries in the initial contract.
- 6.5.2 Should the disclosure be made to professionals from Student Services in the Education Division during school holidays, the Head of School/Effective Head will be notified by the person to whom the disclosure was made, in writing following the referral.
- 6.5.3 If the child has already been working with this particular professional such as School Counsellor, School Psychologist, Education Social Worker or Guidance Teacher, then the working relationship will continue throughout the investigation to enable this professional to offer support to the child. No therapeutic intervention should take place during the investigation of the case.
- 6.5.4 Where the employee is also a priest and disclosure occurs within the sacrament of confession, the employee should encourage the child to seek help by disclosing to another trusted professional who can refer the case. When disclosure occurs outside the sacrament of confession, usual referral procedures should be followed.
- 6.5.5 Should an allegation of abuse be disclosed to an employee of the an educational establishment (excluding professionals from Student Services), and such an employee does not work within the school setting (for example, an

Education Officer), then this employee will notify the Head of School/Effective Head.

7. After Making the Referral

7.1 After referring the case to C.P.S.U., the designated member of staff will:

- fill in a referral form [see Appendix 5] and send this to the Child Protective Services Unit, 4th Floor, Gattard House, Triq Nazzjonali, Blata l-Bajda. The envelope will be marked 'Strictly Confidential' and is to be sent within **two** working days of the initial referral call. The name of the social worker who took the referral should also be written on the referral form.
- a copy will be made of the referral form and kept in a confidential file which will only be accessible to the Head of School/Effective Head.

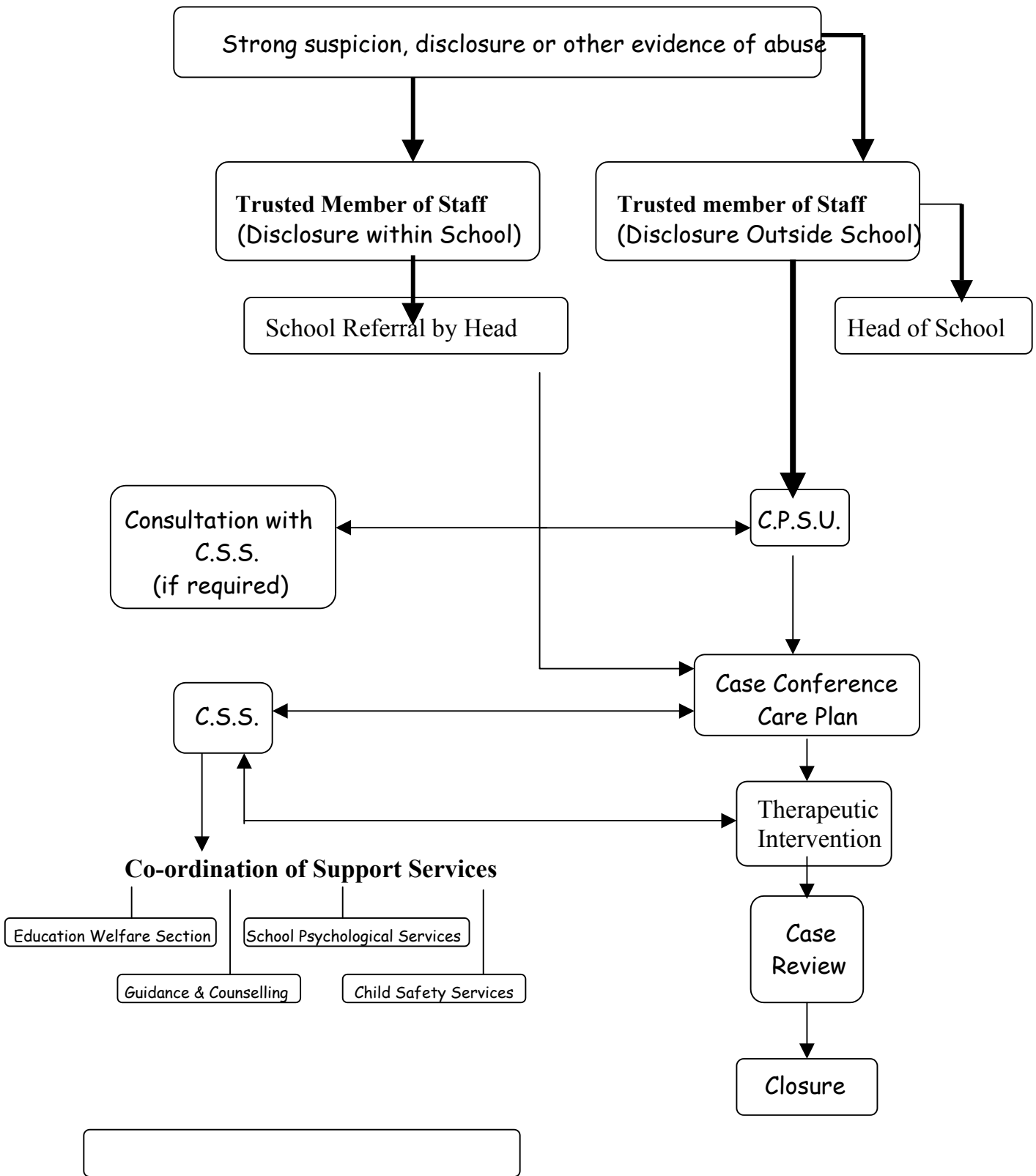
7.2 The Head of School/Effective Head or the designated member of staff should not attempt to contact any other person or agency at this stage, even if he or she is aware of a previous involvement by this person or agency with the child or the family. If the Head of School/Effective Head and the designated member of staff know of such other professionals involved, this information should be passed on with the referral.

7.2.1 In cases where a child makes a disclosure of abuse to a particular member of staff, the Head of School/Effective Head should ensure that this information is not disclosed to any other member of staff, or adults or children.

7.3 For the benefit of the child, the trusted member of staff will cooperate fully in further investigation. Legal advice may be sought from any trade union to which the member of staff may belong. Child Safety Services [see Appendix 1] may also provide support to trusted members of staff who have been called to give testimony.

8. Summary Chart

8.1 Referral System



8.2 The Head of School/Effective Head is to ensure that the following information is made available to your staff.

8.2.1 Knowledge of the procedures involved is essential for all staff, to aid to alleviate the suffering of children. The training of school staff regarding these procedures will be the responsibility of the Child Safety Services. This training will be given in accordance to established procedures.

8.3 If one is worried about the possibility of child abuse, whether or not one has clear evidence, the Head of School/Effective Head should be consulted. If the Head of School/Effective Head feels the need for consultation, Child Safety Services can be contacted for advice. The referral will always be made by the Head of School/Effective Head.

8.4 The following is valid information that should be kept by the Head of School/Effective Head.

The designated member of staff: (name).....
Advice may also be sought from: (name and tel.).....
The School's Education Social Worker (name and tel.).....
The School Counsellor (name and tel.)
The School Doctor/Nurse (name and tel.):
(applies only to Primary Sector)
C.P.S.U.:.....
C.S.S.:

8.5 If a member of staff suspects or knows of child abuse while on a school trip/activity, then s/he needs to contact the Head of School/Effective Head and give accurate details of what is known, as soon as possible. Should disclosure occur while on a school trip abroad, the Head of School/Effective Head will be notified immediately on return to the country.

8.5.1 The member of staff should clearly distinguish between fact and opinion. Fact signifies what the child has actually said and any visible signs seen on the child. Opinion includes any observations made about the relevant behaviour of the child.

9. Confidentiality

- 9.1 It is important that you tell the child who discloses abuse, in a way that is understandable to them depending on the age, exactly what you are going to do (e.g. refer the matter), and wherever possible allow the child to be supported by the adult to whom s/he made the disclosure. Do not make promises to the child which you may not be able to keep. For example, do not promise that the abuse will stop immediately. No one is in a position to guarantee this.
- 9.1.1 The boundaries of confidentiality must be made clear to all children who come and share with us any experience. As professionals, we keep confidentiality on all material shared, except when the material the child shares to us reveals that harm is going to be done to the child, or that the child is going to harm himself/herself or when the child is going to harm somebody else.
- 9.1.2 Even though a child may be reluctant to go further with the case, referral is essential.
- 9.1.3 Employees of the educational establishments will not be breaking confidentiality if information given by students is passed to other professionals on a “need to know” basis working within State Departments or Divisions.
- 9.1.4 However, it should be emphasised that the information passed between professionals should only be used for the purposes for which it was collected and that it should not be retained or circulated beyond what is strictly necessary.
- 9.2 When information is offered in confidence, the member of staff will need tact and sensitivity in responding to the disclosure. The member of staff will need to reassure the child, and retain his or her trust, while explaining the need for action, which will necessarily involve other responsible adults being informed.
- 9.3 It is, therefore, essential for the member of staff concerned not to make promises that s/he may not be able to keep. It is particularly important that the member of staff concerned shall not promise absolute confidentiality before s/he knows what is going to be confided to him or her because s/he may have to share what has been told with others. The child's trust has already been betrayed by the abuser, and if the member of the staff concerned fails to keep his or her promises this can compound the child's feeling of betrayal.
- 9.4 It is crucial at this point that the trusted member of staff does not probe or question the child disclosing an alleged experience of abuse. It is vital that at this point the trusted member of staff listens to the child and empathizes with what the child has said. This is the only support which should be given at this

stage and during the process of investigation, until a care plan has been designed for the child. Questioning or probing may cause harm to the investigation.

10. Medical Treatment

- 10.1 If, as a result of alleged child abuse, the injury is serious and requires immediate medical treatment while the child is on school premises or on a school outing, arrangements need to be made to transport the child to hospital, and the parents/carers are informed of the injury as soon as possible.
 - 10.1.1 In cases of suspected child abuse, as soon as Head of School/Effective Head has seen to the child's transportation to hospital, procedure 6 should be immediately implemented.
 - 10.1.2 Should parents/carers make their own transportation arrangements and there is suspicion or disclosure of child abuse, normal referral procedures will be followed (see procedure 6).
 - 10.1.3 Should parents/carers impede medical attention, then normal referral procedures will be followed.
- 10.2 Unless accompanied by parents/carers, the injured student should be accompanied by two members of staff and at least one member of staff should be the same sex as the child.

11. Primary Investigation

- 11.1 Following referral, C.P.S.U. will attend to the case as soon as possible. Primary investigation is initiated at this point. The referral received from the school will be given to the social worker who will follow the case right through the investigation. In all probability, the first intervention with the child will take place on school premises.
- 11.2 The child has a right to choose the person to support them during any investigatory meetings at the school. The child may also opt to be alone. Should this occur C.P.S.U. will send an accompanying social worker with the one carrying out the investigation.
- 11.3 It is vital that meetings of this nature take place in private and with the utmost confidentiality.

- 11.4 In order to protect the child's right to develop fully his/her educational potential in a secure and healthy environment, to avoid labelling and stigmatisation, and to avoid the child associating the school with trauma and family/personal problems further intervention within the school by C.P.S.U. will be kept at a minimum.
- 11.5 For the best interest of the child, social workers are to avoid police intervention on school premises when possible. If police intervention is absolutely essential the Victim Support Unit will intervene in plain clothes.
- 11.6 Once C.P.S.U. have obtained sufficient information and investigation is well underway, C.P.S.U. will call a case conference with a representative of Child Safety Services and other professionals concerned.
- 11.7 A representative of Child Safety Services will be present in case conferences called by C.P.S.U. following investigation of cases. Other professionals concerned will also be involved. Child protection conferences are an essential feature of inter-agency co-operation. The trusted member of staff is to participate since he/she can make a vital contribution in that they have detailed knowledge of the child, usually more than any of the other agencies involved and can contribute to an accurate assessment of the child in question.
- 11.8 Each professional attending the case conference should prepare a report, prior to the case conference. This report should be basically factual. Concerns about the child should be stated separately: opinions are acceptable, but the report should demonstrate the grounds for holding such an opinion. Conclusions reached should form the opinion offered on the basis of fact. No report should be based on impressions which remain unfounded.
- 11.8.1 Following are some useful headings for information that might be included in the report:

Demographic Data

Name of Child:

Date of Birth:

Address:

Telephone:

Name of School:

Date of Admission:

Previous School:

Educational Progress and Attainments:

Attendance (reasons for absence, if known):

Referral to Other Agencies (date, time, reasons):

Observations

Relationship/Interaction with Peers:

Relationship/Interaction with Adults:

Behaviour/Personality patterns, problems, signs of distress, etc.:

Observations regarding physical care - including hygiene, clothing, etc.:

Parents/carers' relationship with school staff - parents/carers' interest in child's progress:

Any general or specific concerns and incidents:

- 11.9 A care plan will be drawn out of this case conference.
- 11.10 The report should be signed and dated and the referee's name should also be clearly printed. If the report is not written by the Head of School/Effective Head, then the Head should countersign. The report should be on a school letterhead and bear the school stamp.
- 11.11 Child Safety Services will liaise with CPSU and will also be responsible for the co-ordination of services being offered to the child by the Education Student Services following investigations.

Part IV Additional Information

12. The Role of the Designated Member of Staff

- 12.1. Schools are to read and familiarise themselves with the **Child Protection Procedures**.
- 12.2. Make sure staff know where the **Child Protection Procedures** are kept and what your role is.
- 12.3. Make sure all members of staff know that the Head of School/Effective Head should be told of any suspicions or allegations of abuse.
- 12.4. Keep records of all concerns expressed to you. Include a note of the date, time and names of staff giving the information. All such information should be stored confidentially.
- 12.5. Should the Head of School/Effective Head be absent for a while, make sure there is a clear contingency plan. The designated member of staff will notify the most senior member of staff on the premises.
- 12.6. Give all members of staff advice and information on how to handle a situation where a child tells them about abuse. An abused child is likely to be under severe emotional stress, and the staff member may be the only adult whom the child is prepared to trust.
- 12.7. On-going training and policy evaluation will be co-ordinated by the Child Safety Services (Child Abuse) [see Appendix 1].

13. Risk of Abuse

- 13.1. Should C.P.S.U. and Child Safety Services consider any child to be at risk of abuse, a case conference will be called to devise a plan of action on how to monitor a child and as far as possible avoid any form of abuse from occurring.
- 13.2. If any employee of an educational establishment has reason to believe that a child is at risk of abuse, consultation will be sought with Child Safety Services and, if necessary, normal referral procedures will be carried out. (see procedure 6).

14. Communicating with Parents/Carers

- 14.1. It is vital that staff do not make enquiries of parents/carers before referring a case. This can sometimes interfere with the gathering of evidence and make adequate protection of the child very difficult. Remember that what you have seen or heard may be only a small part of the real situation. Investigation of child abuse is a highly skilled, highly sensitive task which should only be conducted by experienced professionals.
- 14.2. Should the need arise to contact the parents/carers and inform them of the abuse, then this should not be done by any of the school staff. This is the role of a social worker. This role will be fulfilled by C.P.S.U.
- 14.3. Where child protection information comes to light from a person other than the child him/herself, e.g. a parent, relative, friend or neighbour, the Head of School/Effective Head should immediately be notified if s/he is not the trusted member of staff. Normal referral procedures will then follow. Referral will still take place even if the person offering the information does not wish to contact the authorities herself/himself.
- 14.4. Schools are understandably anxious about reporting cases to C.P.S.U. which turn out to be unfounded, and which might affect the relationship between parents/carers and school. Nonetheless, the safety of children must always be the paramount concern; in cases where there is doubt, there is still a duty to refer. Child Safety Services may be referred to for consultation purposes.
- 14.5. Schools are advised to pass on information regarding child abuse to all parents at the start of each scholastic year [see Appendix 3]. This information should also be passed on to parents of newly admitted students.

15. Supporting a Child Who Tells About Abuse

- 15.1. Children should be listened to and what they say should be taken seriously. Research abroad shows that the percentage of children who lie about abuse is very small. It is also worth noting that in those few cases where children state they have been abused and this is found not to be so, the child concerned still has a problem and is in need of help.
- 15.2.
 - Be attentive
 - Stay calm.
 - Do not ask leading questions that could be interpreted as putting ideas into a child's mind. Do not ask questions which encourage the child to change his/her version of events, or impose your own

assumptions (e.g. ask “tell me what has happened” rather than “ did they do x to you”).

- Be reassuring and non-judgmental.
- Do not express disbelief, however incredible the child’s statements seem.
- Avoid condemning the alleged abuser.
- Do not make promises unless you are certain you can keep them.
- Don’t make assumptions about the child’s feelings.
- Tell the child s/he is brave and right to tell - and the abuse is not his/her fault.
- Never promise to keep the abuse a secret (Do not agree to keep any secret without first knowing what it is).
- Tell the child that things like this have happened to other children, and there are people who can help.
- Tell the child what will happen next. If you don’t know, assure the child that you will tell him/her as soon as you do.
- Do not coach the child into making a report.

16. Keeping Records

16.1. The designated member of staff should be immediately notified when a member of staff has a concern about child abuse. The Head should write down the time, date and information given by the member of staff concerned.

16.1.2 The designated member of staff should inform the Head of School/Effective Head who should keep a record of this information and a copy of the referral form sent to C.P.S.U. These should be kept in a file marked ‘**Confidential**’ and should be solely accessible to the Head of School/Effective Head within the school staff. Child protection information is confidential and should not be kept on the child’s cumulative record file. Each school should have a separate, locked file for child protection concerns.

16.2. Sometimes, things which seem to be insignificant or trivial at the time turn out to be vital pieces of information later.

16.2.1 If there has been no specific incident or information, try to identify what is really making you feel worried and then notify the Head of School/Effective Head.

16.2.2 Monitor the child. Record observations as factually as possible.

16.2.3 If you find you have made several notes about the child, seek advice from Child Safety Services.

16.3 Records are to be kept at the school for the duration of the case and while the child is being seen by any professional concerned. Once all services to the

child have been terminated, then all records will transfer from the school to a central registry kept at Child Safety Services. These records will be kept at Child Safety Services until the child reaches the age of 18. At the end of this period, Child Safety Services will destroy all records by shredding.

- 16.4 Should a case turn out to be unfounded, school records will still be passed on to Child Safety Services. Child Safety Services will then immediately destroy all records by shredding.
- 16.5 If during an investigation, criminal or otherwise, the child reaches the age of 18, then all records will be kept at Child Safety Services until the case is closed.

17. Change of Schools

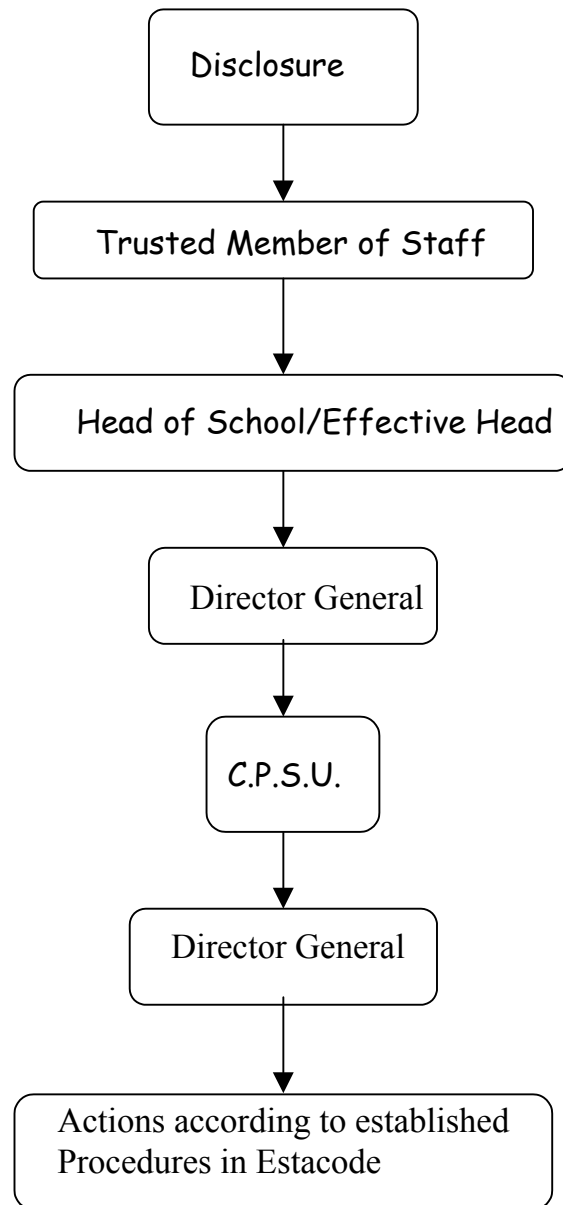
- 17.1 If during a child abuse investigation the child transfers to a new school the new Head of School should be informed.
- 17.2 Should a child transfer to a new school whilst still being seen by any professional concerned even though the case has been closed by C.P.S.U. than the new Head of School/Effective Head should be informed.
- 17.3 If a case has been completely closed by C.P.S.U. and no other professional has seen the child for the past twelve months, and the child transfers to a new school, then the new Head of School will not be informed.
 - 17.3.1 If a case has been completely closed by C.P.S.U., but the child has been seen by another professional in the last twelve months and the child transfers to a new school then the Head of School should be informed.
- 17.4 The Education Welfare Section should inform the school of any decision to initiate/terminate a Care Order, as well as any change in the placement of the child.

18. Allegations Against Staff

- 18.1 All allegations of abuse against a member of staff must be taken seriously.
- 18.2 In cases where there is an allegation against staff this will be dealt with by the Head of School/Effective Head not the designated member of staff.
 - 18.2.1 In allegations against staff, the trusted member of staff should notify the Head of School/Effective Head and not the designated member of staff.

- 18.3 The allegation must be logged in a confidential file as soon as possible. This file should only be accessible to the Head of School/Effective Head.
- 18.4 In an allegation of abuse against a member of staff, the Head of School/Effective Head should inform the Director General. The Director General will in turn inform C.P.S.U. and ask them to investigate the case. He will also nominate a representative from the Education Division to verify the process of investigation thus eliminating any biases.
- 18.5 C.P.S.U. will carry out the primary investigation that same scholastic day and will give feedback to the Director General regarding the case.
 - 18.5.1 If after primary investigation, C.P.S.U find a case to be unfounded, then no further action will be taken.
 - 18.5.2 If C.P.S.U. find enough evidence for further investigation but not criminal proceedings, the Director General will follow normal estacode proceedings and inform the Public Service Commission.
 - 18.5.3 If after primary investigation C.P.S.U. find enough ground for criminal proceedings, the Director General will follow normal estacode proceedings and inform the police.
- 18.6 Should C.P.S.U. find enough evidence for further investigation, this will be initiated immediately. The Director General of Education will be asked to verify the process of investigation, thus eliminating any biases. The Director General will also suspend the member of staff in accordance with Estacode regulations.
- 18.7 If the suspect is the Head of School/Effective Head, the concerned member of staff has the duty to inform the regional Assistant Director of Education, who will in turn inform Director, Operations who will immediately inform the Director General or his/her delegate. The above procedures will then be implemented.

18.8 Allegations Against Staff
18.8 Allegations Against Staff



19. Selection and Recruitment

- 19.1. Educational establishments should continue to ensure that their recruitment procedures include a check of the criminal background of staff prior to appointment. In practice, an applicant for any post within a school is asked to hand in a copy of his/her police conduct. This record should not be more than six months old.
- 19.2 Applicants in the process of recruitment may submit references by previous employers or other referees.
- 19.3 Although persons found guilty of abusing children may be rehabilitated, certain past behaviour may put a person in a position where he is not able to offer the necessary guarantees that s/he is suitable for a job involving contact with children. Therefore, it is advisable if such applicants were not considered for employment.
- 19.4 New contracts signed by the Education Division should include a clause obliging employees and contract workers to abide by the **Child Protection Procedures**.

Conclusion

Although these are delicate matters, one needs to act even in situations where no tangible proof is available, however strong suspicion is. On the other hand, we need to be very observant and factual about what we refer, so as to avoid, as much as possible, creating havoc where none exists. One important focus to keep in mind is that whatever action we decide to take, it always needs to be taken keeping in mind the well being of the child and taking the least harmful way as possible. Once again, this is in accordance to the Paramountcy Principle, which bases all its actions on the supreme interest of the child. The effects of many acts, whether of commission or omission, are always viewed in the best interest of the child.

Appendix 1 Child Safety Services (Child Abuse)

The Need for Child Safety Services (Child Abuse)

The need to ensure the welfare of the child is widely recognised both in Malta and abroad. Child services have existed in this country for many years. The Education Division, like many other agencies, already provides a vast array of services to all students under its provision. The sector of Student Services already targets generic child welfare issues.

Child abuse is one of many phenomena which societies all over the world feel the need to address. Although child abuse has long been a problem it is only recently that we have seen an alarming increase in reports. With growing recognition of the seriousness of the problem, the Child Protective Services Unit (CPSU) has already been established for the protection of children.

The Child Protection Procedures, published by the Education Division, reflect a broad consensus that there needs to be a system for recognising and referring cases of alleged child abuse to ensure children's safety. Inherent in these procedures is the need to create an effective system for coordinating and monitoring such referrals and providing interventive, preventive and research services.

While CPSU provides a very valuable and effective service, it has been found to be beneficial to involve school staff for interventive services offered to the child. One of the prime advantages schools have is the constant contact and in depth relationships with children. This makes them ideal locations for intervention to take place. The school itself provides a safe and non-stigmatising environment which is known to the child. Research has shown that if intervention takes place in a environment familiar to the child, then this is beneficial.

In view of this there is a clear need for a structure within the Education Division to work in conjunction with CPSU. Working with the area of child abuse is a highly specialised and delicate task. It is therefore proposed that a separate unit is set up to fulfil the above mentioned functions. Faster and more effective intervention can take place if investigative agencies work closely with this coordinating unit on cases of child abuse.

It is proposed that this new unit, is named Child Safety Services (Child Abuse) (ECPS). The remainder of this document proposes the roles and functions that such services would need to incorporate.

Child Safety Services (Child Abuse)

FUNCTIONS

1. CONSULTATION

Child Safety Services (Child Abuse) will:

- offer consultation to schools whenever necessary on cases of alleged child abuse where clarity regarding recognition of cases and referral is needed;
- offer advice on procedural matters, regarding referrals being made by schools.

2. CO-ORDINATION AND MONITORING

Child Safety Services (Child Abuse) will:

- serve as a link between schools and service delivery units of Education Student Services and/or other agencies/professionals outside the Education Division;
- co-ordinate and monitor cases being managed by professionals within Education Student Services;
- ensure that interventions are being carried out as detailed by Care plans.

3. INTERVENTION

Child Safety Services (Child Abuse) will:

- participate in the first case conferences called by CPSU following investigation and will also contribute to further case conferences and/or reviews of care plans when necessary;
- intervene directly in cases by offering:
 - psychological assessments of survivors of abuse
 - individual counselling to survivors of abuse
 - support groups for survivors of child abuse

- work in close collaboration with service delivery units of the Education Students Services and with other agencies and/or other professionals outside Education Division;

4. PREVENTION

Child Safety Services (Child Abuse) will:

- in collaboration with other units of the Education Division and/or of other establishments, offer prevention programmes in schools for children, staff and parents. The aims of such programmes will be:
 - To equip children with the necessary skills to avoid abuse if possible;
 - To teach parenting skills which may prevent abuse from occurring;
 - To develop parents' capacity to teach their children how to be safe from abuse;
 - To enable parents and school staff to recognise possible indicators of abuse.
- promote awareness and preventive measures amongst the general public.

5. TRAINING

Child Safety Services (Child Abuse) will:

- be primarily responsible for the training of employees of educational establishments regarding recognition of child abuse and on the procedures to be adopted when an alleged case of child abuse occurs;
- offer skills training courses to all Guidance teachers and Counsellors on the identification, recognition of cases and handling of child abuse disclosures;
- offer a training course on the handling of group disclosure to PSE teachers;
- offer assistance to Faculties at the University of Malta in courses to students related to child abuse;
- make available literary resources to all staff to consult;

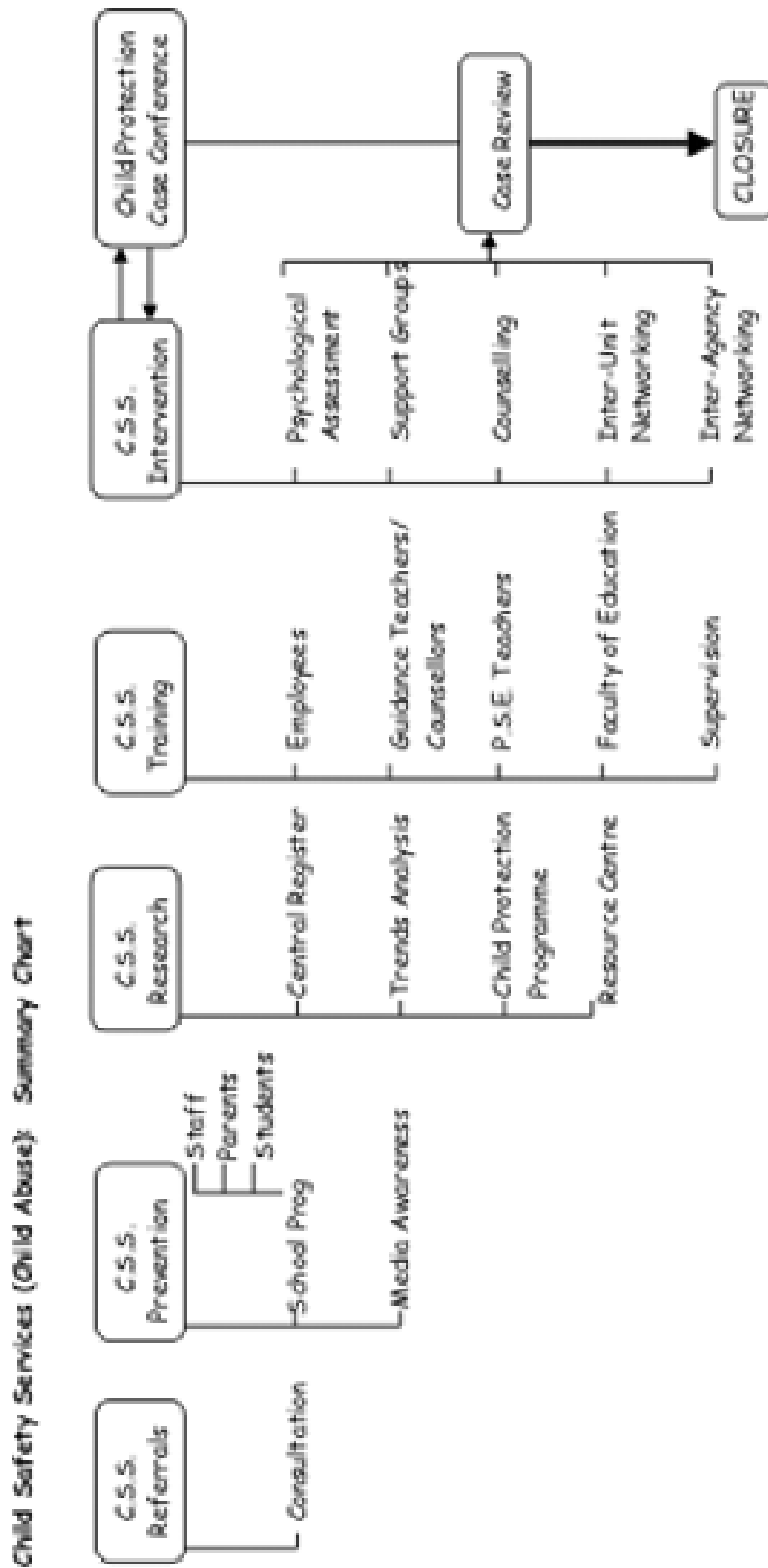
- offer consultation and supervision to any professional undertaking counselling contracts with survivors of abuse.

6. SERVICE EVALUATION AND REVIEW

Child Safety Services (Child Abuse) will:

- keep records and statistical data on cases of child abuse
- conduct research in areas, related to child abuse
- evaluate, review and update the Child Protection Procedures
- evaluate, review and update its service delivery.

Child Safety Services: Summary Chart



Appendix 2 Symptomatology

1. Physical Abuse – Symptomatology

Accidental injuries which have not actually been caused by an adult may also occur, but when the adult should have taken better care of the child to prevent the injuries, also fall under this category. Another common type of physical abuse, is when adults use force to feed the child, harm the same child in the process. Moreover the character of the injury must be measured against the explanation for it.

Physical Abuse includes actual or likely physical injury to a child, or failure to prevent physical injury (or suffering) to a child including deliberate poisoning, suffocation and Munchausen Syndrome by Proxy (also known as Polle Syndrome, Meadow's Syndrome, Fictitious Illness.) the latter condition is one in which symptoms or signs of illness in children are deliberately fabricated or induced, usually by the mother. There may be no underlying physical condition or, alternatively, a physical illness may be present but its manifestations grossly exaggerated by the parent/carer. Minor exaggeration of illness by parents/carers are common. This condition can only be regarded as present if parental behaviour is persistent over time and results in social and/or physical disability in the child.

The character of the injury must be measured against the explanation for it. Common manifestations of physical injury are the following:

- i. Bruises: on any part of the body
- ii. Weals: on any part of the body
- iii. Bite marks: human bite marks can be differentiated from animal bites
- iv. Black eyes: often without bruising of the forehead
- v. Burns: cigarette, hot metal rods, hot instruments
- vi. Scalds
- vii. Injuries to ears: Especially when there is bleeding from the entrance to the ear or bruising or tears around or behind the ear lobe (s) indicating injury by pulling and/or twisting.
- viii. Injuries to limbs: tender or swollen joints or suspected fractures in any part of the body.
- ix. Injuries to the genital area especially when
 - bleeding infection or irritation is reported;
 - child is walking awkwardly;
 - bruising of any kind is noted.

2. Sexual Abuse – Symptomatology

Sexual intercourse or other forms of sexual activity which the child does or does not consent to and understand. Sexual abuse is the actual or the risk of sexual exploitation of a child or minor.

Types of Sexual Abuse within the nuclear and extended family:

- i. Incest, acts of sexual intercourse within the following prohibited relationships:
 - a man with a minor who is his son/daughter, brother/sister or half brother/sister, grand son/daughter; and
 - a woman with a minor who is her son/daughter, brother/sister or half brother/sister, grand son/daughter.
- ii. Buggery – anal intercourse; this includes having contact with a child or young person with intent of buggery;
- iii. Unlawful sexual intercourse with children in family relationships not covered by current incest legislation, including adopted children and step children.
- iv. Indecent assault and acts of gross indecency (that is lesser acts not involving sexual intercourse) between in this case, family members.
- v. Other forms of sexual activity with children, including fondling, mutual masturbation, digital penetration, or genital contact and pornographic activities.

Forcing or using a child for the purposes of prostitution, inducing a child to prostitute him/herself. In such cases, it is essential that the investigation is conducted by the police.

Sexual abuse may be manifested in varying ways which include:-

- i. Injuries in the genital area stemming from inappropriate sexual contact with adults. The possibility of sexual abuse should always be considered in the physically abused child.
- ii. Physical Symptoms such as cystitis, vaginal discharge, lesions of the anus, bruising or bleeding, irregularity or tearing of the hymen, redness of the labia and perineum, venereal diseases, vaginal tears, pregnancy, difficulty in urination, laceration of the penis or perineum, venereal sores, anal ulcers, pain or itching in genital area as well as bruising on the palate in the mouth due to oral sex.

- iii. Psychosomatic complaints such as abdominal pains, headaches, sleeplessness, backache, incontinence;
- iv. Behavioural disturbances such as running away, unusual emotional outbursts or withdrawn behaviour, and other forms of anti-social behaviour, excessive masturbation, indulging in fantasy or infantile behaviour, poor peer relationships, delinquency, and role reversal. Behavioural disturbances also include the *Lolita Syndrome* which manifests itself when a younger child controls a sexual relationship with an adult;
- v. Sexual Abuse should be suspected especially when a child behaves provocatively or displays more knowledge of sexual matters than is usually in children of comparable age. In an older child promiscuity may be way of drawing attention to a sexual abuse problem.

It should be noted that it is a combination of these symptoms which should give rise to concern and not the occurrence of one symptom. It should also be clear that many of these symptoms may be caused by conditions unrelated to sexual abuse.

3. Systematic Emotional Abuse – Symptomatology

A variety of behavioural patterns may be seen in the emotionally abused child.

- i. Some children are naughty, overactive, demanding, restless, disobedient and unduly aggressive.
- ii. Other children may be withdrawn and apathetic, unable to participate in play and with an impaired capacity to enjoy life. Some children display frozen watchfulness which could describe the appearance of these unhappy frightened children.
- iii. Some, even very young children, may modify their behaviour in response to parental demands and show intense sensitivity to parental moods, reacting with passivity or precarious behaviour.
- iv. These children tend to be miserable with poor self concepts showing:
 - failure of intellectual development;
 - failure to grow in weight;

4. Persistent or Severe Neglect – Symptomatology

- i. Malnutrition
- ii. Constant tiredness
- iii. Unkempt appearance
- iv. Weightloss
- v. All other symptoms included in failure to thrive.

5. Failure to Thrive - Symptomatology

- i. Underweight
- ii. Short stature
- iii. Possibly poor hygiene
- iv. Unkempt appearance
- v. Sometimes poor coping skills
- vi. Learning Difficulties
- vii. Indiscriminate friendliness
- viii. Seeks physical contact with strangers
- ix. Listlessness, apathy or restlessness;
- x. Pallor, loss of weight and signs of poor nutrition.

Appendix 3 Information for Parents/Carers

Schools are strongly advised to pass on the following information to parents/carers:

“It may be helpful for parents/carers to know that school staff are required to pass on information which raises concern that a child may be at risk from non-accidental injury, neglect, emotional or sexual abuse.

Procedure exists to protect children and schools are encouraged to take the attitude that where there are grounds for concern it is better to be overcautious than to risk a child’s safety. They therefore have an unavoidable duty to contact professionals responsible for protection of children.

Occasionally, this duty on Head of School/Effective Head means that they must risk upsetting some parents/carers by reporting a concern which, on investigation, proves to be unfounded. In these circumstances, it is hoped that parents/carers will appreciate how difficult it is for schools to carry out this delicate responsibility, and accept that the Head of School/Effective Head was acting in good faith and had to take these steps in the best interests of children.

Parents/carers are strongly advised against creating false accusations. This is a serious matter. Legal action for defamation can be taken.”

Appendix 4 Students over the age of 18 years

All adults who are still under the provision of the Education Division will be offered appropriate support upon disclosure of abuse. This will include information about services available and methods of self-referral.

In cases where an adult, who because of a specific special need cannot make a disclosure and abuse is noted or suspected, then the appropriate agencies will be contacted by the employee. When allegations are made against members of staff involving adults with special needs, who are under the provision of the Education Division, usual referral procedures will be followed (Procedure 18).

Appendix 5 Referral Form

SOCIAL WELFARE DEVELOPMENT PROGRAMME
CHILD PROTECTIVE SERVICES UNIT

CONFIDENTIAL

Referral Form

Agency referring case: _____ Date of Referral: _____

New case? Y N

Already registered with a referring agency Y N If yes, Reference No: _____

Section A

Child's Name: _____

Address: _____

Tel. No.: _____

D.O.B.: _____ M F

School: _____

Tel. No.: _____

Section B – Household/Family

Father's Name: _____ Mother's Name: _____

Address: _____ Address: _____

D.O.B.: _____ D.O.B.: _____

Occupation: _____ Occupation: _____

Tel. No.: _____ Tel. No.: _____

Other siblings in the family:

<u>Name</u>	<u>Date of Birth</u>	<u>School</u>

Significant Others/Other Agencies Involved:

Name: _____

Address: _____

Tel. No.: _____

Section C

Reasons for Referral:

Type of Abuse: _____

Section D

Alleged Perpetrator: _____

Relation to Victim: (if applicable) _____

Address: _____

D.O.B.: _____

Section E

Summary of Case: _____

Work done by referring agency? (if any) _____

Present situation: _____

Section F

Who referred case to referring agency? _____

Is child aware of referral? Y N

Is mother aware of referral? Y N

Is father aware of referral? Y N

Will referring agency be terminating case? Y N Why? _____

Any further comments/recommendations:

Designated member of staff: _____

Signature: _____

Head of School: (where applicable) _____

Signature: _____

School Stamp:

Date:

Section G

For CPSU use only

Referral taken by: _____

Time: _____

Date: _____

Additional Information _____

Any Initial Action Taken & Reasons for such Action _____

Initial Action Plan _____

Name of Worker: _____ **Signature:** _____

Case Allocated to: _____ **Date of Allocation:** _____

**SOCIAL WELFARE DEVELOPMENT PROGRAMME
CHILD PROTECTIVE SERVICES UNIT**

CONFIDENTIAL

Referral Form Reply

Date of Receipt of Referral: _____

Client's Name: _____

Address: _____

Tel. No.: _____

D.O.B. _____ School: _____

Your Reference: _____

We will be conducting an investigation to verify if case falls under CPSU criteria

Case is **accepted** and will be followed by CPSU

Case is **not accepted** since it does not fall under CPSU criteria

We require further discussion on the case prior to accepting or refusing case

Social Worker: _____

Signature: _____

6 List of Related Services

Child Protection Unit - S.W.D.P. 4th Floor, Gattard House Blata l-Bajda	249995/6
Education Division Floriana	221401-4, 247401, 245398, 231380 224575, 221288, 221580, 223178
Education Welfare Section The Mall Floriana	243523, 225843, 220838
Guidance and Counselling Services 1, St. Publius Str. Floriana	237906, 241239, 248046
School Psychological Services The Mall Floriana	239530
Education Medical Officer The Mall Floriana	248819
Supportline	179
Victim Support Unit Police Headquarters Floriana	224002-9
Special Education Unit The Mall Floriana	231567
Department of Social and Family Welfare Centru Hidma Socjali St. Joseph High Rd. St. Venera	446007

Young People's Unit
Mount Carmel Hospital
Attard 435467, 411993

Child Development Assessment Unit
St. Luke's Hospital
G'Mangia 25951792

sedqa
Agency against drug & alcohol abuse
Triq Braille
Sta Venera 441014