
Code of Conduct With Children Policy

Division: Health Services

Approved by: Chief Executive – Health Services



Purpose

This Code of Conduct with Children Policy (Code) sets out the minimum standards of behaviour expected of all employees, volunteers and contractors of Mercy Health and its related entities when working with, or in the presence of, children.

For the purposes of this Code, child means an unborn and/or a person **under 18 years** of age, This Code applies to all Mercy Health activities conducted in Victoria and New South Wales and is intended to support compliance with:

- the Victorian Child Safe Standards under Part 6 of the *Child Wellbeing and Safety Act 2005* (Vic); and
- the NSW Child Safe Standards under the *Children's Guardian Act 2019* (NSW).

This Code operates alongside, and must be read in conjunction with, Mercy Health child safety policies and procedures, which set out detailed operational and legislative requirements..

This Code will:

- Clarify the responsibilities and obligations of all individuals working within, or on behalf of, Mercy Health.
- Set clear, mandatory standards of behaviour expected of adults when engaging with children.
- Prevent and reduce the risk of harm by minimising opportunities for abuse, neglect, or exploitation.
- Provide practical guidance and support to staff and volunteers on how to engage safely and appropriately with children, including how to recognise, respond to, and manage complex or challenging situations.

Health Services in Victoria and NSW align with State and National [Child Safe Standards](#) to ensure children's safety and well-being. Victorian hospitals follow the Department of Health's Child Safe Standards (refer to Appendix 1), while NSW Health implements the NSW Child Safe Action Plan and Standards to embed child safety across services (refer to appendix 2).

As a Catholic organisation, aligning with the [National Catholic Safeguarding Standards \(NCSS\)](#) is essential to ensure the safety and well-being of children.

All NSW employees, volunteers and contractors please refer to relevant [NSW](#) policy directive and procedure.

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Who Must Comply

This Code applies to all Mercy Health:

- employees (permanent, temporary and casual);
- volunteers;
- students;
- contractors and consultants; and
- any other persons engaged by, or acting on behalf of, Mercy Health,

who work with, or may come into contact with, children in the course of their duties.

Policy

The Code outlines the minimum behaviours required of each person to perform their role in line with the Mission, Vision and Values of Mercy Health. Employees are required to speak to their manager or People, Learning and Culture Business partner if they have any concerns in understanding any part of the Code. Contractors and volunteers must be made aware of the Code by the Mercy Health employee with responsibility for their engagement.

Statement of Commitment to Child Safety

Mercy Health is committed to providing a child safe environment where children are protected from abuse, harm and exploitation.

This commitment is promoted by the following organisational precepts:

- an awareness of staff to listen to the voice of children
- a **zero** tolerance of child abuse
- development and ongoing review of policies and procedures to protect children from abuse
- a commitment to take all allegations of abuse against children seriously and to respond to them consistently and in line with Mercy Health's child safe policies and procedures.
- a recognition of the need to continually promote cultural safety for children of Aboriginal and culturally and/or linguistically diverse backgrounds, as well as providing a safe environment for children with a disability

This commitment applies across all Mercy Health health services in Victoria and New South Wales.

Alignment with Child Safe Standards

Mercy Health adopts and applies the Child Safe Standards applicable in each jurisdiction in which it operates.

In Victoria, Mercy Health implements the [11 Victorian Child Safe Standards](#), which include requirements relating to culturally safe environments, leadership and governance, child participation, family and community involvement, equity, staff suitability, complaints handling, training, safe environments, continuous review and documented policies.

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In New South Wales, Mercy Health implements the [10 NSW Child Safe Standards](#), which are aligned with the National Principles for Child Safe Organisations and are regulated by the NSW Office of the Children's Guardian.

This Code supports these Standards by clearly articulating expected behaviours. Detailed compliance obligations are addressed in Mercy Health policies and procedures.

Mercy Health staff must

Child Participation and Voice

All persons to whom this Code applies must:

- respect the rights of children to express their views about matters affecting them;
- take children's concerns seriously and respond in a timely and appropriate manner; and
- support children to raise concerns or complaints in a way that is appropriate to their age, ability and circumstances.

Children must never be discouraged, ignored or dismissed when expressing concerns about their safety or wellbeing.

Families and Communities

Mercy Health recognises the important role of families and communities in promoting child safety.

Staff must engage with families and carers in a respectful, open and transparent manner and provide information about child safety where appropriate, consistent with Mercy Health policies and privacy obligations.

Safe Physical and Online Environments

All persons to whom this Code applies must contribute to maintaining physical and online environments that minimise the risk of harm to children, including by:

- ensuring interactions with children are observable where possible;
- using organisational systems and devices for communication with children, unless otherwise authorised;
- complying with Mercy Health requirements relating to photography, recording, social media and telehealth; and
- promptly reporting environmental or system risks to their line manager.

Reporting Concerns and Breaches

Any person who becomes aware of, suspects, or reasonably believes that:

- a child has been harmed or is at risk of harm; or

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- this Code has been breached,

must report the matter immediately in accordance with Mercy Health policies and procedures. This includes obligations under:

- the **Reportable Conduct Scheme** (Victoria and NSW); and
- applicable child protection, information sharing and mandatory reporting laws.

Concerns must never be ignored, minimised or delayed.

Other

- Comply with the Child Safety Policy and related safeguarding policies and procedures, and take all reasonable steps to protect children and young people from abuse and harm.
- Promote an inclusive, welcoming and culturally safe environment, respecting cultural, religious and individual differences.
- Work in an open, transparent and accountable way, ensuring interactions with children are visible or known to other staff wherever possible.

Expected Behaviour

Mercy Health staff **must not** engage in any of the following behaviours:

- Engaging in any form of child abuse or misconduct, including sexual abuse or exploitation in any context.¹
- Possessing, accessing, or distributing child abuse material in any format.
- Grooming a child or young person, including any conduct intended to establish trust or a relationship for the purpose of future abuse.
- Engaging in sexualised conversations or behaviour in the presence of a child or young person, including online interactions.
- Displaying, discussing, or sharing sexual content (audio, visual, or written) with or in the presence of a child or young person.
- Perpetrating or enabling physical violence, family violence, or coercive behaviour involving children or young people.
- Humiliating, belittling, intimidating, rejecting, or threatening a child or young person, or otherwise causing emotional or psychological harm.
- Developing inappropriate or non-professional relationships with children or young people, including:
 - showing favouritism or preferential treatment
 - giving gifts outside approved practices
 - engaging in inappropriate or non-work-related communication, including via social media.
- Having unauthorised contact with children or young people outside approved services, care, or program delivery, unless:
 - it is directly related to professional duties, and

¹ Adapted from the Department of Education Child Safety code of Conduct [Department of Education Child Safety Code of Conduct | vic.gov.au](https://www.vic.gov.au)

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- appropriate consent from a parent or carer has been obtained.
- Communicating directly with children or young people through personal or private channels (e.g. personal phone, email, messaging apps, or social media), except where:
 - it is strictly necessary for care or service delivery, or
 - there is an immediate safety concern.
- Initiating unnecessary physical contact, or undertaking personal tasks a child or young person can reasonably do themselves, unless required for their care, safety, or well-being.
- Failing to respond appropriately to concerns or disclosures, including:
 - ignoring or dismissing suspicions of abuse, harm, or family violence
 - delaying action or waiting for proof before reporting concerns
 - failing to escalate concerns in line with Mercy Health safeguarding procedures.
- Ignoring or failing to challenge inappropriate behaviour by other adults towards children or young people.
- Engaging in discriminatory, racist, or culturally unsafe behaviour, including the use of inappropriate or offensive language.
- Treating any child or young person unfairly, or criticising or undermining their identity or expression, including their:
 - age, gender, culture, religion, sexuality, disability, or other protected attributes.
- Disregarding the views, voice, or safety concerns of children and young people, particularly in relation to their physical, emotional, and cultural safety.
- Misusing or unauthorised access to information about children or young people, including using data for purposes unrelated to care, safety, or approved organisational functions.
- Photographing, recording, or sharing images or information about children or young people without appropriate consent and in line with Mercy Health privacy requirements, including on social media.

Breaches to this Code:

Mercy Health is committed to a child safe culture. Anyone who suspects a breach of this Code must report their concerns to their manager or to the People Learning and Culture Team.

Breaches of this Code are taken seriously and may result in disciplinary action, including termination of employment or engagement.

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Link with Organisational Values

Stewardship

In articulating a common approach to practice, this policy creates a context of **stewardship** through holding people accountable for the highest standards of child safe practices.

Definitions

Term	Definition
Child Abuse	For the purposes of this Policy, child abuse constitutes any act committed against a child involving: • Physical violence • Sexual offences • Emotional or psychological abuse • Neglect • Exposure to Family Violence
Child Safety Standards	In the context of the Victorian Child Safe Standards, child safety is an outcome achieved by means of discrete measures to protect children from abuse.
Child Safe Organisation	In the context of the Victorian Child Safe Standards, a child safe organisation is one that meets the Child Safe Standards by proactively taking measures to protect children from abuse.
Conduct	The manner in which a person behaves, especially in a particular place or situation.
Health services	Mercy Hospitals Victoria Ltd (MHVL; Werribee Mercy Hospital (WMH), Mercy Hospital for Women (MHW), Mercy Mental Health (MMH), O'Connell and Woivurrung-yagila-wulumperi, Whittlesea Early Parenting Centre (EPC)), Mercy Hospitals NSW Ltd and Mercy Palliative Care Ltd (MPC). It is expected all those working for Mercy Health Services will be familiar with this document.

Links to Related Documents

All Mercy Health Policies, Procedures and Protocols. In particular:

- [Child Safety Policy](#)
- [Protection of Children Procedure NSW](#)
- [Protection of Children Procedure VIC](#)
- [Protection of Children Procedure ACT](#)
- [Protection of Children Procedure QLD](#)
- [Protection of Children Procedure WA](#)
- [Working with Children and Vulnerable People Checks Procedure](#)
- [Safeguarding Children and Vulnerable People Policy](#)
- [Family Violence Identification and Response \(MARAM\)](#)
- [Screening Policy \(including Police Record Check and Working with Children and Vulnerable People\)](#)
- [Reportable Conduct Policy](#)
- [Reportable Conduct Procedure](#)
- [Information sharing schemes; Child information \(CISS\) and Family violence information \(FVISS\) procedure](#)
- [NSW Health Code of Conduct](#)
- [Managing Unsatisfactory Performance & Misconduct Procedure](#)

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Evaluation

Mercy Health is strengthening its child safe practices through ongoing monitoring, reporting and review processes led by People and Culture and Safeguarding, to support compliance, accountability and continuous improvement.

Risk Rating

Moderate (3 year document review period)

Key Legislation, Acts, Standards and References

- Child Wellbeing and Safety Act 2005 (Vic).
- Children, Youth and Families Act 2005 (Vic).
- Crimes Act 1958 (Vic)..
- Crimes Act 1900 (NSW).
- Child Protection (Working with Children) Act 2012 (NSW.)
- Children's Guardian Act 2019 (NSW).
- Children's Guardian (Transitional) Regulation 2020 (NSW).

Keywords

Child, Child safety, abuse, neglect , child safe standards

Version History / Author / Contributors

V.	Date Created (MM/YYYY)	Sections Changed	Created/Amended by (position title)
1	07/2018	New Document	Social Work Manager and Family Violence Coordinator
2	04/2020	Links to Reportable Conduct policy and procedure. Volunteer and Contractor added to the declaration wording.	Project Director, Family Violence, Child Safe Standards.
3	06/2021	Appendix 1 added to include examples of child safe behaviours.	Manager – Social Work
4	05/2022	Minor edits to include changes to Child Safe Standards in VIC and expand scope to NSW	Executive Officer Group CEO Office
5.	07/2026	Minor edits, alignment with other codes of conduct. Links to National and Catholic Standards	Safeguarding Program Lead, EPC Directors, Social work Manager (HS), Family Violence and Safeguarding Program Lead, Director, Care Reimagined, Legal compliance Officer

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Employee, Volunteer, Contractor Declaration

I, _____ agree that I have read and understand the Mercy Health Code of Conduct with Children Policy and agree that in the course of my employment, engagement or association with Mercy Health I will act in accordance with all child related policies, procedures

Signature: _____ Date: _____

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Appendix 1: [Information Sheet 18 Behaviour that causes Emotional and Psychological Harm](#)

Examples Of Behaviour Which Demonstrate Good Child Safe Practice	Examples Of Behaviour Which Do Not Demonstrate Good Child Safe Practice
Ensuring that every child is attended by a parent, responsible adult or staff member at all times whilst at Mercy Health. The parent must be aware of the identity of the adult who is with the child and give approval for this adult to be in the company of the child.	Observing but taking no action when a child is unaccompanied by a parent but with another adult and the staff member has not checked as to whether the adult is known to the child and approved by the parent to be with the child whilst the child is at Mercy Health.
Placing a child who is an inpatient at Mercy Health in a bed that is close to the Nursing station and able to be continually observed by staff.	Placing a child who is an Inpatient at Mercy Health in a bed that is distant from the Nursing station and in such a position that the child is unable to be continually observed by ward staff.
A staff member being sensitive to the presence of a child when having a conversation with an adult patient regarding information that would be age inappropriate for a child to hear, regardless of the relationship between the adult patient and the child.	A staff member continuing to have an age inappropriate conversation with an adult patient in the presence of a child, regardless of the relationship between the patient and the child.
Being sensitive to and continually monitoring the television program being screened in public waiting areas so as to ensure that children in the waiting room are not exposed to age inappropriate auditory and visual material.	Ignoring the content of the television program being screened in public waiting areas so that the exposure of the children who are present to age inappropriate material is not prevented.

Appendix 2: Victorian Child Safety Standards

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Mercy Health implements all 11 Child Safe Standards to protect children and young people. Each Standard sets expected outcomes and minimum requirements, which are met through our policies, procedures and practices. Evidence of this is provided through compliance indicators that demonstrate how we meet our obligations. For further details on these standards please refer to : [CCYP | The 11 Child Safe Standards](#)

Standard 1 :Organisations establish a culturally safe environment in which the diverse and unique identities and experiences of Aboriginal children and young people are respected and valued.

Standard 2: Child safety and wellbeing is embedded in organisational leadership, governance and culture.

Standard 3: Children and young people are empowered about their rights, participate in decisions affecting them and are taken seriously.

Standard 4:Families and communities are informed and involved in promoting child safety and wellbeing.

Standard 5: Equity is upheld and diverse needs respected in policy and practice.

Standard 6: People working with children and young people are suitable and supported to reflect child safety and wellbeing values in practice.

Standard 7:Processes for complaints and concerns are child-focused.

Standard 8: Staff and volunteers are equipped with the knowledge, skills and awareness to keep children and young people safe through ongoing education and training.

Standard 9: Physical and online environments promote safety and wellbeing while minimising the opportunity for children and young people to be harmed.

Standard 10: Implementation of the Child Safe Standards is regularly reviewed and improved

Standard 11: Policies and procedures document how the organisation is safe for children and young people.

Appendix 3 Child Safety Standards NSW

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Mercy Health recognises the NSW Child Safe Standards, developed from the Royal Commission's recommendations, as a framework to strengthen child safety. The Standards set clear expectations and mandatory actions to help organisations prevent, respond to, and report abuse. They also provide a benchmark for assessing and continuously improving child safe practices. For more information on NSW child safe standards and the NSW Child Safety scheme please refer to: [Child Safe Standards](#)

1. Child safety is embedded in organisational leadership, governance and culture
2. Children participate in decisions affecting them and are taken seriously
3. Families and communities are informed and involved
4. Equity is upheld and diverse needs are taken into account
5. People working with children are suitable and supported
6. Processes to respond to complaints of child abuse are child-focused
7. Staff are equipped with the knowledge, skills and awareness to keep children safe
8. Physical and online environments minimise the opportunity for abuse
9. Implementation of the Standards is continuously reviewed and improved
10. Policies and procedures document how the organisation is child safe