



ACT Health

Public Health Officers responding to notifications of sexually transmissible infections in children and young people

Guidelines for Public Health Officers

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Policy Statement

ACT Health supports the protection of children and young people by educating and guiding staff in relation to mandatory reporting requirements of the ACT *Children and Young People Act 2008* (CYP Act).

Purpose

To provide guidance to Public Health Officers (PHOs) in understanding their responsibilities as mandatory reporters when receiving a notification of a child or a young person with a sexually transmissible infection (STI).

Scope

PHOs who receive notification of a child or a young person with an STI through laboratory or health practitioner report under the *Public Health Act 1997*.

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Roles and Responsibilities

Position	Responsibility
Public Health Officers (PHOs) responding to notifications of STIs	Comply with the reporting requirements under the CYP Act Comply with relevant requirements of the <i>Crimes Act 1900</i> Understand their responsibilities outlined in this procedure
Senior Director Communicable Disease Control (CDC)	Incorporate this procedure into training for all PHOs responsible for responding to STI notifications.

Requirements

All PHOs should be aware of their mandatory reporting responsibilities

Under the CYP Act, staff are required to report to ACT Child and Youth Protection Services (CYPs), when they reasonably suspect that a child or young person under the age of 18

years has suffered or is suffering from non-accidental physical injury, sexual abuse, emotional abuse (including psychological abuse) and neglect.

Summary of reporting requirements

Children and Young People Act 2008	
Voluntary Section 354	Mandatory Section 356
Physical abuse	Non-accidental physical injury
Sexual abuse	Sexual abuse
Emotional abuse (including psychological abuse)	
Neglect	

PHOs employed by Canberra Health Services (CHS) may have additional reporting requirements under relevant CHS policies and guidelines.

Sexual abuse, as defined in the ACT Keeping Children and Young People Safe 2019 document, includes 'any sexual act or threat impacting on a child, including unwanted sexual acts on a child over the age of consent (16 years old)'.

Notification of a STI in a child or young person does not automatically indicate that an infection has been sexually transmitted or that a young person is being sexually abused e.g., a positive chlamydial eye swab may represent a vertically transmitted infection, and a genital chlamydial infection may occur in consenting sexual relationships between peers.

PHOs generally receive laboratory reports of notifiable conditions and are not involved in the direct care of children and young people diagnosed with a STI. As such, they are not usually aware of the circumstances or patient history based on the laboratory notification alone. The PHO role, in the first instance, is to remind the health practitioner who requested the diagnostic test, who knows the child's or young person's circumstances and history, of their legal responsibility for reporting child abuse and neglect.

All PHOs should be aware of the *Crimes Act 1900* (ACT) and the circumstances in which sexual activity with a child or young person is an offence

PHOs responding to notifications of STIs in children and young people need to advise the health practitioner who requested the diagnostic test to consider the circumstances of the child or young person. Factors to consider include, but are not limited to:

- age of the child or young person;
- age differences with their sexual partner; and
- consent.

Sexual activity between those under the age of consent (under 16 years) is unlikely to be considered an offence under the Crimes Act, when:

- both the child or young person are over 10 years of age;
- there is less than two years age difference between them; and
- both give consent.

PHO response to notification of a STI in a child or young person

For all STI notifications in a child or young person under the age of 18 years, the PHO will liaise with the child or young person's health practitioner to determine if sexual abuse is suspected, with the exception of chlamydia notifications in young people aged 16 years of age or older which are not routinely followed up by PHOs.

If it appears that there are grounds to submit a report in relation to sexual abuse, emotional or psychological abuse, neglect or non-accidental injury, the PHO must make a report to CYPS or ensure that another person, such as the child or young person's health care practitioner, has made a report to CYPS.

Young people aged 16 and over can consent to sexual activity, but in cases where the PHO becomes aware of concerns about consent, emotional or psychological abuse, neglect or non-accidental injury, it is still appropriate to report to CYPS.

If the health practitioner has not done so, PHOs must make a report to CYPS, noting concerns that were raised in discussion with the health practitioner. A report can be submitted online via the CYPS website or by calling 1300 556 728, 24 hours-a-day, 7 days-a-week.

If contact cannot be made with the person's health care practitioner to discuss the notification, the PHO will send a letter to the practitioner outlining their mandatory reporting responsibilities (see attachments).

PHOs will consult with CYPS or Canberra Health Services Child at Risk Health Unit (CARHU) if further advice is required.

Records Management

Public Health Officers (PHOs) responding to notifications of STIs are responsible for recording actions, filing and storing records. Case files should be kept according to the *Territory Records Act 2002*, *Health Records (Privacy and Access) Act 1997*, and relevant ACTHD policy and procedures. Unique identifier codes should be used in place of names wherever possible to prevent unnecessary and accidental identification.

Evaluation

Outcome Measures	Method	Responsibility
95% of Public Health Officers (PHOs) responsible for responding to STI notifications are aware of responsibilities within 6 months of appointment	Knowledge and understanding of this policy and relevant legislation included in performance and development plans of all CDC PHOs	Senior Director, CDC
100% of all STI notifications of STIs in <18 yo are assessed and actioned in line with this policy	Quarterly review of notifications as part of the routine quarterly review of communicable disease notifications	Director Surveillance, CDC

References and Related Documents

References

- Northern Territory Department of Health and Families. Guidelines on the management of sexual health issues in children and young people [electronic resource]. 3rd ed. Darwin: The Dept., 2011. <http://www.healthinonet.ecu.edu.au/key-resources/promotion-resources?lid=26214>

Legislation

- Children and Young People Act 2008 (republication 9 April 2021) <http://www.legislation.act.gov.au/a/2008-19/current/pdf/2008-19.pdf>
- Crimes Act 1900 (ACT) (republication 20 April 2021) <http://www.legislation.act.gov.au/a/1900-40/current/pdf/1900-40.pdf>
- Public Health Act (ACT) 1997 (republication 23 June 2021) <https://www.legislation.act.gov.au/a/1997-69>
- Public Health (Notifiable Conditions) Determination, 2017 <https://www.legislation.act.gov.au/di/2017-210/>
- Health Records (Privacy and Access) Act 1997 (republication 23 June 2021) <http://www.legislation.act.gov.au/View/a/1997-125/current/PDF/1997-125.PDF>

Supporting Documents

- ACT Health Policy: Child Protection
- ACT Health Guideline: Child Protection
- Council of Australian Governments 2009 Protection children is everyone's business National Framework for Protecting Australia's Children 2009 - 2020
- Community Services Directorate 2019, Keeping Children and Young People Safe

Definitions

Term	Definition
Child	A person who is under 12 years old
Young person	A person who is 12 years old or older, but not yet an adult
Adult	An individual who is 18 years or older
Public Health Officer	A person authorised to act on behalf of the Chief Health Officer under the Public Health Act, 1997
Sexually transmissible infection (STI)	Are sexually transmissible conditions notifiable to the Chief Health Officer under the Public Health Act, 1997

Attachments

Draft letter for health practitioner reminding them of their obligations as mandatory reporters (child/young person under 18 years).

Version Control

Version	Date	Comments
1.0	10 January 2022	Approved by Executive Branch Manager, Health Protection Service

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ATTACHMENT: Letter to Health Practitioner

[Health Practitioner name]

[Address]

Dear Dr [Health Practitioner name]

NOTIFICATION OF A SEXUALLY TRANSMISSIBLE INFECTION IN A CHILD/YOUNG PERSON

The Health Protection Service has received a laboratory notification of a _____ infection in a child/young person, where you are listed as the requesting health practitioner:

Name:

DOB:

The Health Protection Service within ACT Health has mandatory reporting obligations. To avoid inappropriate reporting of young people in age-appropriate consensual sexual relationships, we ask that you use your knowledge of the patient to make a child protection report if indicated. A public health officer may also contact you to discuss this STI notification.

Section 356 of the *Children and Young People Act 2008* requires all doctors and nurses, as mandated reporters, to make a child protection report if they believe on reasonable grounds that a child has experienced or is experiencing sexual abuse.

Where a reasonable belief is formed, a report must be made immediately to Child Youth and Protection Services (CYPS). They can be contacted by phone (1300 556 728) or email (childprotection@act.gov.au). Further information is available on the CYPS website <http://www.communityservices.act.gov.au/ocyfs>

Any person can make a voluntary report if they believe or suspect a child or young person is being abused or neglected or is at risk of abuse or neglect.

If you have any questions, please do not hesitate to contact me on _____.

[Signature]

[Name]

[Title]

Health Protection Service

[Date]