

[insert organisation name/logo]

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## Abuse and Neglect Policy

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**Document Status:** Draft or Final

**Date Issued:** [date]

**Lead Author:** [name and position]

**Approved by:** [insert organisation name] Board of Directors on [date]

**Scheduled Review Date:** [date]

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### Record of Policy Review

Review Date	Person Initiating/Leading Review	Other People Consulted

### Triggers for Policy Review (tick all that apply)

- Standard review is timetabled.
- A gap has been identified
- Additional knowledge or information has become available to supplement the policy.
- External factors
  - Policy is no longer relevant/current due to changes in external operating environment.
  - There are changes to laws, regulations, terminology and/or government policy.
  - Changes to funding environment, including requirements of funding bod(y)ies
- Other (please specify).
- Internal / organisational factors
  - A stakeholder has identified a need, eg by email, telephone etc
  - A serious or critical incident has occurred, requiring an urgent review.
  - Need for consistency in service delivery across programs and organisations.
  - Separate, stand-alone policy is now warranted
  - A near miss has occurred, requiring a review to prevent a serious/critical incident in the future

**Additional Comments**

*[for example, policy now covers details related to new legislation].*

# Abuse and Neglect Policy

## 1. Purpose and Scope

The purpose of this policy is to ensure that:

- consumers are safe, and receive services in environments free from all forms of abuse, injury and neglect.
- where abuse or neglect does occur, **[insert organisation name]** responds promptly and sensitively to protect consumers from further harm, and to co-ordinate appropriate responses in line with their duty of care obligations.
- **[insert organisation name]** identifies, reports and/or responds to child protection situations.

This policy applies to all board members, staff, managers and volunteers of **[insert organisation name]**.

## 2. Definitions

Abuse is used throughout the policy to describe behaviour or actions that are intended to cause harm to a person, including:

- threatened or actual physical, sexual or verbal assault, harassment, and including physical and medical restraint
- abusive behaviour management practices
- taking advantage of legal and financial situations to the detriment of the person
- accidents or near-accidents caused by unsafe equipment or practices
- the threat of retribution for disclosure of any potential or actual abusive or neglectful practice or situation
- use of punitive or coercive behaviours to ensure a person's compliance.

An advocate is person who promotes, supports and represents the rights and interests of another person, and may act, speak or respond on behalf of another person.

Assault, as described in the Crimes Act 1900, is against the law. For the purpose of this policy, assault is any attempt or threatened attempt to cause unwanted immediate physical contact or bodily harm that puts the victim in fear of such harm or contact.

Consumer, in this policy, refers to a person being supported by **[insert organisation name]**

A person has capacity to make an informed decision if she or he is able to understand the general nature and effect of a particular decision or action, can weigh up the consequences of different options and can communicate their decision.

In this policy, a child refers to a person under the age of 16 years and a young person is aged 16 years to 18 years.

For the purpose of this policy, duty of care refers to the requirement a **[insert organisation name]** has to take reasonable care to avoid foreseeable harm to any consumer it supports

A guardian is a substitute decision-maker with authority to make personal or lifestyle decisions about the person under guardianship.

For reporting purposes in this policy the manager or line manager is the next person in line to receive a report of abuse or to take action on an allegation of abuse.

A mandatory reporter is anybody who delivers healthcare, welfare, education, children's services, residential services or law enforcement to children as part of their paid or professional work.

Neglect is the failure of a person responsible for another person's (eg consumer, child, person who is older or ill) to provide the necessities of life. Necessities of life are usually considered to be adequate food, shelter, clothing, medical or dental care. Neglect may also involve the refusal to permit others to provide appropriate care that person..

A person responsible is someone who has the authority to consent to treatment for an adult who is unable to give a valid consent to their own medical or dental treatment. In the context of this policy, an individual who has been abused may be required to talk to the police, a sexual assault worker or representative of a legal or victim's service, and will need support at these times. The support person does not have the same function as the 'person responsible' and will not make decisions for the consumer. The person may be a member of staff who is known and trusted by the consumer. The support person may also be from an advocacy service.

Significant risk of harm refers to a child or young person being in circumstances that are causing significant concern for their safety, welfare or wellbeing. Additionally significant risk of harm is:

- Sufficiently serious to warrant a response by a statutory authority irrespective of a family's consent

- May be reasonably expected to produce a substantial and demonstrably adverse impact on the safety, welfare or wellbeing of a child or young person.

The Mandatory Reporter Guide is a structured decision making tool which assists the reporting process when a mandatory reporter has concerns for the safety, welfare or wellbeing of a child or young person in NSW.

### 3. Principles

Everyone is entitled to feel safe, and to live in an environment in which they are protected from assault, neglect, exploitation or any other form of abuse.

Any suspected or alleged abuse must be responded to promptly and sensitively, with the aim being to protect the individual(s) from harm.

**[insert organisation name]** has a process for monitoring and responding to all critical incidents, including reports of abuse.

There is a shared responsibility for child protection and child wellbeing across government and non-government organisations and the broader community. To undertake our role in the care and protection of children and young people, **[insert organisation name]** will:

- Ensure staff have adequate skills to recognise and respond to child protection concerns and are guided by knowledge of both legislation and good practice in their work with children, young people and families
- Provide assistance to parents and carers responsible for parenting children and young people to promote a safe and nurturing environment
- Collaborate and partner with other services to provide the best outcomes for children, young people and families.

### 4. Outcomes

Abuse is, where possible, prevented.

Consumers know what to do and who to contact if they, or someone else, experiences abuse, and feel comfortable reporting abuse to **[insert organisation name]** or an alternative organisation / person.

**[insert organisation name]** staff and volunteers have the means to respond quickly and appropriately to allegations of abuse.

**[Insert organisation name]** plays a role in ensuring children live in safe and supportive environment by:

- Responding to child protection concerns through appropriate referral, reporting and service delivery including reporting of any risk of significant harm to NSW Community Services
- Providing care and support services to children, young people and their families who come into contact with our organisation
- Promoting the safety, welfare and wellbeing of children and young people in our organisation.

## 5. Functions and Delegations

Position	Task/Delegation
Board of Directors	Endorse Abuse and Neglect Policy. Comply with Abuse and Neglect Policy.
Management	Comply with Abuse and Neglect Policy. Ensure organisation complies with Abuse and Neglect Policy.
Staff	Comply with Abuse and Neglect Policy. Identify and respond to incidents of alleged abuse.

## 6. Risk Management

All staff, Board members, students and volunteers and are made aware of this policy during orientation.

The Board of Directors ensures mechanisms are in place for decisions and actions relating to preventing and responding to abuse to be transparent, effective and soundly based.

Staff members with support functions are provided with ongoing professional development in regard to preventing and responding to abuse.

Staff are trained to identify child protection risks and the requirements of mandatory reporting.

Risks to consumers are regularly assessed, identified and managed.

## 7. Policy Implementation

Staff and volunteers are aware that any attempts to cover up or failure to report incidents of actual or potential abuse will lead to disciplinary action.

Staff and volunteers will promptly report concerns about the safety of consumers (including environmental hazards) to their supervisor so that appropriate action can be taken.

Board members, staff, students and volunteers are aware of **[insert organisation name]** procedures through orientation and induction processes.

This policy and supporting documents is reviewed as part of the organisations quality improvement program.

Staff, volunteers, students and Board members are aware of their responsibilities detailed in this policy and related procedures and are aware of the processes for accessing external resources such as the Mandatory Reporter Guide and the Child Protection Helpline.

This policy will be reviewed in line with **[insert organisation name]**'s quality improvement program and changes to relevant legislation.

Monitoring and internal audit activities ensure appropriate record keeping related to child protection concerns, as well as ensuring that Working With Children Checks and child protection training are completed and updated when required.

## 8. Policy Detail

**[Insert organisation name]** considers the abuse of any person to be unacceptable.

Consumers, carers and staff are encouraged to raise any issues of assault or neglect.

**[insert organisation name]** has a clear internal process for the reporting, recording, treating and preventing accidents and injuries to consumers.

**[insert organisation name]** has clear policies and procedures for disciplinary action regarding the failure to report or attempts to cover up incidents of actual or potential abuse.

The procedures for reporting and managing incidents ensure that the consumers' rights to privacy and confidentiality are protected.

## 8.1 Documentation

**[insert organisation name]** has a clear process for the documentation, reporting, and management of potential or actual incidents.

All aspects of the incident are documented in accurate written accounts, including any follow up actions.

**[insert organisation name]** has a process for reviewing incidents of abuse, injury and neglect and its responses, to prevent recurrence.

**[insert organisation name]** informs all:

- staff and volunteers where incident report forms are located and gives them training to complete them.
- consumers of the complaints management process, including where complaint forms are located.

## 8.2 Prevention of abuse

Consumers are given information, training and support to understand and exercise their legal and human rights.

**[insert organisation name]** ensures that consumers are actively encouraged and supported by skilled staff to access complaint processes, to raise concerns about service delivery and to be involved in the development and review of service delivery.

**[insert organisation name]** informs staff, volunteers, consumers and families, guardians and advocates that prohibited practices include:

- corporal punishment (e.g., hitting);
- physical abuse including hair-pulling, pinching, biting, hitting and slapping;
- deprivation of meals, breaks, sleep, bedding, clothing and the opportunity to maintain personal hygiene;
- forfeiture of money or personal property;
- contrast showers (hot and cold alternating), cold showers or 'hosing down';
- isolation such as exclusionary time out, seclusion or restraint without proper authorisation, appropriate monitoring and strict adherence to all procedural guidelines;
- verbal abuse including name-calling, shouting, ridiculing or continual teasing and bullying;
- deliberate or unintentional neglect leading to failure to provide food, comfort, health care and opportunities to pursue personal activities and interests; and
- any unlawful act.

Where a consumer has a history of challenging behaviours (including assault), **[insert organisation name]** develops a support plan to address specific behaviours.

**[insert organisation name]** ensures that, where applicable, consumers and staff receive information and training on self-protective behaviours.

### **8.3 Staff and volunteers**

Staff and volunteers are given training to understand consumers' legal and human rights and to give consumers support to exercise them.

**[insert organisation name]** takes reasonable steps to ensure that its staff and volunteers understand and perform their roles in preventing and responding to abuse of consumers by any person.

Staff and volunteers receive training in identifying, responding to, reporting and following up assaults, accidents and injuries to consumers.

**[insert organisation name]** informs all staff and volunteers that attempts to cover up or failure to report incidents of actual or potential abuse will lead to disciplinary action.

In relation to staff and volunteers, **[insert organisation name]**

- includes suitable recruitment screening processes and protocols for identifying the risk indicators for abuse.
- appoints skilled staff and volunteers who respect the rights of consumers, who are aware of current policies and legislation pertaining to abuse, and who will support consumers and their families or guardians to access complaint mechanisms and raise any concerns they have about services.

### **8.4 Identifying abuse**

Staff and volunteers working with people experiencing mental illness:

- understand the behaviours or actions that constitute abuse.
- are able to recognise signs that may be indicators of abuse.
- recognise that people with challenging behaviour may be more vulnerable to abuse.

### **8.5 Reporting abuse**

**[insert organisation name]** procedures for reporting allegations or suspicions of abuse are clearly articulated and include the responsibilities of all parties involved in the process.

The culture of **[insert organisation name]** encourages and supports any person who has witnessed abuse, or suspects that abuse has occurred, to make a report of abuse and be confident of doing so without fear of retaliation and in a supportive environment.



Staff and volunteers are aware of their responsibility to report allegations of abuse in accordance with **[insert organisation name]**'s documented procedures.

As needed, **[insert organisation name]** supports the consumer to locate a suitable independent advocate to assist him/her through the reporting and investigation of an assault.

After the report of an incident, **[insert organisation name]** appoints a staff member to the consumer to assist him/her through the issues arising from the assault. The worker is selected on the basis of a positive relationship with the consumer, and the possession of the skills to give effective support.

## **8.6 Responding to a report of abuse**

Response to a report of abuse is prompt, appropriate and in accordance with clearly documented procedures. The response includes appropriate reporting to the NSW Police, and the provision of medical care, including transfer to hospital by an ambulance and referral to a Sexual Assault Service if the assault is of a sexual nature.

When the victim of abuse is unable to give consent, the family, guardian or other support person are notified of the incident as soon as possible.

If it is appropriate and the victim has given consent, the family or guardian of the victim, or other support person, are informed of the allegation of abuse as soon as possible after the report is made.

**[insert organisation name]** must report to the police any serious physical or sexual assaults (including threats or attempts).

**[insert organisation name]**'s response procedures ensure:

- protection of the victim from further danger;
- notification of senior staff responsible for taking action;
- completion of a written incident report;
- separation of those involved in an assault;
- support to consumers to seek immediate medical attention and access to legal advice and counselling services; and
- development of a plan to manage the issues arising from the assault.

**[insert organisation name]** takes immediate action to address the following incidents:

- unsafe equipment, practices or situations;
- accidents and near accidents;
- minor injuries;

- neglect;
- retribution for reporting an incident; and
- any systemic problems.

Where consumers who have assaulted are moved to another service, the new service should be provided with adequate information about the person's history.

If the police are contacted following an assault allegedly perpetrated by a consumer, staff assist that consumer to access legal support and advocacy.

Consumers who are victims and/or perpetrators of assault are referred to appropriate mainstream and specialist service providers for legal, medical, sexual assault, counselling and advocacy assistance.

**[insert organisation name]** has a clear understanding of the role and function of relevant mainstream or specialist service providers and ensures that appropriate referral protocols are established with them.

### **8.7 Responding to abuse of a consumer by a member of staff**

All incidents and allegations of abuse are documented and reported to a manager.

All reasonable steps are taken to ensure that the consumer is protected from further harm by preventing contact with the alleged offender.

The rights of the alleged offender and responsibilities of the employer are adhered to in accordance with the appropriate legislation.

### **8.8 Responding to abuse of a consumer by another consumer**

Services manage the interactions between consumers to avoid incidents of abuse, and record in behaviour management plans the triggers that may cause one consumer to harm another.

If behaviour management strategies fail to prevent the abuse of one consumer by another, consumers are protected from further harm.

A review of the circumstances pertaining to the event is conducted within a reasonable timeframe.

Any behaviour management strategies implemented by the service are safe, respectful of the person and non-abusive.

When the victim and offender are both consumers they are equally entitled to support during the response process by an independent person.

### **8.9 Responsibilities**

The service's response process does not compromise any investigation by the NSW Police or other external agencies.

Staff and witnesses cooperate with the investigations of NSW Police and other agencies as required.

Consumers are assisted by an independent support person during their contact with the NSW Police and other agencies.

The roles and responsibilities of management, staff and volunteers in responding to a report or allegation of abuse are documented and clearly defined.

### **8.10 Information sharing**

Access to records is restricted to those who are directly involved in reporting and responding to the incident to ensure that consumers' rights to privacy are upheld.

A key staff member is appointed to be the sole contact for the family, guardian or other support person in providing information relating to the incident and any subsequent investigations.

The issue of information sharing requires a balance is required between:

- ensuring that people who have an important relationship with the consumer are informed when there is an allegation of abuse involving that consumer, and
- obeying the law as it applies to upholding consumers' rights to privacy.

### **8.11 Reporting abuse to NSW Police<sup>1</sup>**

#### **EMERGENCY – DIAL 000**

When a consumer or another person has been assaulted or is in immediate danger of an assault the NSW Police must be called (see Exceptions below for exceptions).

In addition, if a consumer or another person sustains an injury as the result of an assault the NSW Ambulance Service must be called.

#### **Reporting to NSW Police**

In situations requiring NSW Police intervention, it is preferable that the consumer be consulted and provide consent for the report.

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<sup>1</sup> From Accommodation Policy and Development Directorate: Ageing, Disability and Home Care, Department of Human Services NSW (2010).

Sexual assault: Sexual assault of a consumer is a serious offence and must be reported to the NSW Police (see Exceptions below for exceptions).

Physical assault: Any other physical assault of a consumer must be reported to the NSW Police (see Exceptions below for exceptions).

Other assault: A report of domestic violence, or abuse by neglect and restricted practices, and emotional, financial and systems abuse, must be reported to a manager as soon as possible, and may be reported to the NSW Police.

Exceptions: A report to the NSW Police about an assault may not be required if any of the following conditions exist:

- an incident that would usually be classed as assault, is caused by a person with an intellectual disability who lacks understanding of the behaviour; and
- physical contacts occurring between consumers (e.g. pushing or striking) that are appropriate for resolution using behaviour management strategies, and are reported internally.

If in doubt about reporting abuse the NSW Police may be contacted for advice.

## **8.12 Abuse of Older People**

In the abuse of older people the relationship between the abuser and the older person is usually one of trust and mutual dependency.

**[insert organisation name]** acts in alignment with the NSW Interagency Protocol for Responding to the Abuse of Older

People [http://www.adhc.nsw.gov.au/\\_data/assets/file/0011/228386/InteragencyProtocol1.pdf](http://www.adhc.nsw.gov.au/_data/assets/file/0011/228386/InteragencyProtocol1.pdf) .

## **8.13 Child Protection Concerns**

### **8.13.1 Working with Children Checks**

Employers providing primary child-related employment must undertake Working With Children Checks for new staff, volunteers and students (Commission for Children and Young People Act 1998). Primary child-related employment includes employment that primarily involves direct contact with children and young people (under the age of 18 years) where that contact is not directly supervised by a person having the capacity to direct the person in the course of the employment. **[Insert organisation name]** complies with responsibilities to undertake Working with Children Checks for relevant staff, students and volunteers.

### **8.13.2 Staff training**

**[Insert organisation name]** recognises that in the course of the work of our organisation, staff may come into contact with situations involving children, young

people and families in which there is a concern about the child's safety, welfare and wellbeing. Staff will have an appropriate level of knowledge, particularly regarding legislative changes introduced as part of the NSW Government's child protection initiative 'Keep Them Safe'.

Staff working with children, young people and families receive child protection training through registered training organisations such as the nationally recognised unit of competency CHCCHILD401A *Identify and respond to children and young people at risk*, part of the CHC08 Community Services Training package or equivalent.

### 8.13.3 Grounds for reporting risk of significant harm

Concerns about the safety, welfare and wellbeing of a child must be reported to NSW Community Services for any of the following reasons:

- **Physical or psychological needs:** The basic physical or psychological needs of the child or young person are not being met or are at risk of not being met.
- **Necessary medical care:** The parents or caregivers have not arranged necessary medical care (or are unwilling or unable to do so).
- **Education:** The parents or caregivers have not arranged (or are unwilling or unable to arrange) for the child or young person to receive an education in accordance with the Education Act 1990.
- **Physical/sexual abuse or ill-treatment:** The child or young person is at risk of physical or sexual abuse or ill-treatment.
- **Domestic violence:** The child or young person lives in a household where there have been incidents of domestic violence and as a consequence, the child is at risk of serious physical or psychological harm.
- **Serious psychological harm:** Parent or caregiver's behaviour towards the child or young person causes or risks causing psychological harm to the child or young person.
- **Prenatal care:** The child was subject to a prenatal report and the birth mother did not engage successfully with support services to eliminate, or minimise, the risk factors that gave rise to the report.
- **Cumulative harm:** A series of acts or omissions that when viewed together establishes a pattern of significant harm.

For guidance on making a report if you believe a case meets the grounds for reporting risk of significant harm, refer to the [Child Protection Reporting Procedure](#).

#### **8.13.4 Limits to confidentiality**

In working with children, young people, parents and caregivers, **[name of organisation]** staff clearly communicate their obligation to limited confidentiality in relation to child protection, i.e. their legal requirement as a mandatory reporter to report certain circumstances relating to the protection and wellbeing of a child to NSW Community Services (as set out in 8.3 above).

The limit to confidentiality is explained to all consumers receiving services from **[insert name of organisation]**.

#### **8.13.5 Exchanging information related to child protection**

There are two mechanisms for the exchange of information relating to the safety, welfare or wellbeing of children, young people and unborn children under the **Children and Young Persons (Care and Protection) Act 1998**.

- **Section 248:** Non-government organisations may be required to respond to requests for information from NSW Community Services under section 248
- **Chapter 16A:** This mechanism gives human services and justice agencies and non-government organisations (NGOs) the ability to share information relating to the safety, welfare or wellbeing of children or young people without consumer consent and whether or not the child or young person is known to NSW Community Services.

When receiving or making a request to share information, **[insert organisation name]** staff consider how the information requested relates to the safety, welfare and wellbeing of a child or young person as well as the following:

- A parent or other family members
- A child or young person's history or circumstances
- People with a significant relevant relationship to the child or young person
- Other agencies' dealings with a child or young person, including past support and service delivery.

In the course of sharing information with another organisation under Chapter 16A and/or section 248, you must not disclose the identity of anyone who has made a report to the Child Protection Helpline or any information from which the reporter's identity can be deducted.

Further guidance on exchanging information can be found in the **Child Protection Reporting Procedure**.

### **8.13.6 Support for mandatory reporters**

In all cases where a report is made to NSW Community Services, excluding cases where allegations are made about the CEO/Manager, the CEO/Manager is to be informed that a report has been made. Staff do not need management permission to make a report.

The person who made the report will ensure that the privacy and reputation of the child or young person and the alleged perpetrator is respected by not discussing details of the case with other staff members or others who were not directly involved with making the report.

Staff may discuss the case and seek support within the boundaries of supervision or professional counselling services prior to lodging the report.

The CEO/Manager will ensure that the staff member receives appropriate support and debriefing, including access to professional counselling services if required.

### **8.13.7 Allegations about staff or Board members**

The CEO/Manager is to be immediately informed about any allegation made against a **[name of organisation]** staff member. This may result in a temporary suspension of duties for the staff member and/or disciplinary action and/or instant dismissal.

If a concern exists about the CEO/Manager then the Board Chairperson and Executive (e.g. Treasurer, Vice Chair and Secretary) should be immediately informed. This may result in a temporary suspension of duties for the CEO/Manager and/or disciplinary action and/or instant dismissal.

If an allegation is made against a Board member, the Board Chairperson and Executive and the CEO/Manager are to be immediately informed. If the allegation relates to a member of the Board Executive or the Board Chairperson, remaining members of the Executive are to be informed. This may result in a suspension of Board duties or the revoking of membership resulting in a termination of the Board appointment.

A fair investigation of complaints, disciplinary action or instant dismissal will then be followed in accordance with relevant legislation and internal policies and procedures being mindful to protect consumers from unwarranted damage to reputation. Refer to Human Resources Management Policy, Poor Staff Performance and Misconduct Procedure and Dispute Management Procedure for further guidance.

**[name of organisation]** is obliged under the Commission for Children and Young People Act 1998 to report completed disciplinary proceedings where it has been found that:

- Reportable conduct occurred, or some evidence that it occurred (see below); or
- An act of violence occurred, or some evidence that it occurred, in the course of employment and in the presence of a child.

Reportable conduct is:

- any sexual offence, or sexual misconduct, committed against, with, or in the presence of, a child
- any child pornography offence or misconduct involving child pornography
- any child-related personal violence offence
- an offence of filming for indecent purposes committed against, with, or in the presence of, a child
- any assault, ill-treatment or neglect of a child
- any behaviour that causes psychological harm to a child.

## **9. References**

### **9.1 Internal**

Child Protection Reporting Procedure  
Community, Professional & Personal Development Policy  
Individual Supports Policy  
Informed Decision Making Policy  
Privacy & Confidentiality Policy

### **9.2 External**

NADA Child Protection

Policy [http://www.nada.org.au/index.php?option=com\\_content&task=view&id=236&Itemid=44](http://www.nada.org.au/index.php?option=com_content&task=view&id=236&Itemid=44) accessed 3<sup>rd</sup> October 2011.

## **Legislation**

Anti-Discrimination Act 1977 (NSW)  
Children and Young Persons (Care and Protection) Act 1998 (NSW)  
Commission for Children and Young People Act 1998  
Crimes Act 1900 (NSW)  
Disability Discrimination Act 1992 (Commonwealth)  
Guardianship Act 1987 (NSW)  
Mental Health Act 2007 (NSW)  
Work Health and Safety Act 2011 (Commonwealth)



Model Work Health and Safety Regulations 2011 (Cth)

## Other

Accommodation Policy and Development Directorate: Ageing, Disability and Home Care, Department of Human Services NSW (2010). *Abuse and Neglect Policy and procedures*. [http://www.adhc.nsw.gov.au/\\_data/assets/file/0020/228062/Abuse\\_and\\_Neglect\\_Policy\\_Sept\\_2010.pdf](http://www.adhc.nsw.gov.au/_data/assets/file/0020/228062/Abuse_and_Neglect_Policy_Sept_2010.pdf) Accessed 2nd June, 2011.

Department of Human Services NSW (2011). *Standards in action*. Ageing, Disability and Home Care. [http://www.adhc.nsw.gov.au/\\_data/assets/file/0008/235970/987\\_AD\\_HC\\_Standards\\_in\\_action\\_031111.pdf](http://www.adhc.nsw.gov.au/_data/assets/file/0008/235970/987_AD_HC_Standards_in_action_031111.pdf) Accessed 6th November, 2011.

NSW Government (2007). *Interagency protocol for responding to abuse of older people* [http://www.adhc.nsw.gov.au/\\_data/assets/file/0011/228386/InteragencyProtocol1.pdf](http://www.adhc.nsw.gov.au/_data/assets/file/0011/228386/InteragencyProtocol1.pdf) Accessed 6th November, 2011.

National Council on Crime and Delinquency, Children's Research Centre (2010). *New South Wales Mandatory Reporter Guide*. [http://www.community.nsw.gov.au/kts/guidelines/documents/mandatory\\_reporter\\_guide.pdf](http://www.community.nsw.gov.au/kts/guidelines/documents/mandatory_reporter_guide.pdf) Accessed 6th November, 2011.

## 9.3 Quality and Accreditation Standards

### EQuIP4

N/A

### EQuIP5

N/A

## Health and Community Service Standards (6<sup>th</sup> edition)

Provided by Quality Improvement Council (QIC)

Standard 2.4: Confirming consumer rights

Evidence Questions: What is the evidence that:

- services are delivered in a respectful way that recognizes each consumer's personal worth and individuality?
- consumers are aware of their rights and responsibilities including complaint, grievance, appeal and conflict management procedures, and these procedures are implemented promptly, judiciously and fairly?

- the organisation specifies the ethical standards expected of personnel in service and program provision and in research, and ensures these standards are met?

Perhaps there could be some reference to the Community Care Common Standards and the Charter of Rights and Responsibilities that are the basis for the quality Reporting process in aged care for both Commonwealth and HACC [not addressed yet ... comment from RW]

#### **9.4 National Mental Health Standards (Revised 2010)**

Criterion 2.1: The organisation promotes the optimal safety and wellbeing of the consumer in all mental health settings and ensures that the consumer is protected from abuse and exploitation.

Criterion 2.2: The organisation reduces and where possible eliminates the use of restraint and seclusion within all MHS settings.

Criterion 2.10: Staff are regularly trained to, wherever possible, prevent, minimise and safely respond to aggressive and other difficult behaviours.

Criterion 6.2: Consumers have the right to receive service free from abuse, exploitation, discrimination, coercion, harassment and neglect.

#### **9.5 Recovery Oriented Service Self-Assessment Tool (ROSSAT)**

Evidence items are:

Item 1.2b: Policy and procedures provide understanding and responses to diversity, and identify and address non-recovery oriented attitudes or behaviours (e.g. workers displaying stigmatising or discriminatory attitudes and behaviours) and are accessible and applied in practice.

Item 1.2h: Policy and procedures are in place that safeguard all people against abuse and discrimination, and outline processes for reporting abuse of workers and/or consumers.

Item 1.5: The organisation promotes a culture of respect and shared humanity towards consumers at all levels.

Item 1.9: The organisation and individual workers challenge stigma and discrimination in public settings.

Item 2.2: Management proactively and constructively challenge non-recovery oriented attitudes and behaviours among workers (e.g. stigmatising and discriminatory attitudes and behaviours).

Item 2.5: Leaders advocate, champion and model:

- Human rights informing service delivery
- The consumers' voice as central to care and service provision
- The belief that recovery is possible and probable for every person
- Hopeful and optimistic attitudes in dealing with workers, consumers and carers.

Item 2.6: Management:

- Is aware of Commonwealth and State policy directions around recovery orientation and integrates these into practice
- Identifies information relevant to the organisation to increase the knowledge base on recovery and recovery oriented practice, including information for consumers, carers and their families.

Item 3.5: Workers are aware of and responsive to diversity (e.g. gender, age, culture, ethnicity, language, sexual preference and religious beliefs / spirituality).

Item 3.13: A person's own interpretation of his or her illness is not used as a basis for discrimination or dismissed as untrue.

Item 4.3: The organisation provides the opportunity for ongoing training, including respectful practice, culturally responsive practices acknowledging different understandings and sensitivities relating to mental health, including Aboriginal and Torres Strait Islander meanings, the processes for workers to address stigmatising and discriminatory language they have observed, and the debilitating impacts of stigma and discrimination towards consumers, particularly in the language used by service workers.

Item 4.3b: The organisation provides the opportunity for ongoing training including in relationships:

- How to explore and identify appropriate boundaries
- Prioritising time for and undertaking relationship building
- Identifying relationships that are supportive of recovery, and those that may hinder a person's recovery
- Trauma informed care and practice
- Communication skills, including listening and negotiation
- Dealing with conflict, violence, hopelessness and/or challenging behaviour
- Working with people who are reluctant to be involved in decisions around their treatment and care
- The importance of attitudes such as hope and optimism
- How to explore and relate one's own life experiences to strengthen.
- The complaints process.

Item 4.3c: The organisation provides the opportunity for ongoing training in respectful practice:

- Understanding and responding to diversity
- Culturally responsive practices acknowledging different understandings and sensitivities relating to mental health, including Aboriginal and Torres Strait Islander meanings

- Knowing and promoting human rights
- Appropriate behaviours and attitudes that support recovery
- Processes for workers to address stigmatising and discriminatory language they have observed.

Item 5.3: Consumers are provided with the regular opportunity to evaluate relationships, respectful practice, perceptions of stigma and discrimination experienced from workers within the organisation, the consumer self-directed focus, the belief in consumer's recovery, the obtaining and sharing of knowledge and information, the quality and relevance of information provided and participation and social inclusion.

## **9.6 NSW Disability Services Standards (DSS)**

10.1: The service provider develops and implements policies and procedures relating to the prevention of sexual, physical and emotional abuse.

10.2: The service provider develops and implements procedures for reporting and responding to abuse.