

#### **PURPOSE**

AACA recognises the right of all participants to feel safe and to live in an environment that prioritises protection from assault, neglect, exploitation, discrimination or any other form of abuse. People with disabilities, children and young people are some of the most vulnerable groups in our society. It is essential that AACA staff are supported and trained to identify and respond to circumstances where a person with disabilities is at risk of suspected or actual harm.

Common reasons for people with disabilities, children and young people to be at risk of suspected or actual harm include:

- · domestic and family violence
- physical, sexual, psychological and emotional abuse
- neglect

Incidents of violence, abuse and neglect can impact all aspects of a person's development and life experience. People who experience violence, abuse and neglect are more likely to have problems with:

- · learning and development
- · physical and mental health
- behaviour
- · social skills

This policy aims to prevent and mitigate the effects of violence, abuse and neglect on participants through training and implementing processes to inform staff and protect participants at risk of significant harm.

#### **SCOPF**

AACA will encourage and support any person who has witnessed the abuse of a participant or suspects that abuse has occurred to make a report and be confident of doing so without fear of retribution.



### **DEFINITION**

Terminology	Definitions	
Abuse and neglect	<ul> <li>Any behaviour that is outside the norms of conduct and entails a substantial risk of causing physical, psychological or emotional harm to a person.</li> <li>Such behaviours may be intentional or unintentional and can include acts of omission (i.e. neglect) and commission (i.e. abuse).</li> </ul>	
Discrimination	<ul> <li>Treating or proposing to treat someone unfavourably because of a personal characteristic that is protected by the law.</li> <li>Discrimination includes bullying someone because of a protected characteristic.</li> <li>Protected characteristics include race, sexual orientation, gender, religion, disability</li> </ul>	
Exploitation	<ul> <li>The action or fact of mistreating someone to benefit from their work.</li> <li>The action of making use of, and benefiting from, resources.</li> </ul>	
Violence	<ul> <li>Violent behaviour by a person towards another can include abusive behaviour that is physical, sexual, intimidating or forceful.</li> <li>People with a disability are more likely to experience violence from a carer or family member.</li> </ul>	



TYPES OF ABUSE

Terminology	Examples	Signs and Symptoms
Physical abuse	Hitting; slapping; pushing; punching and burning, which entails non-accidental incidents resulting in pain or injury.	Bruising; lacerations; welts; rashes; broken or healing bones; burns; weight loss; facial swelling; missing teeth; pain or restricted movements; crying; acting fearful; agitation; drowsiness; hair loss; poor physical wellbeing.
Psychological/emotional abuse	Intimidation; humiliation; harassment; threatening; sleep deprivation; withholding affection; and not allowing the person to maintain their decision-making powers lead to a repeated pattern.	Loss of interest in self-care; helplessness; withdrawal; apathy; insomnia; fearfulness; reluctance to communicate openly; chooses not to maintain eye contact; paranoia and confusion.
Sexual abuse	Rape (penetration or oral-genital contact); interest in older person's bodies; inappropriate comments and sexual references; inappropriate (possibly painful) administration of enemas or genital cleansing; indecent assault; sexual harassment, grooming, touching, taking and sharing inappropriate photography and videos, sharing on social media, sexting, incest, stalking, any unwanted or coerced sexual contact, solicitation of minors through the internet; revenge pornography	Unexplained sexually transmitted disease; vaginal/anal bleeding; fearful of certain people or places; bruising to genital areas, inner thigh or around breasts; anxiety; torn or bloody underclothes; difficulty in walking or sitting; change in sleep pattern and repeating nightmares; interest in older person's bodies
Neglect	Intentional failure to provide basic life necessities including physical, educational, medical, supervisory, environmental or emotional	Poor hygiene or personal care; the presence of pressure sores; unkempt appearance; lack of personal items; absence of health aids; weight loss; obesity; agitation; inappropriate clothing or lack of food, lack of social contact, physical isolation
Domestic and family abuse	Any controlling, bullying, threatening or violent behaviour between people in a relationship including emotional, physical, sexual, financial or psychological abuse.	Witnessing abuse or being abused - as the norm - destroys the child's ability to trust others and undermines their ability to control emotions.



### **POLICY**

#### This policy aims to:

- take a preventative, proactive and participatory approach to participant safety
- value and empower the participant to contribute to decisions that affect their lives
- foster a culture of openness that supports all persons to disclose the risks of harm to participant safety
- respect diversity in cultures and child-rearing practices while keeping the participant's safety paramount
- provide Zero Tolerance training to staff and volunteers on appropriate conduct and behaviour towards participants
- engage only the most suitable people to work with participants and ensure superior quality staff, volunteer supervision and professional development.
- ensure that all staff and volunteers are subject to robust screening protocols prior to involvement with AACA
  participants and that these are maintained whilst the staff member or volunteer is active
- ensure participants know whom to talk to if they are worried or feeling unsafe and that they are comfortable and encouraged to raise any issues
- · report suspected abuse, neglect or mistreatment promptly to the appropriate authorities
- share information appropriately and lawfully with other organisations where the safety and well-being of the
  participant are at risk
- value the input of families and advocates and communicate regularly with them.

In the circumstance that meets the criteria of a reportable incident, then the 'Incident, Policy and Procedure' will apply. This includes all mandatory and organizationally authorised reporting to the appropriate authorities.

#### STATEMENT OF COMMITMENT TO SAFETY

AACA is committed to the safety and well-being of all. This commitment is the primary focus of our support and decision-making. AACA is committed to providing a safe environment where participants are safe and feel safe; their voices are heard and included in decisions that affect their lives. All individual participant's needs regarding their culturally or linguistically diverse backgrounds are supported.

AACA is committed to reporting and fully investigating allegations or suspicions of abuse.



#### CODE OF CONDUCT

AACA is committed to the safety and well-being of participants. Our organisation recognises the importance of, and responsibility for, ensuring our environment is a safe, supportive and enriching environment that respects and fosters the dignity and self-esteem of all people, enabling them to thrive.

All Staff and volunteers are required to comply with the AACA and NDIS Code of Conduct by observing expectations for appropriate and acceptable behaviour (see 'Acceptable behaviours' below). These Codes of Conduct apply in all situations, including planned activities and the use of digital technology and social media.

#### ACCEPTABLE BEHAVIOURS

Staff, volunteers or any other persons involved with participant-related work are responsible for supporting and promoting the safety of participants by:

- upholding the AACA and NDIS Codes of Conduct
- treating the participant, their family and advocates with respect at all times as part of normal social and community activities
- listening and responding to the views and concerns of the participant, particularly if they are reporting that they or another person have been abused; or that they are worried about their safety or the safety of another participant
- promoting the cultural safety, participation and empowerment of Aboriginal and Torres Strait Islander people through interactions with their community leaders and members
- promoting the cultural safety, participation and empowerment of people with culturally or linguistically diverse backgrounds through engagement with the community accessing the service
- promoting the safety, participation and empowerment of people with disabilities
- reporting any allegations of abuse or any personal safety concerns to management
- understanding and complying with all reporting or disclosure obligations (including state mandatory reporting) as they relate to protecting the participant from harm or abuse
- maintaining the right to live in a safe environment by promoting and informing the participants of their rights
- · ensuring participants are safe and protected from harm as quickly as possible once abuse is suspected
- identifying themselves to a participant upon entering the premises and show any required identification



#### **UNACCEPTABLE BEHAVIOURS**

As front-line workers, volunteers and community members involved in participant-related work, we must NOT:

- ignore or disregard any concerns, suspicions or disclosures of abuse
- develop a relationship with any participant that could be viewed as favouritism or grooming behaviour, e.g.
   offering gifts
- exhibit behaviours or engage in activities with participants that can be interpreted as abusive and unjustifiable in an educational, therapeutic or service delivery context
- ignore behaviours by other adults towards participants when they are overly familiar or inappropriate
- discuss the content of an intimate nature or use sexual innuendo with participants, except where it occurs in the context of parental/advocate guidance or in support of the person's right to sexual expression or a therapeutic setting
- treat a participant unfavourably because of their disability, age, gender, race, culture, vulnerability, sexuality
  or ethnicity
- communicate directly with any participant, through personal or private contact channels, e.g. social media, email, instant messaging or texting, except where that communication is related to work or activities or where there is a safety concern or other urgent matter.

#### SCREENING, SUPERVISING, TRAINING AND HUMAN RESOURCE PRACTICES TO REDUCE RISK

All staff and volunteers are required to undertake checks including disability worker checks, relevant police, and working with children checks and the mandatory NDIS Worker Orientation Module. All records will be maintained in their personnel file.

#### **PROCEDURE**

### STRATEGIES TO IDENTIFY AND REDUCE OR REMOVE THE RISK OF HARM

AACA recognises that promoting safe working and living conditions begins with a clear understanding of the potential risks to the participant, volunteers and staff in any relevant setting (in the participant's home, in the community). AACA will identify possible issues and problems and plan to reduce or remove these risks.

AACA will work to mitigate and reduce any threats to the safety and well-being of its participants.



These strategies may include:

- analysing any risks related to the activities or services AACA provides
- planning how to make all supports and activities as safe as possible
- developing a safety plan if appropriate for participants who require additional supports
- supporting participants with disabilities to understand their plans and necessary safety procedures using appropriate communication methods (this may include consultation with families and carers)
- supporting participants to understand that they have the right to feel safe at all times
- responding proactively to reduce the likelihood of any risks

#### REPORTING VIOLENCE, ABUSE, NEGLECT, EXPLOITATION AND DISCRIMINATION

A report must be made immediately to the manager if staff or volunteers observe any of the following:

- a participant shows a change in behaviour or mood which may indicate they are being abused
- someone is observed behaving towards a participant in a way that makes others feel uncomfortable
- a participant advises they are being abused by another person
- a person advises that they are abusing another participant
- a participant indicates fear or reluctance to be around a staff member or volunteer
- a participant or other person informs that they have observed abusive acts
- · a participant advises that they feel discriminated against, e.g. language and actions
- · a participant presents as unkempt or seeking food
- there is evidence of unexplained bruising or similar
- an action or inaction is witnessed that may be considered abusive
- when an individual, for any reason, suspects a participant is being abused

Failure to report an abusive situation may constitute a criminal offence and result in prosecution.



#### **HOW TO REPORT**

Senior Management will review the information and if abuse is suspected or confirmed contact the police immediately to inform them of the suspected or confirmed incidence of abuse.

#### **DETAILS TO PROVIDE**

Senior Management will provide the following information to the authorities:

- · participant's name, age, date of birth and address
- description of injury, abuse or neglect. Providing a full history.
- · participant's current circumstances, e.g. accommodation, family support etc
- · location of the participant and alleged perpetrator, if known
- · explanation of when and how abuse was discovered and by whom
- communication needs, including interpreter as appropriate
- · any relevant information as it relates to the person's disability
- advise the participant/family/advocate that sensitive and personal information is required to be made available to the statutory authorities in relation to confirmed or suspected incidences of abuse

#### INVESTIGATING ALLEGATIONS OR INCIDENT

Senior Management undertakes a review of the allegation or incident by:

- · gathering data from relevant person/s
- analysing the situation to determine what occurred, how it occurred, and the parties involved
- determining the effect on the participant/s
- consulting with relevant stakeholders; never seek information from a child or vulnerable person, as this
  requires a specialist; any questioning will be conducted by appropriate authorities once the incident is
  reported
- informing the participant or their family that they may access a support person/advocate of their choice to participate in the investigation process
- · reviewing the processes and aligning to policy
- implementing action to prevent the incident from being repeated



#### SUPPORT THE PARTICIPANT

Reported allegations or incidents require Senior Managers to gather all the relevant information and make a report to the relevant authority such as the Police or via other mandatory reporting process.

Support will be provided to the participant/participant's family or guardian relevant to the allegation or incident.

#### **DOCUMENTATION**

- Record all allegations and incidents in the Incident Register.
- Complete the incident report form as required.
- · All relevant documentation including reports are to be saved in the participant's file.
- · Maintain records as required, in participants' electronic file

### RFI FVANT LEGISLATION AND POLICIES

- Authority to Act as an Advocate Form
- Code of Conduct
- · Incident Register
- Accident Incident Hazard Report Form
- Medication Incident Report
- · Participant file
- Zero Tolerance Policy and Procedure
- Privacy Policy

#### REFERENCES

- NDIS (Incident Management and Reportable Incidents) Rules 2018
- NDIS Quality and Safeguards Practice Standards and Quality Indicators
- The National Framework for Protecting Australia's Children