

Safeguarding Vulnerable Adults Policy

Document number: PO2023-055

Approval

| Policy owner | Executive Director, Governance, Legal and Risk | | |
|---------------|--|-------------|------------|
| Approved by | Executive Leadership Team and State Council | | |
| Date approved | 29.11.2022 | Review date | 25.02.2025 |
| | 25.02.2023 | | |

Purpose

- 1. The St Vincent de Paul Society NSW (the Society) has zero tolerance for behaviours and acts of violence, abuse, neglect, or exploitation of vulnerable adults.
- 2. The policy outlines the Society's processes to prevent and manage incidents involving abuse or harm towards vulnerable adults.

Scope

- 3. The policy applies to all Society Personnel.
- 4. This policy applies to abuse or harm of vulnerable adults (people we assist), 18 years and older.
- 5. This policy applies to the governance, operations, and delivery of the Society's work, including services, programs, and activities with direct and indirect contact with vulnerable adults.
- 6. This policy does not apply to abuse or harm to children and young people. Refer to the Safeguarding Children and Young People Policy for more information.

Related policies and procedures

- 7. Related Policies and procedures include:
 - Behaviour Support Policy
 - Code of Conduct
 - Conflict of Interest Policy
 - Counselling and Disciplinary Policy
 - Dignity of Risk and Duty of Care Policy
 - Feedback and Complaint Handling Policy
 - Home visits and Safe Outreach Policy
 - Incident Management Policy
 - Managing Fraud and Dishonesty Policy
 - Medication Policy
 - Open Disclosure Policy
 - Police Check and Working with Children Check Policy
 - Person-Centred Service Delivery Policy
 - Person we assist charter of rights and responsibilities
 - Personal Belongings and Money Policy
 - Restrictive Practices Policy
 - Safeguarding Children and Young People Policy
 - Trauma-Informed Practice Policy
 - Voluntary Out-of-Home Care Policy

Policy principles

- 8. The Society is committed to:
 - promoting and protecting the human rights of vulnerable adults, particularly those who may be at higher risk of abuse or harm
 - identifying and managing risks to prevent abuse and harm in all our work
 - implementing best practice industry standards and measures to prevent abuse and harm to vulnerable adults through screening of Personnel such as pre-employment checks such as National Criminal History Check, Working with Children Check and NDIS Worker Screening Checks
 - requiring Personnel to uphold the Society's values and expected standards of behaviour, as outlined in the Society's Code of Conduct and other industry Codes as required, e.g. NDIS Code of Conductor Aged Care as applicable
 - respecting the dignity of vulnerable adults while maintaining our duty of care
 - ensuring that vulnerable adults are aware of their rights and responsibilities and how to report concerns regarding abuse or harm of themselves or others
 - applying a person-centred approach and responding sensitively to concerns or incidents of abuse and harm to vulnerable adults
 - implementing relevant training, including Safeguarding Vulnerable Adults, Code of Conduct, and Incident Management training
 - managing incidents appropriately and reporting to external authorities and regulatory bodies, as required.

Identifying harm and abuse of vulnerable adults

- 9. In this policy, abuse or harm towards a person means all forms of physical and mental exploitation, cocoercion or ill-treatment. The abuse or harm may be a singular event, multiple events or a pattern of behaviour that may include but is not limited to:
 - emotional or psychological assault or abuse, or threat
 - neglect, including inaction or lack of response to our duty of care
 - physical assault or abuse, or threat of including NDIS definition of serious injury
 - inappropriate use of restrictive practices. For NDIS and Aged Care Services, unauthorised use of restrictive practice or use of a restrictive practice that is not part of an approved Behaviour Support Plan, refer to Restrictive Practice Policy
 - sexual assault or abuse, or threat of, including sexual criminal offences and serious sexual criminal offences
 - verbal abuse
 - grooming
 - systemic abuse
 - cultural or identity abuse, such as racial, sexual or gender-based discrimination or hate crime
 - coercion, coercive control, exploitation, or undue influence
 - financial abuse
 - failure to access medical care

• abuse of power¹. Refer to the definitions table for further information on the terms listed.

Preventing and reporting abuse of harm

Risk Management

10. The Society will mitigate the risk of abuse or harm towards vulnerable adults by:

- ensuring risk assessment for services and programs involving vulnerable adults are implemented and kept up to date
- ensuring risks registers are implemented and kept up to date in line with the Society's Risk Framework
- equipping Personnel to identify risks and implement appropriate actions
- identifying risks and actions to support continuous improvement
- reducing the use of restrictive practices as identified in the Society's Restrictive Practices Policy.

Reporting

- 11. The Society requires Safeguarding reporting for concerns of abuse or harm towards at-risk, vulnerable adults (person we assist), which include where:
 - A vulnerable adult is:
 - a) a person with a disability or mental health condition
 - b) a person aged 65 years or older or living in a residential aged care service.
 - The abuse or harm:
 - a) is connected with the delivery of the Society's activities, programs, or services occurred at:
 - \circ $\;$ a Society premises, office, retail store, service, program or
 - an off-site work location such as home visitation, community visitation, day outings or
 - b) was perpetrated or alleged to have been perpetrated by a member of the public (including family members or friends), Society Personnel including contractors or another vulnerable adult, an external service provider or
 - c) is related to a vulnerable adult (who meets the above criteria) and is disclosed to Society Personnel but did not occur at a Society premises, office, retail store, service or program.
- 12. The Society will take reasonable steps to ensure that all Society Personnel, vulnerable adults and their identified support network, such as family members, carers, or advocates, have access to information (in plain English and Easy Read format), including:
 - how to report a concern about abuse or harm of a vulnerable adult and
 - how the Society manages Safeguarding reports.
- 13. The Society respects the decision of a vulnerable adult not to report an incident to authorities. However, the Society may be required to disclose incidents if there are concerns for the person's safety or wellbeing or if required by legislation, external regulations, or funding requirements.

¹ Australian Charities and Not-for-profits Commission, Australian Government. Governance Toolkit: Safeguarding Vulnerable People <u>https://www.acnc.gov.au/for-charities/manage-your-charity/governance-hub/governance-toolkit-safeguarding</u>

- 14. The Society will ensure that the vulnerable adults accessing Vinnies Services are provided with access to health care or other services in line with Society policies and legislative responsibilities.
- 15. The Society will not take responsibility for personal fines or legal action against individual personnel for failing to meet legislative reporting requirements.
- 16. The Society will comply with its reporting obligations under legislation, regulation, standards, and codes of practice.
- 17. Individuals reporting suspicions or concerns regarding misconduct, improper state of affairs or wrongdoing involving or resulting in harm or abuse towards a vulnerable adult can make a report under the Whistleblower Policy. An individual who makes a whistleblower report will be provided with support and protection according to the Society's Whistleblower Policy.

Safeguarding vulnerable adult training

- 18. All Society Personnel with direct or indirect contact with vulnerable adults will be required to undertake the following:
 - Safeguarding Vulnerable Adults Induction learning and
 - Safeguarding Vulnerable Adults Refresher course, as required.
- 19. The Society will provide Personnel with training, information, and supervision to implement the Safeguarding Vulnerable Adults Policy. The training will include but is not limited to the following topics:
 - identifying types of abuse and harm and
 - reporting and managing concerns of abuse or harm towards vulnerable adults, including any external reporting responsibilities.
- 20. All NDIS Workers must complete the mandatory NDIS Commission training modules.

Breaches of this Policy

21. Reports regarding breaches of the policy may result in disciplinary action. In addition, illegal activity will be reported to relevant authorities. Refer to the Counselling and Disciplinary Policy for more information.

Further assistance

- 22. For questions regarding a Safeguarding vulnerable adult report or the implementation of this policy, Society Personnel should:
 - speak with their Team Leader, Manager, Supervisor, or President,
 - or contact the Safeguarding team: <u>safeguarding@vinnies.org.au</u> / 1800 4 SUPPORT (1800 478 776).

Roles and responsibilities

| Role | Responsibilities |
|---------------|---|
| NSW Board and | Ensuring the Society complies with legislative requirements under the Aged Care Quality |
| State Council | Standards and Aged Care Act 1997 (Cth), National Disability Insurance Scheme (NDIS) |
| | Act 2013 and associated Rules 2018 and the Crimes Act 1990. |
| | |

| Role | Responsibilities |
|---|---|
| Governance, Risk | Overseeing Society-wide risks and incidents and providing recommendations to the |
| and Nominations | Board |
| Committee | Assessing and mitigating risks to prevent abuse and harm in the delivery of the Society's work. |
| CEO | Ensuring policies and procedures for safeguarding vulnerable adults are reviewed regularly |
| | Overseeing Society-wide risks and incidents to prevent abuse or harm in the delivery of the Society's work |
| | Overseeing and managing critical incidents |
| | Ensuring the implementation and monitoring of the Safeguarding Vulnerable Adults Policy and providing reports to the Board and State Council, as required |
| | Ensuring the Society complies with legislative requirements and fulfils external regulatory and funding bodies reporting obligations. |
| Executive Directors | Ensuring appropriate risk mitigation strategies are documented and implemented to prevent abuse and harm in their directorate |
| | Ensuring this Policy is communicated and embedded within their directorate |
| | Overseeing Safeguarding Vulnerable Adult reporting within their directorate |
| | Approving and overseeing investigations within their directorate |
| | Ensuring external reporting as required. |
| Executive Director, Vinnies Services | Overseeing Reportable Incidents for the Society's NDIS services. Act as the Authorised Reportable Incidents Approver to the NDIS Quality and Safeguards Commission, Aged Care and Quality Commission, and Australian Health Practitioner Regulation Agency (AHPRA). |
| Executive Director, | Reporting to the Society's Board, State Council, and Governance, Risk and Nominations |
| People, Culture and | Committee regarding risk and incidents |
| Strategy | Approving engagement of an external investigator, as required. |
| Conference Presidents | Ensure members adhere to the Safeguarding Vulnerable Adults Policy and report all concerns about vulnerable adults Notify the Regional Director about reports within their area of responsibility Ensure members participate in training and are aware of the procedures for reporting |
| | concerns through induction, general information, and training. |
| Directors and Regional Directors | Embedding the policy within their area of responsibility Ensuring risks mitigation strategies are documented and implemented to prevent abuse and harm in the delivery of the Society's work, including Business Continuity Plans Ensuring Personnel receive training, supervision, and support to implement this Policy Overseeing and escalating Safeguarding Vulnerable Adult reports within their area of responsibility, according to the Safeguarding Vulnerable Adult policy Implementing recommendations from the Executive Director, the Safeguarding team or the relevant Committee |

| Role | Responsibilities | | |
|--|--|--|--|
| | Ensure that internal and external reporting, regulatory and funding reporting requirements are met for their area of responsibility. | | |
| Directors, Vinnies Services | Acting as an Authorised Reportable Incidents Approver to the NDIS Quality and Safeguards Commission, Aged Care and Quality Commission, Australian Health Practitioner Regulation Agency (AHPRA), NSW Ageing and Disability Commission, Department of Communities and Justice, NSW Ombudsmen's Office for their area of responsibility. | | |
| Managers, Team Leaders, or Presidents | Implementing this Policy within their area of responsibility Assessing and managing risks to prevent abuse and harm in the delivery of the Society's work Ensuring Personnel participate in training and have supervision and support to implement this Policy Ensuring Safeguarding Vulnerable Adult reports are appropriately reported, managed, and recorded within the Society's Integrated Risk Management System. | | |
| People and Culture team | Working with the Safeguarding team and local Managers to address allegations of abuse or harm from Personnel to vulnerable adults Ensure Personnel have current background checks and screening appropriate for their role. | | |
| Senior Managers, Vinnies Services (as delegated) | Acting as the Authorised Reportable Incident Notifier for the NDIS Quality and Safeguards Commission, Aged Care and Quality Commission, Australian Health Practitioner Regulation Agency (AHPRA), NSW Aging and Disability Commission and NSW Ombudsmen's Office for their area of responsibility. | | |
| Society Personnel | Fostering a culture that upholds the principles and procedures of Safeguarding Vulnerable Adult Understanding this Policy and seeking advice or support on how to implement it Participating in Safeguarding induction and refresher training as required Implementing risk mitigation strategies to prevent harm and abuse in the delivery of the Society's work Reporting all incidents or concerns of abuse or harm to vulnerable adults Treat all reports as serious and confidential Ensure any breaches of the policy or concerns regarding Personnel conduct are reported to the Central Council President and Director or Regional Director immediately. | | |
| Safeguarding team | Providing advice and guidance to directorates regarding Safeguarding risk management Maintaining Safeguarding Register for Safeguarding Notification Forms and relevant documentation within the Society's Integrated Risk Management System Overseeing Safeguarding reporting, investigations related to Safeguarding vulnerable adults, identifying systemic issues and opportunities for continuous improvement Reporting on Safeguarding Vulnerable Adults incidents to the Chief Executive Officer, State Council and Board as required | | |

| Role | Responsibilities | |
|------|---|--|
| | Providing oversight and direction on all Safeguarding vulnerable adult incidents, | |
| | including statutory responses, investigations, and incident reviews. | |

Review

This policy and its implementation will be reviewed every three years or on a needs basis as required to align with legislative or practice changes.

References

50. List all relevant legislation, regulations, or other instruments implemented by this Policy:

- Australian Health Practitioner Regulation Agency (AHPRA)
- Aged Care Quality Standard
- Aged Care Act 1997 Cth
- Ageing and Disability Commissioner Act 2019
- Boarding Houses Regulation 2013 and Boarding House Regulation Act 2012
- National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018
- National Disability Insurance Scheme Legislation Amendment (Transitioning Aged Care Providers) Rules 2020
- National Disability Insurance Scheme Act 2013:
 - a) National Disability Insurance Scheme (Code of Conduct) Rules 2018
 - b) National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018
 - c) National Disability Insurance Scheme (Practice Standards Worker Screening) Rules 2018
 - d) National Disability Insurance Scheme (Provider Registration and Practice Standards) Rules 2018
- NSW Elder Abuse Toolkit 2016
- NSW Government Community and Justice Capacity Toolkit
- NSW Health Identifying and responding to abuse of older people
- NSW Ombudsmen's Act 1974
- QIC Health and Community Service Standards
- NSW Health AOD Clinical Care Standards
- RACGP Standards for general practices (4th edition)
- United Nations Declaration of Human Rights
- United Nations Convention on the Rights of Persons with Disabilities.

Approval and amendment history

| Version | Approval authority | Date | Amendment summary |
|---------|---------------------------|------------|-------------------|
| Doc #1 | Executive Leadership Team | 29.11.2022 | New policy |
| | State Council | 25.02.2023 | |

Appendix 1: Definitions

51. Relevant definitions include:

| Term | Definition |
|---|---|
| Allegation | An allegation against any Society Personnel or other vulnerable adults involves behaviours that may need to be reported to Police or external authorities or an investigation to determine any action required. |
| Authorised Reportable Incidents Approver | NDIS Commission: 'Authorised Reportable Incidents Approver ' is the person you want to have the authority to review and be responsible for submission to the NDIS Commission. This could be the person specified in your incident management system responsible for reporting incidents to the NDIS Commission. The authorised 'Approver' will have the ability to submit new Reportable Incidents and view previous Reportable Incidents submitted by their organisation. Within the Society, the Executive Director, Vinnies Services and Directors of Vinnies Services are the Society's Authorised Reportable Incident Approvers. |
| Authorised Reportable Incidents Notifier | NDIS Commission: 'Authorised Reportable Incidents Notifier' is a supporting team member who can assist the 'Authorised Reportable Incidents Approver' in collating and reporting the required information. The authorised 'Notifier' will have the ability to create new Reportable Incident notifications to be saved as a draft for review and submission by the authorised 'Approver'. The authorised 'Notifier' will need to inform the authorised 'Approver' that the incident is awaiting their review and submission. The 'Notifier' can also view past Reportable Incidents they have created through the page. Within the Society, Vinnies Services, Senior Managers (as delegated) are the Society's Authorised Reportable Incidents Notifiers. |
| Behaviour Support | Behaviour support is creating individualised strategies responsive to the person's needs to reduce the occurrence and impact of behaviours of concern and minimise the use of restrictive practices. |
| Capacity | A person must be presumed to be able to provide consent unless determined otherwise. A person may have the capacity if they can: understand the facts involved in the decision, understand the choices that exist, weigh up the consequences of each choice, understand how the consequence will affect them and communicate their decision. Refer to the NSW Government Community and Justice Capacity Toolkit for further guidance for more information. https://www.justice.nsw.gov.au/diversityservices/Pages/divserv/ds_capacity_tool/ds_capacity_tool_l.aspx |
| Coercive control | "Coercive control in Domestic and Family Violence contexts describes patterns of abusive behaviour designed to exercise domination and control over the other party to a relationship. It is often a process that happens slowly over time and can be nuanced in nature, making it difficult to identify. It can include a range of abusive behaviours – physical, psychological, emotional or financial – the cumulative effect of which over time robs victim-survivors of their autonomy and independence as an individual." NSW Government Coercive Control Discussion paper 2020 p.7 http://www.crimeprevention.nsw.gov.au/domesticviolence/Documents/domestic-violence/discussion-paper-coercive-control.pdf |
| Coercion | Coercion is the act or process of forcefully persuading someone to do something they do not want to do. |
| Disclosures | Where a vulnerable adult or another person discloses or indicates that a vulnerable adult may be at risk of harm. |
| Dignity of Risk | Dignity of risk means "the right of the individual to choose to take some risk in engaging in life experiences". National Disability Insurance Scheme (Quality Indicators) Guidelines 2018 |

| Term | Definition |
|-----------------------------|--|
| Duty of Care | The Society's legal obligation is to protect vulnerable adults from all reasonably foreseeable risks of injury. |
| Exploitation | Exploitation is treating someone unfairly or taking advantage of someone or a group of people to profit or benefit from them. This may include sexual or financial exploitation, domestic servitude, and human trafficking. |
| Financial abuse | The illegal or improper use or management of a person's money, property, or other financial resources from that person, including withholding finances from that person, misleading or coercing a person as to how the funds or property will be used. |
| Grooming | A series of behaviours and actions designed to prepare a vulnerable adult for abuse or exploitation. This may include acts of manipulating others (parents, carers, co-workers) and situations to gain and maintain access to the victim/s. |
| | Grooming is a process that can be difficult to recognise or distinguish from seemingly innocent or everyday actions. It has two core elements: building a trusting or special relationship with the vulnerable adult and his/her/their support network, including parents, guardians or carers isolating the vulnerable adult in abusing them. There is no one set of actions or behaviours used to groom a vulnerable adult or those around them. |
| Harm | To damage or injure physically or mentally. |
| Manager | A Society employee is responsible for the supervision of particular Society Personnel. |
| NDIS Reportable Incident | Registered NDIS providers must notify the NDIS Commission of all reportable incidents (including allegations). Reportable incidents are serious incidents or alleged incidents which result in harm to an NDIS participant and occur in connection with NDIS support and services. Specific types of reportable incidents include: The death of a person with a disability Serious injury of a person with a disability Abuse or neglect of a person with a disability Unlawful sexual or physical contact with, or assault of, a person with a disability (excluding, in the case of unlawful physical assault, contact with, and impact on, the person that is negligible) Sexual misconduct is committed against, or in the presence of, a person with a disability, including grooming of the person for sexual activity. The use of restrictive practice in relation to a person with a disability, other than where the use is in accordance with an authorisation (however described) of a State or Territory in relation to the person or a behaviour support plan for the person. |

| Term | Definition |
|---|--|
| NDIS Serious injury of a person with a disability | The serious injury of a person with a disability must be notified to the NDIS Commission if it occurs or is alleged to have occurred in connection with the provision of NDIS supports and services. In determining whether an injury is 'serious', consideration should be given to the level of harm caused. A serious injury includes, but is not limited to: fractures burns deep cuts |
| | extensive bruising, including large individual bruises or a number of small bruises over the impacted person head or brain injuries which might be indicated by concussion or loss of consciousness any other injury requiring hospitalisation If a person with a disability is hospitalised in relation to a serious injury, the incident should be classified as reportable. There will be instances in which a person with a disability is hospitalised for reasons unrelated to serious injury, these instances are not reportable incidents. Hospitalisation includes a person with a disability's presentation or admission to an emergency or other ward within a hospital facility, including short-stay admissions if they are related to the injury acquired. Refer to the NDIS Reportable Incident Guidance 2019 for more information. |
| Neglect | The failure of a person within the community or the Society to provide the person with the necessities of life — such as adequate food, shelter, clothing, and medical, or dental care — or to prevent others from providing them. It can also include failing to take reasonable actions to assist the person in accessing necessary support. Neglect can be intentional or passive. |
| Pattern of abuse | Patterns of abuse may involve repeated behaviour towards a vulnerable adult, which may not meet the threshold for reporting or appear to be abuse or harm in isolation. For example, the pattern of abuse may be repetitive, or the abuse targeting different vulnerable adults over time or simultaneously. |
| Personnel | Any person (or group of people) engaged by the Society to assist in its works. This includes members, volunteers, employees, student placement, contractors, and consultants. This policy document does not distinguish between the roles and responsibilities of paid and unpaid Personnel unless specifically prescribed by relevant legislation. |
| Physical abuse | Intentionally inflicting physical pain or injury or physical coercion. Includes all forms of physical assault, including physical or chemical restraint. |
| Psychological and emotional abuse | Psychological or emotional abuse – verbal or non-verbal acts that cause significant emotional or psychological anguish, pain, or distress, including verbal taunts, threats of maltreatment, harassment, humiliation or intimidation, or a failure to interact with the vulnerable adult or acknowledge their presence. |
| People we assist | People receiving Society services, whether those services are financial or non-financial, and whether those services are delivered in the person's home, a formal setting or elsewhere. |
| Restrictive Practice | Any practice or intervention that restricts the rights or freedom of movement of a person. Refer to the Restrictive Practices Policy for more information. |
| Safeguarding | Actions, policies, and procedures that create and maintain protective environments for children, young people or vulnerable adults including to protect them from exploitation and abuse of all kinds. |

| Term | Definition | |
|---|--|--|
| Sexual abuse | Unwanted sexual acts include sexual contact, rape, language, or exploitative behaviours where the person's consent has not been obtained, where consent has been obtained through coercion, or where the person is unable to consent due to cognitive incapacity. | |
| Serious Incident Response Scheme (SIRS) | Quality and Safety Commission. | |
| Systemic abuse | A failure to recognise, provide or attempt to provide adequate or appropriate services, including services that are appropriate to the person's age, gender, culture, disability support needs or preferences, has a significant physical, emotional, or psychological impact on the person. Refer to the NDIS Reportable Incident Guidance 2019 for more information. | |
| Undue influence | Undue Influence 'Undue influence' occurs where an adult at risk, though capable of understanding what is being done to them or on their behalf, feels vulnerable or dependent upon another person who threatens to withdraw essential support, or to harm them or another person should they do or not do something. Many instances of financial abuse contain elements of 'undue influence', and in such situations, the adult at risk may be influenced by a fear of the disapproval or anger of the person upon whom they have become dependent. The adult at risk may understand the implications of their compliance with the exploitative plans of the person they depend upon, but their fear overrides their understanding or their willingness/capacity to take any action (NSW Interagency Policy 2014). <i>NSW Government Health Sydney Local Health</i> <i>District SLHD Policy to Safeguarding Adults at Risk from Abuse</i> <u>https://www.slhd.nsw.gov.au/pdfs/Policies/SLHD_PD2015_024.pdf</u> | |
| Vulnerable adults | The Society recognises that people we assist are experiencing situation which may increase their vulnerability to abuse or harm. The Society considers all people we assist to be vulnerable adults. For this policy: Vulnerable Adult refer to "an individual aged 18 years and above who is or may be unable to take care of themselves or is unable to protect themselves against harm or exploitation by reason of age, illness, trauma or disability, or any other reason". 2 Vulnerable adults at higher risk include: A person with a disability or mental health condition A person over the 65 years or older or living in a residential aged care service. | |

² Australian Government Department of Social Services <u>https://www.dss.gov.au/about-the-department/doing-business-</u> with-dss/vulnerable-persons-police-checks-and-criminal-offences#5

Procedures

Managing the risk of abuse or harm

- 1. The Society will mitigate the risk of abuse or harm towards vulnerable adults by:
 - ensuring risk assessment for services and programs involving vulnerable adults are implemented and kept up to date
 - ensuring risks registers are implemented and kept up to date
 - equipping Personnel to identify risks and implement appropriate actions
 - identifying risks and actions to support continuous improvement
 - reducing the use of restrictive practices as outlined in the Society's Restrictive Practices Policy as identified in the Restrictive Practices Policy.
- 2. Personnel must:
 - take reasonable steps to manage the risk of abuse or harm in their work with the Society, including implementing the relevant Risk Registers and risk assessments
 - report any new risks to their Manager, Team Leader, Supervisor or President.
- 3. Managers must manage the risk of abuse and harm by:
 - ensuring risk assessment for services and programs involving vulnerable adults are documented in Microsoft team, or SCIS implemented and kept up to date
 - ensuring risks registers are documented in the Society's Integrated Risk Management System, implemented, and kept up to date in line with the Society's Risk Framework
 - equipping Personnel to identify risks and implement appropriate actions
 - identifying risks and actions to support continuous improvement
 - ensure the Business Continuity Plans for Critical or Major Incidents, including disasters and emergencies, are implemented.
- 4. Executive Directors and Directors must reduce the risk of abuse or harm by:
 - ensuring risk registers and assessments are documented and implemented
 - ensuring the Business Continuity Plans for Critical or Major Incidents, including disasters and emergencies, are implemented, tested, reviewed, and kept up to date.
- 5. NDIS Services must also:
 - ensure incident management, risk management, service delivery and reporting are delivered in line with the National Disability Insurance Scheme (Code of Conduct) Rules 2018, National Disability Insurance Scheme (Provider Registration and Practice Standards) Rules 2018, and the National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018
 - encourage NDIS participants to exercise choice and control with their NDIS plans, including ensuring participants are provided with the choice regarding the rotation of employees. If the person requests support from one employee, a risk assessment must be conducted, and the arrangement must be recorded in their service agreement, and the vulnerable adults SCIS or Microsoft Teams file
 - disclose any conflict of interest in line with the Society's Conflict of Interest Policy
 - comply with any NDIS compliance notices, requests, or audit requirements

- deliver personal activities and health care support in line with the National Disability Insurance Scheme (Provider Registration and Practice Standards) Rules 2018 and relevant Society policies, including but not limited to the Tracheostomy Policy, Enteral Feeding Policy and Medications Policy.
- 6. The Society is committed to reducing and eliminating the use of restrictive practices. However, if a restrictive practice is required, the employee must implement the procedures outlined in the Society's Behaviour Support Policy, Restrictive Practices Policy, and Medication Policy.

Images, videos and stories of vulnerable adults

- 7. If the vulnerable adult does not have the capacity, the person's identified guardian, carer, advocate, or support network must be contacted. Refer to the NSW Government Community and Justice Capacity Toolkit for further guidance for more information.³
- 8. When using the images, videos, or stories of vulnerable adults, Personnel must:
 - portray vulnerable adults in a respectful and appropriate way
 - obtain consent from the vulnerable adult
 - if the person does not have the capacity to provide consent, their identified guardian must be asked to provide consent prior to using a person's story, image or personal information for promotion, fundraising or educational purposes, for therapy or funding purposes
 - ensure that when requesting consent, information is provided:
 - \circ on how, where and for how long the story, information or image will be used
 - reminding the person that anyone with internet access could view images, videos or stories that are uploaded to the internet at anytime
 - not disclose any identifiable personal information about the vulnerable adult
 - ensure the images and related information are stored safely and only accessed by authorised Personnel.

Responding to and reporting concerns about vulnerable adults.

Internal reporting

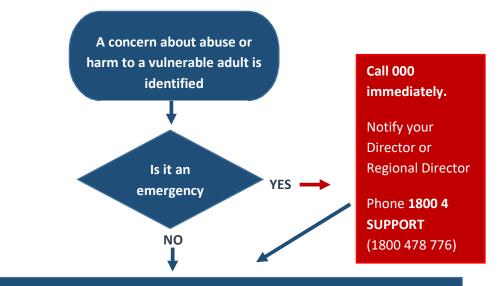
- 9. Abuse or harm of a vulnerable adult may be:
 - observed by or disclosed to Society Personnel
 - observed by or disclosed to a vulnerable adult, family or carer, guardian, or member of the community
 - observed by or disclosed by a vulnerable adult themselves or another vulnerable adult.
- 10. For information regarding the signs and symptoms of abuse or harm, please refer to the resources listed:
 - Ageing and Disability Commission website https://www.ageingdisabilitycommission.nsw.gov.au/tools-and-resources/for-the-community/whatis-abuse-and-neglect/chapters/psychological-abuse

³ NSW Government Community and Justice Capacity Toolkit <u>https://www.justice.nsw.gov.au/diversityservices/Pages/divserv/ds_capacity_tool/ds_capacity_tool.aspx</u>

- Ageing and Disability Commission resource- Signs and symptoms of abuse and neglect https://www.ageingdisabilitycommission.nsw.gov.au/__data/assets/pdf_file/0004/677245/Abusesigns-and-symptoms.pdf
- 11. Team Leaders, Managers and Supervisors must ensure vulnerable adults and their identified support network have access to information in a format accessible to them on:
 - how to make a safeguarding report or a complaint
 - the Society's process for managing reports of abuse or harm
 - for NDIS services, how to access support from an independent advocate for support where allegations of abuse or harm have been made.
- 12. Members must:
 - report the Safeguarding reports to their Conference President as soon as possible and no later than the end of the day/shift
 - complete the Safeguarding Notification Form either:
 - the digital Safeguarding Notification Form or
 - the manual Safeguarding Notification Form before the end of the day/shift, and email safeguarding@vinnies.org.au or call 1800 478 776.
- 13. Conference Presidents must:
 - report Safeguarding reports to their Regional Director.
- 14. Employees and volunteers must:
 - report the incident to their Team Leader, Manager or Supervisor and Safeguarding team as soon as possible and no later than the end of the day/shift
 - complete the Safeguarding Notification Form either:
 - the digital Safeguarding Notification Form or
 - the manual Safeguarding Notification Form before the end of the day/shift, and email safeguarding@vinnies.org.au
 - ensure that an Incident Report Form is completed with a Safeguarding Notification Form attached (where the incident is connected to the Society's work).
- 15. Team Leaders, Managers, or Supervisors must:
 - manage Safeguarding vulnerable adult reports according to the Safeguarding Vulnerable Adults Policy and other relevant policies
 - record all information within the Society's Integrated Risk Management System
 - review and close incidents according to their level of responsibility, refer to Incident Management Policy for more information
 - encourage persons involved in or who have witnessed a distressing incident to participate in an internal debrief, pastoral support or counselling as appropriate for their engagement with the Society. Refer to the Society's Incident Management Policy for more information.
- 16. Following a report of abuse or harm, Personnel must:
 - protect the vulnerable adult from further harm, and continue to respond to the needs of the vulnerable adult

- assess the risk of the situation, including the immediate risk, the safety and wellbeing of the alleged victim, other vulnerable adults, the involved employee, volunteer, or member, the reputation of the Society, and the integrity of the investigation
- provide ongoing support and assistance
- discuss with the Safeguarding team regarding additional actions.
- 17. Vinnies Services employees and volunteers must manage, and report incidents and near-miss events related to the provision of health care, medical treatment, and medication in line with the Society's Incident Management Policy and Medication Policy.
- 18. The Safeguarding team must provide the CEO with a six-monthly report on any concerns of violence, abuse, and neglect, who will provide an update to the Board of Directors and State Council.

Flow Chart 1: Managing concerns of abuse or harm towards a Vulnerable Adult

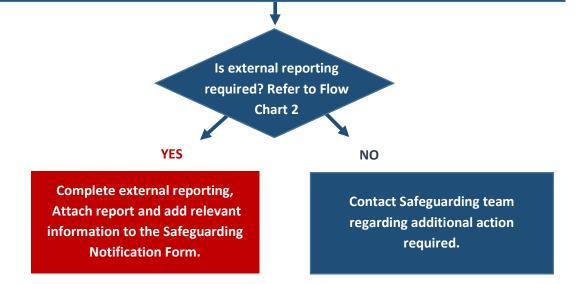


Report to:

- Members report to your Conference President. Conference President must report all Safeguarding reports to your Regional Director
- Employees and volunteers report to your Team Leader, Manager or Supervisor.

Complete:

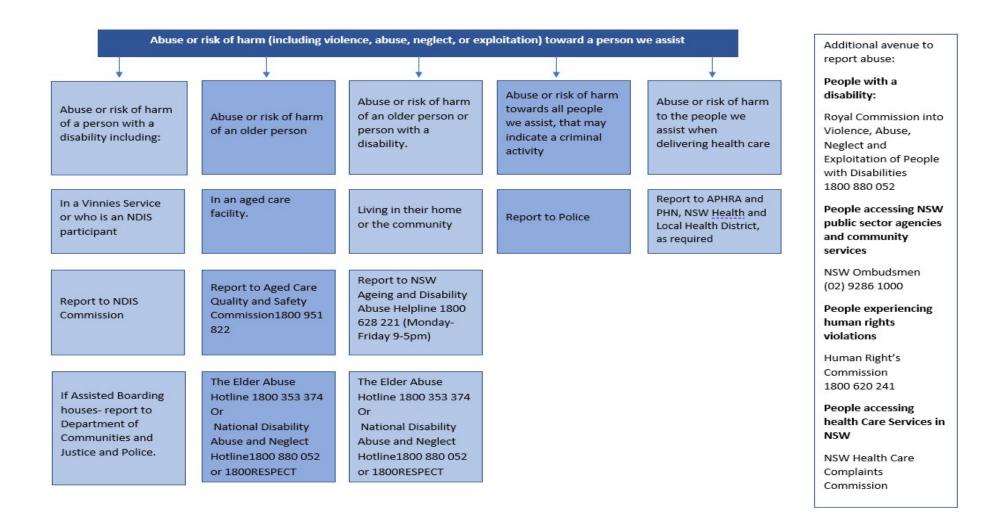
- Complete the online Safeguarding Notification Form no later than the end of the day/shift
- If the Safeguarding report involves an incident connected to the Society's work, you must ensure an Incident Report Form is completed with a Safeguarding Notification Form attached
- If you require assistance or the matter is urgent contact Safeguarding team 1800 4 SUPPORT (1800 478 776) or <u>safeguarding@vinnies.org.au</u>



External reporting

- 19. The Society presumes that all people over 18 years of age have the capacity to determine if they would like to report the abuse or harm to Police, unless determined otherwise. The Society may decide or be required to report an incident to an external authority for the welfare or wellbeing of the person as required under legislation or external regulations.
- 20. All Personnel retain the right to report any concern for the safety or wellbeing of a vulnerable adult, regardless of whether or not they have already reported the concern internally. Refer to the *Flow Chart 1: External reporting authority for abuse or risk of harm towards a vulnerable adult* for more information
- 21. Society Personnel with responsibilities for external reporting must report the incident to the relevant external authority or funding body. For more information, refer to *Attachment C External Reporting Overview in the Incident Management Policy.*
- 22. The Director, Regional Director, or Executive Director must report the incident to regulatory bodies or authorities within the required timeframes. *Refer to Incident Management Policy Attachment C External Reporting Overview for further information.*
- 23. Employees and volunteers working in the Society's NDIS Services must ensure:
 - manage incidents and risks according to; National Disability Insurance Scheme (Provider Registration and Practice Standards) Rules 2018, National Disability Insurance Scheme (Code of Conduct) Rules 2018, the National Disability Insurance Scheme: Incident Management and Reportable Incidents Rules 2018, NDIS Reportable Incident: Detailed Guidance for Registered NDIS Providers June 2019 and NDIS Incident Management System Guidance.
- 24. Under <u>National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules</u> <u>2018</u>, if a Reportable Incident occurs or is alleged to have occurred in an NDIS services, employees must follow the steps outlined in Appendix 4: Responding to Reportable Incidents in an NDIS Service.
- 25. Aged Care Services must also:
 - manage and reports incidents in line with Aged Care Legislation, Serious Incident Response Scheme and Aged Care Quality Standards and National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018
 - ensure that if a vulnerable adult is also an NDIS participant, the incident is reported to the NDIS Quality and Safeguards Commission
 - ensure the management of incidents complies with the relevant policies, including but not limited to, Open Disclosure Policy and Medication Policy.
- 26. The Manager, Director or Executive Director is responsible for ensuring all concerns of abuse or harm that indicate criminal activity is reported to the Police as soon as possible after Personnel report that a crime may have been committed.
- 27. The Safeguarding team oversees all Safeguarding matters and supports external reporting, as required. In addition, the Safeguarding team will review and close all Safeguarding notification forms.

Flow Chart 2: External reporting authority for abuse or risk of harm towards a vulnerable adult (18 years and older)



Investigations

- 28. For incidents that involve misconduct, fraud or allegations of abuse or neglect from Personnel towards vulnerable adults, the Director or Regional Director must:
 - escalate the report to their Executive Director
 - seek advice from their Executive Director and People and Culture Partner regarding the removal, temporary redeployment, or relocation of the person against whom an allegation has been made while a risk assessment is completed
 - manage the allegation according to the Safeguarding Vulnerable Adults Policy and Incident Management Policy.
- 29. The Executive Director must notify the CEO immediately of any allegations of abuse of harm by Personnel towards a vulnerable adult.
- 30. Where the subject of the investigation is:
 - a member, the Central Council President, will be informed
 - a Central Council President, the State Council President, will be informed
 - a State Council President, the National Council President, will be informed
 - an Executive Director or Chief Financial Officer, the Chief Executive Officer, will be informed
 - the CEO, the Board Chair will be informed.
- 31. In the event of allegations against Society Personnel, the Team Leader or Manager must implement the procedures in: Appendix 3: Responding to allegations against Personnel procedures.
- 32. The relevant Executive Director, in consultation with the Executive Director, People and Culture, will approve an enquiry, investigations and assign the investigator and any access to information related to an incident involving vulnerable adults, according to the Society's Incident Management Policy.
- 33. A risk assessment must be completed to consider the risk the alleged perpetrator poses to:
 - the person who is the alleged victim or person impacted (considering the vulnerability of the vulnerable adult, for example, a person with a disability)
 - other vulnerable adults
 - themselves
 - the organisation
 - the investigation process (considering the risk once an allegation is made, during an investigation and at the end of the investigation).
- 34. The Society must investigate allegations of a reportable incident or allegations of misconduct that may involve a reportable incident against its members, volunteers, and employees in NDIS Services, in compliance with the National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018. Refer to Attachment 3- Responding to Reportable Incidents for NDIS participants.

Confidentiality

35. The Society respects and protects the privacy and confidentiality of all parties. Information regarding the incident must only be shared on a need-to-know basis for the purpose of legal compliance, seeking professional advice or as required by external bodies or authorities or by law under the Society's Privacy Policy.

36. Directors and Regional Directors must review the Safeguarding Register for their area of responsibility every three months to identify and address any systemic issues, trends and actions that could prevent the incident from recurring.

Record keeping

- 37. Personnel must ensure records related to vulnerable adults (18 years and older) are:
 - kept for a minimum of seven years from the date of their last contact with the Society, as noted in the vulnerable adult's file
 - managed according to the Society's Records Management Policy, Records Retention Schedule, and Privacy Policy.
- 38. All Safeguarding Notification Forms, investigations and related information must be stored and managed within the Society's Integrated Risk Management System. Any confidential records related to Personnel disciplinary action records must be stored in the People and Culture Personnel file in Microsoft Teams.

Attachments list

- Flow Chart 2: External reporting authority for abuse or risk of harm towards a vulnerable adult (18 years and older)
- Appendix 2: Responding to allegations against a vulnerable adult (18 years and older) in our services Protocol.
- Appendix 3: Responding to allegations against Personnel Protocol.
- Appendix 4: Responding to Reportable Incidents in an NDIS Service Protocol.

Appendix 2: Responding to allegations against a vulnerable adult (18 years and older) Protocol.

For any allegation against Society Personnel, the procedures outlined in Appendix 3 must be followed.

This procedure must be used for allegations of abuse or harm from other vulnerable adults towards another vulnerable adult engaged in a Society program or service.

Once a Safeguarding Notification form involves an allegation against a member of the public or a vulnerable adult, the following steps should be taken:

- 1. Address support needs of the vulnerable adult and the person suspected of abuse or causing harm.
- 2. Clarify the allegation exactly what has been alleged. Who, what, when, where, etc.? Do not commence investigation at this time. Focus on clarifying the key elements of the allegation.
- 3. The Team Leader, Manager or Supervisor notify the relevant Director or Regional Director and, as required, the Executive Director.
- 4. Notify the Safeguarding team as soon as possible after the report is received, regardless of whether they meet external reporting requirements, including NDIS or Aged Care reporting thresholds.
- 5. Employees with reporting responsibilities must report all concerns of abuse or harm towards vulnerable adults to the NDIS Quality and Safeguards Commission and Aged Care Quality and Safety Commission within timeframe required by legislation timeframes, as applicable.
- 6. The Director, Regional Director or Executive Director is responsible for ensuring:
 - all concerns of abuse or harm that indicate criminal activity are reported to the Police as soon as possible after Personnel become aware that a crime may have been committed
 - external reporting is completed within the required timeframes.
- 7. Conduct a risk assessment which considers and documents the risk to the safety and wellbeing of the vulnerable adult, including the alleged victim, the alleged perpetrator, staff, other vulnerable adults, and the organisation. Contact the Safeguarding team for the Risk Template.
- 8. Where Police involvement is required, the Society must await the outcome of the Police investigation before the Society conducts any further enquiries or investigations.
- 9. If the allegation involves a vulnerable adult in an NDIS service, see Appendix 2 or Appendix 4 as appropriate.
- 10. Consider who needs to be notified about the allegation and what to tell others who are not involved but aware (e.g., family, guardian or employees). Remind all parties of the sensitivity of the situation and confidentiality requirements.
- 11. Any allegations that do not meet the external reporting threshold, NDIS or Aged Care Commission, e.g., must be assessed to determine further action.
- 12. If applicable, after the completion of the preceding stages, the matter will be reported by the Society to relevant statutory authorities, including NDIS Quality & Safeguards Commission, with timeframes required by legislation.
- 13. The Safeguarding Notification form will be recorded in the Society's Integrated Risk Management System and overseen by the Safeguarding Team.

Appendix 3: Responding to allegations against Society Personnel Procedure

This procedure must be used for allegations of misconduct, abuse, or failure to comply with mandatory reporting obligations from Society Personnel towards a vulnerable adults engaged in Society programs, service or activities.

If the allegation involves a vulnerable adult in an NDIS service, additional reporting obligations are outlined in Appendix 4.

- 1. The Manager, Director or Executive Director is responsible for ensuring all concerns of abuse or harm that indicate criminal activity is reported to the Police as soon as possible after Personnel report the incident.
- 2. Where a Police investigation is required, the Society must await the outcome of the Police investigation before the Society conducts an internal investigation of an allegation.
- 3. The CEO (Head of Agency) must be notified immediately of allegations of abuse or harm from Personnel towards a vulnerable adult.
- 4. The Safeguarding team must oversee allegations of misconduct involving abuse or harm by Personnel against vulnerable adults. The Safeguarding team must be advised immediately after an allegation is made.
- 5. The Manager must:
 - complete a risk assessment
 - contact the Safeguarding team for the risk assessment template
 - complete the risk assessment, which considers and documents the risk to the safety and wellbeing of the alleged victim, other children/young people/ vulnerable adults, the involved employee, member, volunteer and the reputation of Vinnies and the integrity of the investigation
 - send the risk assessment to the Safeguarding team and their Manager.
- 6. The risk assessment must consider the risk the person involved in the investigation poses to:
 - the person who is the alleged victim or person impacted (considering the vulnerability of the person impacted, for example, if they are a child or a young person or a person with a disability)
 - other vulnerable adults
 - themselves
 - the organisation
 - the investigation process (considering the risk once an allegation is made, during an investigation and at the end of the investigation).
- 7. While the primary concern of the Society at all times is the safety and care of the vulnerable adult. Society Personnel must take all reasonable steps to adhere to the principles of procedural fairness and natural justice so that the privacy and dignity of all involved may be considered and maintained. Personnel will always ensure that any concerns regarding the safety and wellbeing of vulnerable adults are reported where required.
- 8. Allegations or incidents that involve abuse or harm will be investigated as required.
- 9. Where the subject of the investigation is:
 - a member, the Central Council President, will be informed
 - a Central Council President, the State Council President, will be informed
 - a State Council President, the National Council President, will be informed
 - an Executive Director or Chief Financial Officer, the Chief Executive Officer, will be informed

- the CEO, the Board Chair will be informed.
- 10. If the allegation is serious, or involves significant reputational risk for the organisation, an investigation should be undertaken by an external investigator. An External Investigation must be approved by the Executive Director, People and Culture.
- 11. If in conflict, the relevant legislative requirements shall supersede any Society policy requirement.
- 12. For incidents that involve misconduct, fraud, or allegations of abuse or neglect, the Director or Regional Director must follow the process outlined in the Managing Fraud and Dishonest Behaviour Policy.
- 13. The Executive Director in consultation with the Safeguarding team will determine if the claim is vexatious in nature. If the report is vexatious the relevant parties will be informed and the matter will be closed.

Stages in the conduct of an investigation of an allegation of abuse, harm, or

misconduct by Personnel towards vulnerable adults

14. The staged response by the Society to allegations of abuse, harm or misconduct by Personnel towards a vulnerable adult. There are five stages in a proper response to allegations of abuse, harm or misconduct by Personnel.

Stage One: Initial Response to an allegation

- 15. The following steps must be taken as part of the Society's initial response to any allegation towards Personnel:
 - clarify the allegation exactly what has been alleged. Who, what, when, where etc.? Do not commence investigation at this time. Focus on clarifying the key elements of the allegation.
- 16. The Team Leader, Manager, or Supervisor must also:
 - ensure reports are documented and escalated appropriately
 - assess whether external reporting is required for concerns related to vulnerable adults, refer to:
 - safeguarding Vulnerable Adult, Flow Chart 2: External reporting authority for abuse or risk of harm towards a vulnerable adult and Incident Management Policy- Attachment C External Reporting Overview
 - discuss with the Director or Executive Director whether or not the allegation may constitute a criminal offence and if so, make a report to the Police before taking further action (seek advice from Police as to what the Society can and cannot do)
 - any allegations that do not meet the external reporting threshold must be assessed to determine if they constitute a breach of Society's policy or Code of Conduct
 - all allegations, regardless of whether they meet the external reporting threshold, must be reported to the Safeguarding team and to the CEO
 - consider who else needs to be notified about the allegation and what to tell others who are not involved but aware (e.g., parents/ guardians, other employees). Remind all parties of the sensitivity of the situation and confidentiality requirements
 - address the support needs of the person impacted and the person who is the subject of the allegation.
- 17. The Safeguarding Notification form will be recorded in the Society's Integrated Risk Management System and overseen by the Safeguarding Team.

Stage Two: Investigative stage

- 18. An employee from the Safeguarding team must be allocated to the investigation if they:
 - have completed an accredited investigation training course, and

- do not have or be perceived to have a conflict of interest or bias regarding the incident or people involved.
- 19. The Investigator will:
 - develop a plan for the investigation
 - complete the investigation as outlined in the Safeguarding Vulnerable Adults Policy, the Incident Management Policy and relevant policies as required
 - submit an investigation report to the relevant Executive Director.

Stage Three: Determination of a "preliminary finding"

20. Based on the investigator's report, the Executive Director, People, Culture and Strategy will make a "preliminary finding" as to whether, on the balance of probabilities, the allegation(s) reportable incident is (are) sustained, not sustained or false, or another of the outcomes listed. The Society will then complete the required reporting to the NDIS Commission or Aged Care Safety and Quality Commission and undertake any appropriate disciplinary action.

Stage Four: Final finding

- 21. After there has been a reasonable opportunity for the member, volunteer or employee to respond to the preliminary finding, either confirmation of the preliminary finding as final or review of the investigation will occur, as applicable.
- 22. The investigation and investigation report must be completed within 25 working days from when an investigator is assigned. If the investigation cannot be resolved within this timeframe, the investigation must be escalated to the Executive Director as soon as possible to ensure the Society can meet external reporting obligations.
- 23. The investigation report must document the outcome of the investigation, including whether there will be any disciplinary action taken (including reasons for taking or not taking such action). A risk assessment (with risk mitigation strategies) must be developed at the conclusion of the investigation and approved by the Safeguarding team and Executive Director, Corporate Services.

Stage Five: Reporting and disciplinary action

- 24. An interim or final report must be made to NDIS Commission within 25 working days.
- 25. The Society is also responsible for implementing any appropriate disciplinary action.

Procedural fairness

- 26. During the conduct of "relevant employment proceedings", the requirements of procedural fairness specify that the member, volunteer or employee has:
 - a. A right to an impartial decision
 - The Investigators and other decision-makers should conduct all aspects of the process in an impartial and objective manner without prejudging the matters under consideration.
 - The member, volunteer or employee should be given an unbiased hearing of his/her responses both to the matters alleged and to any proposed adverse finding or recommended disciplinary action.
 - b. A right to be heard
 - Prior to the interview, the alleged perpetrator should be:
 - \circ advised of the allegation in as much detail as possible to enable them to respond
 - provided with a summary of the employer's current investigation process and/or a copy of this document

- provided with reasonable notice regarding arrangements for any interview regarding the allegations, although they may waive the notice period and request the interview proceed at a mutually acceptable earlier time
- $\circ \quad$ advised of their right to have a support person present at any interview
- advised of the names of the people appointed by the employer to conduct the investigation.
 An open and transparent process should address any actual or perceived conflicts of interest.
 If such concerns are not resolved, it may be advisable to appoint an alternative investigator
- 27. During the investigation phase (Stage Two), the alleged perpetrator should be:
 - o provided with sufficient information to enable a response to each allegation
 - provided with reasonable opportunities to respond to the allegations, whether at an interview and/or in writing
 - advised of and given an opportunity to comment upon any proposed adverse finding and any proposed report to the NDIS Commission or Aged Care Safety and Quality Commission and disciplinary action ("preliminary finding stage" – Stage Three). The personnel's comments should be considered prior to the final determination of the findings and disciplinary action
 - informed of their right to access the investigation file, this would normally be done at the preliminary finding stage, but at any stage in the process, the person could request access
 - advised of their right to complain to the NDIS Commission or Aged Care Safety and Quality Commission if they are not satisfied with the agency's response to their complaint about the outcome or the way the agency investigation was conducted

Appendix 4: Responding to Reportable Incidents in an NDIS Service Protocol

This procedure must be used for a reportable incident in relation to a vulnerable adult in a Society/ NDIS Service.

If the incident also involves an allegation about Personnel, this procedure should be applied in conjunction with Appendix 3 and is reportable to both the NDIS Quality & Safeguards Commission.

 Any reportable incident that has occurred, or is alleged to have occurred, in connection with the NDIS supports or services must be notified to the NDIS Quality & Safeguards Commission within set timeframes.

What to report and when to report it

- report the death of a person with a disability/ NDIS participant within 24 hours
- report the serious injury of a person with a disability/ NDIS participant within 24 hours
- report abuse or neglect of a person with a disability/ NDIS participant within 24 hours
- report unlawful sexual or physical contact with, or assault of a person with a disability/ NDIS participant within 24 hours
- report sexual misconduct committed against, or in the presence of, a person with a disability/ NDIS participant, including grooming of the person for sexual activity **within 24 hours**
- report the use of the unauthorised restrictive practice in relation to a person with disability/ NDIS participant within 5 business days
- if a vulnerable adult is also a resident of the Society's Residential Aged Care Facility, Frederic House, reporting to the Aged Care Commission is also required. Refer to the Safeguarding Vulnerable Adults Policy or Serious Incident Response Scheme Guidelines 2021 for more information
- Refer to the NDIS Commission incident reporting, management and prevention resources for further information <u>https://www.ndiscommission.gov.au/resources/provider-and-worker-resources/resources-support-incident-reporting-management-and</u>
- 2. Clarify the allegation exactly what has been alleged. Who, what, when, where, etc.? Do not commence investigation at this time. Focus on clarifying the key elements of the allegation.
- 3. Notify the Team Leader, Manager or Supervisor.
- 4. Notify the relevant Director of Vinnies Services and the Executive Director of Vinnies Services.
- 5. Notify the Safeguarding team 1800 4 SUPPORT (1800 478 776) as soon as possible after an allegation is made. The Safeguarding team will:
 - oversee any further enquiries or investigations and will inform the CEO
 - oversee all Safeguarding Notification forms in the Safeguarding Register, within the Society's Integrated Risk Management System.
- 6. The Manager, Director or Executive Director is responsible for ensuring all concerns of abuse or harm that indicate criminal activity is reported to the Police as soon as possible after Personnel become aware that a crime may have been committed.
- 7. The Vinnies Services Directors and Executive Director are the **Authorised Reportable Incident Approvers.**
- 8. The Senior Managers, Vinnies Services delegated with this responsibility are the Society's **Authorised Reportable Incident Notifiers.**

- 9. Conduct a risk assessment which considers and documents the risk to the safety and wellbeing of the vulnerable adult, including the alleged victim, the alleged perpetrator, staff, other vulnerable adults, the organisation. Contact the Safeguarding team for the Risk Template.
- 10. Where a Police are investigating the matter, the Society must await the outcome of the Police before the Society conducts any further enquiries or investigations if required.
- 11. Consider who needs to be notified about the allegation as well as what to tell others who are not involved but aware (e.g., parents, guardians, employees). Remind all parties of the sensitivity of the situation and confidentiality requirements.
- 12. The Team Leader, Manager or Supervisor must ensure reports are documented and escalated appropriately.
- 13. Address the support needs of the vulnerable adult and the person who is the subject of the allegation/ incident.

Investigation:

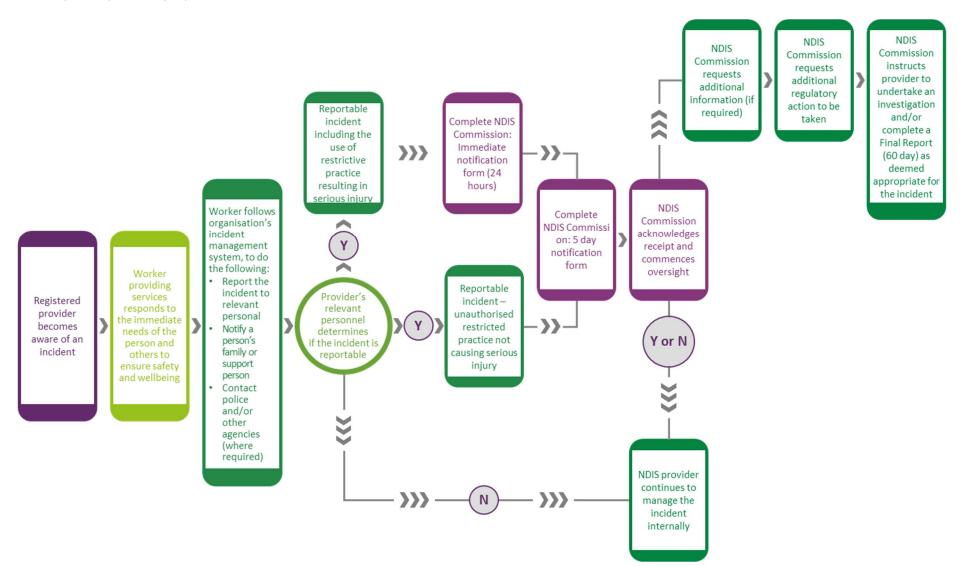
- 14. The Society may choose, or the NDIS Commission may direct the Society to engage an external investigator to undertake the investigation.
- 15. Both internal and external investigators must be appropriately qualified to conduct serious investigations of this sort, including investigating serious incidents involving a criminal element.
- 16. Any investigation must include:
 - whether Society policies and procedures have been followed
 - whether the incident could have been prevented
 - how well the incident was managed and resolved
 - whether any systemic performance or management issues arise
 - what, if any, remedial action needs to be undertaken to prevent further similar incidents from occurring or to minimise their impact
 - whether other persons or bodies need to be notified of the incident.
- 17. The NDIS Commission may provide, or require the Society to provide, information on the progress or outcome of an investigation to the vulnerable adult involved in the incident or the vulnerable adult identified support network such as a guardian or family member.

Corrective action

- 18. Corrective steps may include, but are not limited to:
 - disciplinary action or dismissal
 - training or education of workers
 - modification of the environment
 - development or amendment of a policy or procedure
 - changes to how supports or services are provided
 - practice improvements
 - temporary or permanent suspension of service
 - opportunities for continuous improvement.

Reporting via the NDIS Portal

Process for notification of reportable incidents



Final report

- 19. In certain circumstances, the Society can be required to give the NDIS Commission a final report with information about any internal or external investigation or assessment that has been undertaken in relation to the reportable incident, including:
 - the name and position of the person who undertook the investigation
 - when the investigation was undertaken
 - details of any findings made
 - details of any corrective or other action taken after the investigation
 - a copy of any report of the investigation or assessment
 - information about whether persons with disability impacted by the incident (or their representative) have been kept informed of the progress, findings and actions relating to the investigation or assessment
 - any other information required by the NDIS Commission
- 20. The final report must be provided to the NDIS Commission within 60 business days following the initial notification. The NDIS Commission may extend the period for providing the final report.

Record Keeping

- 21. The Society must maintain a record of the incident in the Society's Integrated Risk Management System, according to the Society's Incident Management policy. The record must include:
 - description of the incident including the impact on, or harm caused to, any person
 - nature of the incident details of whether the incident is a reportable incident
 - details of the incident if known, the time, date and place at which the incident occurred or if not known, the time, date and place at which the incident was first identified
 - assessment and investigation detailed assessment of the incident or allegation, detailed plan of how the investigation will be conducted, details of all interviews and decisions made regarding the outcome of the investigation
 - contact details the names and contact details of the persons involved in the incident and any witnesses to it
 - initial response and follow up the actions taken in response to the incident and changes to support continuous improvement
 - consultations record of any consultations with the vulnerable adult or their parent, guardian or support person affected by the incident and whether the person has been given reports or findings regarding the incident.

Documentation and Record Keeping

22. The Safeguarding team, on behalf of the CEO must ensure that:

- all documents relating to allegations of misconduct involving abuse or harm from Personnel to a vulnerable adult are:
 - dealt with and stored confidentially
 - kept for a minimum of seven years from the date of their last contact with the Society, as noted in the vulnerable adult's file
 - \circ stored in the Safeguarding Register and as required Safeguarding file or Personnel files.
- information regarding notifications to the NDIS Quality and Safeguards Commission will be stored confidentially in a secure location and stored according to the above timeframes.