

Freedom from Violence, Neglect and Abuse

Policy Statement

Burke and Beyond has a zero tolerance for Violence, Neglect and Abuse and commits to ensuring the rights of participants are respected, their well-being is safeguarded, and that they are not exposed to any form of violence, neglect or abuse. This includes emotional abuse or assault.

It is expected everyone who is associated with our organisation, and involved in providing services to our participants will share our commitment to maintaining an organisational culture free from violence, neglect or abuse which:

- upholds the value and dignity of the participants
- builds trusting relationships with our participants, their families and carers
- provides services in an environment that is safe and welcoming for everyone
- empowers our participants by helping them to understand their rights
- makes everyone feel safe to raise concerns
- responds proactively to concerns and complaints when they arise
- fosters collaboration with other organisations in upholding participants human rights and preventing abuse and neglect.

Objective

The objective of this policy and procedure is to protect participants from exposure to, and where identified, effectively manage any allegations, witnessed and/or actual events of assaults, abuse and neglect.

The procedure outlines the actions and processes taken to appropriately and consistently manage:

- alleged incidents whether neglect, verbal, physical and/or sexual to ensure both victim and alleged perpetrator are treated respectfully, equitably and with care and sensitivity, and where procedural fairness applies
- staff response to disclosure or identification of abuse and neglect that is timely, sensitive, and provided in a supportive and professional manner
- the safety, care and risks to the people supported and those associated with Burke and Beyond
- the actions taken are in accordance with the legal, organisational and evidenced based practice requirements

Scope

This policy and procedure applies to all Burke and Beyond Employees, Management and Volunteers and where participant referenced, this includes any person under the age of 18 who may be attending our services as a participant.

Staff members working with participants under the age of 18 are required to have a current Working with Children check.

Policy Details

Any suspicion or allegation of abuse, neglect or violence towards a participant **must** be reported immediately to the General Manager Service Delivery (GMSD) who will then report to the CEO.

It is an obligation under legislation that Burke and Beyond protect a person receiving services and have a mandatory obligation to report incidents to the Department/Commission and as relevant, the police.

Mandatory reporting of abuse and neglect is a legal and ethical requirement NOT a duty of care decision.

Alleged incidents will remain confidential, only information directly related to the incident can be shared with the appropriate authorities and/or involved parties.

It is not the responsibility of Burke and Beyond employees to make judgments about the validity of an alleged incident.

If a participant's rights are infringed, or we have reason to believe that they have been abused or neglected, Burke and Beyond, will respond quickly, professionally, confidentially and compassionately.

It is the legal responsibility of all staff, volunteers, students on placement and Board of Management members to communicate any concerns relating to an infringement of human rights, or the abuse or neglect of a participant to the Chief Executive Officer (CEO) and/or General Manager Service Delivery (GMSD) as soon as practicably possible, especially if the participant is at imminent risk of harm.

The CEO and/or GMSD will assist the person raising the concern or allegation to factually and non-judgementally document an account of the situation. This should be done within 24 hours of the CEO and/or GMSD being made aware of the concern. Consistent with Incident Management Procedure an incident report will be completed and submitted.

Generally, a staff member who the participant trusts along with a 3rd person who is responsible for documenting the process (determined by the CEO/GMSD) will discuss with participant the concern, reassure them and ensure their involvement in deciding the course of action.

In certain circumstances, it may not be feasible to involve the participant due to their disability, the nature of the concern, and/or mandatory reporting obligations. Should the participant be excluded from decision-making regarding the concern, the rationale behind this choice will be recorded, with preference given to appointing an advocate to represent their interests. The CEO will determine the necessary course of action based on the situation, the participant's perspective, and relevant legal or mandatory directives.

ALL EVENTS AND/OR ALLEGATIONS OF ASSAULT, ABUSE AND NEGLECT WILL BE RECORDED FOLLOWING THE INCIDENT MANAGEMENT PROCEDURE

PROCEDURE:

WHO	WHAT
1.	GENERAL INFORMATION
All staff	<ul style="list-style-type: none"> • All allegations of assaults and disclosure of abuse and neglect are deemed valid and it is not the role of staff to ascertain the validity of the allegation/s. • At commencement of service, participants and their families are provided with information regarding the environment, safety and acceptable behaviours. • Ensure appropriate confidentiality is maintained for all incidents of alleged assault and/or disclosure of abuse/neglect. • Inform person, that under certain circumstances there is an inability for confidentiality to be maintained and the requirement to report to appropriate management and authorities. • When an allegation/disclosure is made: <ul style="list-style-type: none"> ○ In consultation with the person making the allegation/disclosure engage a 3rd person to assist with recording the conversation, conversation records should be detailed and include both the questions that were asked and the information that was provided.

	<ul style="list-style-type: none"> ○ Listen attentively and empathetically to what the person is alleging - let them tell you in their own words. ○ Remain calm and non-judgemental - accept what is being said and provide time for them to speak. Be mindful of your body language. ○ Give reassurance that telling someone was the right thing to do. ○ Reassure the person that ongoing support will be provided and explain what will happen next. ○ Explain the role of Burke and Beyond, the police and any legal authorities who may become involved. ○ Offer referrals to and liaise with appropriate specialist services ● If alleged perpetrator is a staff member notify GMSD and CEO immediately ● Where Physical, Sexual, unexplained Injury or suspicions of abuse are identified, staff must discuss with GMSD. GMSD in consultation with CEO will report to relevant state government department and police as per relevant mandatory reporting legislation.
2.	VERBAL ASSAULT- Allegation and/or identification of verbal assault
All staff	<ul style="list-style-type: none"> ● Provide a safe place for the person alleging assault away from others involved ● Discuss and clarify events separately with victim and alleged perpetrator ● Re-affirm service practices for a safe environment for all, unacceptable behaviour and any actions if behaviour continues ● As relevant, discuss with senior staff on duty and arrange any de-briefing, counselling and/or mediation ● Review any risk and/or management plans and communicate with relevant parties, including the person ● Document the details and actions taken and record all persons involved and complete an incident report
3.	PHYSICAL ASSAULT - Allegation and/or identification of physical assault
All staff	<ul style="list-style-type: none"> ● Provide a safe place away from others involved for the person alleging assault ● Arrange any relevant medical treatment for injuries ● Discuss and clarify events with alleged victim and perpetrator ● Report incident to GMSD who will report to the incident to the CEO ● Re-affirm service practices for a safe environment for all, unacceptable behaviour and any actions to be taken if behaviour continues ● Discuss option and actions for victim to press formal charges
Coord./Manager	<ul style="list-style-type: none"> ● As relevant, arrange any de-briefing, counselling and/or mediation ● Review any risk and/or management plans and communicate with relevant parties, including the person/s involved ● Document the details and actions taken in the person's record of all involved and complete an incident report ● If likelihood of continued assaults, consider options for maintaining safety of people being supported/staff/others such as: relocating/separating to another environment
4.	SEXUAL ASSAULT - Allegation and/or identification of sexual assault
Coord./ Manager	<ul style="list-style-type: none"> ● Report all alleged incidents of sexual assault to GMSD/CEO immediately ● As directed by management and as per mandatory reporting, report to police ● Discourage showering/bathing immediately following an assault ● Provide alleged victim/s and perpetrator/s with appropriate information, counselling and encouragement to report/participate with police. It is the role of police to investigate an alleged assault. Preferably reports made to police

	<p>require the consent of the victim/s except where mandatory reporting is required. The victim has the right to refuse participation in the police investigation.</p> <ul style="list-style-type: none"> • Provide counselling referrals to specialist agencies such as: Centres Against Sexual Assault (CASA)- VIC https://www.secasa.org.au/ or Sexual Assault Crisis line 1800 737 732 https://www.sacl.com.au/ <p>Alleged sexual assault reported:</p> <ul style="list-style-type: none"> • Provide a safe place away from others involved for the person alleging assault • Engage a 3rd person to assist in recording the information provided by alleged victim, document questions asked and responses regarding place, perpetrator, any injuries sustained, witnesses. It is not the role of staff to investigate the allegation • Wherever possible, do not leave alleged victim alone, identify a trusted support person to remain with the victim. • Report to the GMSD and CEO, and discuss immediate actions to be taken • As applicable, preserve any evidence.
ALLEGED PHYSICAL & SEXUAL ASSAULTS (Management)	
GMSD/ CEO	<ul style="list-style-type: none"> • Provide support and information to victim regarding rights and options for legal counselling and medical attention and as relevant, any tests for sexually transmitted diseases, pregnancy and/or forensic examinations • Ensure safety of victim and arrange for a staff member to remain with victim and provide support • Report incident to CEO/Board member • Where possible gain person's consent to report, otherwise under mandatory reporting requirements, report assault to police, authorities and undergo any medical examinations • Arrange relevant medical review and attend to any immediate injuries, being mindful of any forensic evidence • Consider any cultural/gender sensitivities • Arrange for safe environment for alleged perpetrator and appropriately explain situation and information regarding processes, support and police procedures • Make contact with family/significant other of victim unless there are circumstances indicating this should not occur- in these situations reasons must be discussed with CEO and recorded • Consult with external expertise and agencies • Complete an incident report and provide to police. Retain copy for own records • Document the details and actions taken in the record of all person's involved and complete an incident report <p>Follow up actions include</p> <ul style="list-style-type: none"> • Review levels of risk and make relevant arrangements to minimise any further incidents and/or reoccurrence. Consider transfer of alleged perpetrator to another service environment • Promote and maintain the respect and confidentiality of person/s, staff and any other involved stakeholders • Support and assist police in any investigations • As a priority arrange professional counselling/review for both victim and perpetrator (if perpetrator a participant within services) <p style="text-align: center;">○</p>

	<p>If alleged perpetrator is staff</p> <ul style="list-style-type: none"> • Ensure confidentiality is maintained throughout process • Contact CEO • In consultation with CEO undertake relevant actions which may include suspension from duties or service transfer until incident resolved <p>If perpetrator a visitor</p> <ul style="list-style-type: none"> • Follow victim response steps and reporting of incident as outlined above • Determine identity of perpetrator and provide to police as required • Ensure visitor leaves premises - do not provide any details of alleged incident
5.	NEGLECT - Allegation and/or identification of neglect (poor quality of care, deprivation of nutrition, rights)
All staff	<ul style="list-style-type: none"> • Arrange for any medical treatment if required • Report to GMSD who will report to the CEO, and discuss immediate actions to be taken • Follow mandatory reporting requirements and incident reporting processes
6.	DISCLOSURE OF ABUSE OR NEGLECT BY OR ABOUT THIRD-PARTY OUTSIDE OF BURKE AND BEYOND- <i>Includes physical, sexual, psychological, emotional, financial and neglect</i>
All staff	<ul style="list-style-type: none"> • Participant receiving support discloses abuse and/or neglect • Ensure an appropriate, private and safe environment to discuss • Listen and reassure person, enabling him/her to share their experience • Enquire as to what follow up actions the person wishes to pursue and the steps to be taken • Report and discuss with most senior staff on shift and GMSD, consider any concerns about safety and wellbeing
GMSD	<ul style="list-style-type: none"> • If participant agrees, organise a time to meet and to discuss actions • Provide information and processes regarding the appropriate protective services that the situation may be reported to • Undertake appropriate actions to ensure that the person is protected from potential or further harm. This may include mandatory reporting of situation • Where not bound by mandatory reporting and without coercion, gain the consent of the person to progress reporting of abuse/neglect • Report to appropriate service/ authority as soon as practicable • Record discussions and actions in person's record • Review and amend any support, risk and service plans • Coordinate appropriate support and follow-up for person, family/carer and relevant Burke and Beyond staff. • Liaise with any services, investigation processes, person and as relevant the family/carer
7.	WHERE NOTIFICATION MADE
All staff	<p>A notification to authorities may initiate an investigation leading to legal action and possible criminal charges. The consequences can be very serious and distressing for the person/s, their families and others. Staff should note the possibility of escalation of inappropriate behaviours and the consequential effect on ongoing support. The person and their families must not feel threatened about the possibility of a report being made.</p> <p>Where mandatory reporting taken, the name of the staff member who made the</p>

	notification, or information that is likely to lead to the identification of the informant, must not be revealed to any other person outside of the those involved.
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Implementation and Review:

This policy will be available on Supportability and will be reviewed every three years and following any serious incidents or changes in legislation. Improvements to this document can be made by completing a suggestion and improvement form, attaching any suggested amendments and forwarding it to your manager and/or the Quality Manager for review.

ADMINISTRATION:

Standards related to:	Human Service Standards- Empowerment, Well Being, Service Management National Disability Standards- Rights,	
Legislation and external reference documents:	Human Services Standards National Disability Insurance Scheme Act 2013 National Disability Insurance Scheme Act 2013 – (Cth) NDS Zero Tolerance Framework Privacy and Data Protection Act 2014 – (Vic) United Nations Convention of the Rights of Persons with Disabilities Victorian Charter of Human Rights and Responsibilities Act 2006 Responding to Allegations of Physical or Sexual Assault Department Instruction 2005 (Vic) Promoting Better Outcomes – Systemic Improvement Policy and Procedure: Managing and reviewing adverse events (Vic) Critical Participant incident management instruction 2011 (Vic) Client Incident Management System (CIMS) 2017 Reportable Conduct Scheme 2018 Child Safe Standards	
Internal reference documents:	Incident Management Procedure Restrictive Practices Policy	
Reviewing and approving this document		
Frequency	Person responsible	Approval
Every 3 years	Manager Quality and Risk	CEO

Indexing:

Policy review and version tracking			
Review	Date Approved	Approved by	Next Review Due
	23/01/2019	Bruno Cry	2022
1	07/02/2024	Lisa Sawatzky	2027
2			