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| Disability Service Standard 1 |
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Kids Are Kids! Therapy & Education Centre Inc.

Policy 1.1 – Protection of Human Rights and Freedom from Abuse and Neglect

Last Amended: 15/04/2015

Date Ratified: 10/01/2016

Next Review: 10/01/2017

Review Responsibility: Chief Executive Officer

Documents Attached:

- PR1.1 – Protection of Human Rights and Freedom from Abuse and Neglect Procedure
- PS1.1 – Protection of Human Rights and Freedom from Abuse and Neglect Performance Standards

Chief Executive Officer's Name: Teresa Barrie

Signature: _____

Date: _____

Policy 1.2 – Protection of Human Rights and Freedom from Abuse and Neglect

Policy Statement:

Kids Are Kids! Therapy & Education Centre Inc affirms the rights of people with disabilities to live their lives free from neglect, abuse and exploitation. The purpose of this policy is to:

- promote the human rights of our consumers;
- create a service environment where risks to the rights and well-being of our consumers are minimised; and ensure that no client is neglected or exploited by its employees, volunteers, contractors other clients or from any other person.
- ensure that if we become aware of an instance of abuse or neglect, we respond promptly, professionally and compassionately to address the situation in accordance with the requirements of Disability Services Standard 1. Kids Are Kids! will act to protect its clients and to prevent abuse, neglect and exploitation, and will uphold the legal and human rights of its clients.

The policy applies to all employees, including paid and unpaid staff, students, volunteers, advocates, Board members, contractors and others who may act on behalf of the organisation from time to time.

Guiding Principles:

- To ensure the protection of our clients from human rights abuses and neglect while in our care. All clients have the right to receive their services from Kids Are Kids! without threat, intimidation or abuse from its employees, volunteers, contractors and other clients.
- To raise awareness of families with regard to their rights and expectations for their children when in the wider community
- To enable our staff and families to advocate for the rights of our clients
- To ensure staff are aware of the indicators of abuse.
- To ensure staff know what to do if they suspect abuse

We have a duty of care to ensure that the rights of our consumers are respected, their well-being is safeguarded, and that they are not exposed to any form of abuse and neglect while part of our service. We expect that everyone who is associated with our organisation, and is involved in providing services to our consumers will share our commitment to maintaining an organisational culture that:

- upholds the value and dignity of our consumers;
- builds trusting relationships with our consumers, their families and carers;

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- provides services in an environment that is safe and welcoming for everyone;
- empowers our consumers 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 consumers' human rights and preventing abuse and neglect.

Procedures:

Procedures will be implemented to enable Kids are Kids! Therapy and Education Centre Inc to meet its policy objective of service access. Refer to Appendix 1 for the following procedures:

- PR1.2 – Protection of Human Rights and Freedom from Abuse and Neglect Procedure

Performance Standards:

Performance Standards will be met to ensure that the procedures specified are implemented effectively. Refer to Appendix 2 for the following performance standard:

- PS1.2 – Protection of Human Rights and Freedom from Abuse and Neglect Performance Standard

Delegations:

Board

Legislative Base/Authority:

Corporate Policy

Disability Services Commission Policy

Related Policies:

- 6.1.2 Code of Conduct: Board
- 6.3.2 Code of Conduct Employees, volunteers, contractors, consultants
- 4.2 Consumer Feedback and Evaluation
- 1.4 Privacy, Dignity and Confidentiality

Review of the Policy

This policy will be reviewed on a bi-annual basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy shall be reviewed immediately and amended accordingly.

Appendix 1 – Procedure

PR1.2 – Preventing Abuse and Neglect

We will minimise the risk of our consumers' rights being infringed, or them being subject to abuse and neglect.

1. Our recruitment procedures will be of a high standard and we will ensure that the right staff are appointed through:
 - a. pre-appointment screening of new staff, including national police clearances and Working With Children Checks;
 - b. checking references;
 - c. placing new staff on a minimum probationary period of three months;
 - d. ensuring new staff go through an induction and orientation process and that their performance is regularly monitored during probation; and
 - e. regular appraisal of the performance of all staff.
2. Staff and volunteer orientation and induction will include information about consumer rights, issues of abuse and neglect and the requirements of Standard 1.
3. Staff meetings will be used to remind staff of their responsibilities for safeguarding consumers and to raise any matters of concern.
4. Following initial training of all staff in relation to Standard 1, we will offer refresher training at least once every year.
5. Information about Standard 1 will be provided to consumers and carers through provision of relevant policies on our website and on request.
6. We will use existing processes such as Individual Services Plan or Family Service and Support Plan meetings, to provide information to consumers and their families and carers, to increase their knowledge and decrease their vulnerability to abuse and neglect.
7. We will identify resources that will assist and support us to empower our consumers in relation to issues of human rights and self-advocacy, and use them in consumer training.

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8. Posters and brochures will be displayed, to create an organisational environment that encourages awareness of the issues.
9. We will work collaboratively with other organisations, and establish referral practices and interagency policies and procedures with those that provide other services to our consumers.
10. We will foster a safe, supportive environment which encourages everyone to raise concerns without fear of retribution.
11. We will display value statements, service principles and information about people's rights in our premises, through newsletters, our website and in written material sent to new clients. We will use information formats that make the information as accessible as possible.
12. The standards of care we provide will be actively monitored.
13. This policy and its procedures will be reviewed every two years in consultation via meetings with consumers, families, staff and volunteers.

Appendix 1 – Procedure

PR1.2b – Responding to Abuse and Neglect

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

1. It is the personal responsibility of all paid and volunteer staff, students on placement and Board members to communicate any concerns relating to an infringement of human rights, or the abuse or neglect of a consumer to their Line Manager or Program and Clinical Services Manager within 24 hours of the concern arising, or immediately if it is believed that the consumer is at imminent risk of harm. The Line Manager or Program and Clinical Services Manager will determine how the matter should be managed.
2. The Line Manager or Program and Clinical Services Manager will reassure the reporting staff member that their concerns will be managed in a confidential and professional manner, and that they have acted correctly in bringing their concern to attention.
3. The Line Manager or Program and Clinical Services Manager will assist the staff member raising the concern or allegation to factually and non-judgementally document an account of the concern or allegation on a clinical incident form. This should be done within 24 hours of the Line Manager or Program and Clinical Services Manager being made aware of the concern.
4. If the Line Manager or Program and Clinical Services Manager believes that the consumer is at immediate risk, he or she will take whatever steps are required to mitigate the risk, and ensure the consumer's safety while the matter is fully investigated.
5. Except for staff who have been given specific authority to do so, no staff member will undertake any level of investigation of a concern or allegation.

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6. Generally, it will be expected that a staff member who the consumer trusts (determined by the Line Manager) informs them of the concern, reassures them and ensures their involvement in deciding the course of action to be taken. However, it is recognised that in some situations this might not be possible due to the consumer's disability or the nature of the concern. If the consumer is not to be involved in decision-making about the concern, the reasons for this decision will be documented, and consideration given to the need to involve an advocate to represent their interests.
7. The Line Manager, Program and Clinical Services Manager and CEO will jointly decide on the appropriate action to be taken according to the circumstances and generally taking into account the consumer's views. The action could be:
 - a. to manage the matter within the organisation;
 - b. to engage in discussion with family members or advocate;
 - c. to elicit the advice and expertise of another organisation or individual from outside of our organisation;
 - d. to involve an organisation with the required legislative mandate to take action (eg the Department for Child Protection, WA Police, the Office of the Public Advocate);
 - e. to take no further action at this time, however continue to monitor the situation and review at a specified later date; or
 - f. to take no further action.
8. The decision that is taken and the reasons that led to the decision will be documented by the Line Manager or Program and Clinical Services Manager and endorsed by signature, by the CEO.
9. If the matter is assessed to involve any actions that are unlawful, the Line Manager or Program and Clinical Services Manager must immediately advise the Chairperson of the Board and the CEO.

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10. Duty of care carries greater weight than the duty to maintain confidentiality in matters of care and protection. This means that the matter may be discussed between those reporting or investigating, but not with any other person. This includes confidentiality of consumer and alleged perpetrator information.
11. In reporting a concern/allegation, staff will ensure that the consumers' right to dignity, confidentiality and privacy is maintained in accordance with Disability Services Supporting Standard 1 and the requirements of the Privacy Act.
12. If the matter is considered to be a serious incident, it must be reported to the Disability Services Commission or funding body by the or Program and Clinical Services Manager within seven (7) working days, in accordance with the Serious Incident Reporting policy.
13. The Line Manager will provide feedback to support the staff member who raised the concern or made the allegation regarding the outcome.
14. Debriefing will be undertaken with all relevant individuals when the matter reaches a conclusion. The Program and Clinical Services Manager will determine who the appropriate person is to conduct the debriefing.
15. When the matter is concluded, the Program and Clinical Services Manager will arrange for a review to be conducted, to evaluate the organisation's performance in responding to the matter, and to identify opportunities to develop strategies to prevent a future occurrence of a similar incident.

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16. When the abuse or neglect is alleged to have been perpetrated by an employee, volunteer or contractor the Program and Clinical Services Manager and the General Manager will meet with the client's family and/or person who registered the complaint in order to obtain all relevant information. The Program and Clinical Services Manager and the General Manager will meet with the employee, volunteer or contractor against whom the complaint is lodged in order to obtain all relevant information and explanation for the alleged behaviour and meet with other potential witnesses as necessary. They will then prepare a report for the CEO within 24 hours of the allegation with recommendations and an action plan to support the client and their family, and the staff member. The Management team may then seek industrial/professional advice, plan further meetings, seek an external assessment or refer the matter to the police. The management team may immediately suspend the staff member or send them on leave pending the results of the investigation.

Appendix 2 – Performance Standards

The following performance standards must be met to ensure that the procedures specified are implemented effectively:

- A policy and associated procedures are in place to protect consumers' human rights and minimise the risks of abuse and neglect.
- Standard 1 training for staff members and consumers has been conducted as planned.
- Orientation and induction materials for paid staff, volunteers, students, consumers and families includes information on Standard 1.
- Written and visual aids are visible throughout our organisation.
- Information on human rights and abuse and neglect is available and provided to consumers and families in accessible formats.
- Brochures and manuals relating to Standard 1 have been produced and are in use.
- There is evidence of ongoing attention to human rights and issues of abuse and neglect through staff meetings, professional development events, and staff training activities.
- Collaborative relationships are in place with other service providers who provide services to our clients and with consumer advocacy organisations.
- There will be no substantiated incidents of infringement of a consumer's rights, abuse, or neglect, where a staff member, volunteer, student on placement, Management Committee member or contractor is the perpetrator.
- Audit checks will confirm that concerns and allegations have been managed in accordance with the requirements of our policy and procedures.
- Serious Incident Reporting will be completed within the seven working days time frame.

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- Summary data of reported concerns and allegations will be provided to the Disability Services Commission on an annual basis, as per the reporting requirements of the Service Agreement.