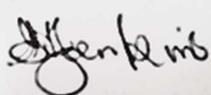


DUTY OF CARE POLICY

Date approved	27/6/22	Signature by Management representative	
Previous titles	Service Delivery Policy and Procedures 2010		Chairperson, Suzanne Jenkins
Previous versions	24/5/21, 21/9/18		



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Internal ECS References	
In S:\0 CURRENT POLICY & PROCEDURES:	In S:\1 CURRENT FORMS:
<i>Supervision & Performance Appraisal Policy</i>	<i>ECS Team Agreement</i>
<i>WHS Policy</i>	<i>Incident Report</i>
<i>Planning & Evaluation Policy</i>	<i>Complaints Form (Part A)</i>
<i>Playgroup Policy</i>	<i>Complaints Form (Part B)</i>
<i>Aged Services: Access to Services Policy</i>	<i>Feedback & Complaints Register in H:\IMPORTANT DOCUMENTS\CONFIDENTIAL REGISTERS</i>
<i>Complaints Policy</i>	<i>Responding to the abuse of older people at https://www.ecs.org.au/abuse-collaborative</i>

External References	
<i>Child Safe Standards at https://ocq.nsw.gov.au/resources</i>	<i>Aged Care Quality Standards at https://www.agedcarequality.gov.au/providers/standards</i>
<i>Criminal Code Act 1995</i>	<i>Children and Young Persons (Care and Protection) Act 1998</i>
<i>Crimes Legislation Amendment (Sexual Offences Against Children) Act 2010</i>	<i>Children and Young Persons (Care and Protection) Regulation 2012</i>
<i>Children's Guardian Act 2019 No 2</i>	<i>Crimes Act 1900</i>
<i>Child Protection (Working with Children) Act 2012</i>	<i>Crimes Act 1900 (Grooming)</i>
<i>Child Protection (Working with Children) Regulation 2012</i>	<i>Crimes Act 1900 (Child Abuse Material)</i>
<i>Child Protection (Working With Children) Regulation 2013 - Reg 24</i>	<i>Guardianship Act 1987</i>
<i>Health Services Act 1997</i>	<i>Mental Health Act 2007</i>
<i>https://www.ageingdisabilitycommission.nsw.gov.au/</i>	<i>Ombudsman Act 1974</i>
	<i>UN Convention on the Rights of the Child</i>

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DUTY OF CARE POLICY

1. POLICY STATEMENT

ECS is committed to meeting its Duty of Care to all ECS clients, exercising care and avoiding negligent behaviours that may cause harm to people.

1.1 Definitions

client = term used across ECS programs and policy documents instead of “consumer”, which is specific to Aged Care
duty of care = the requirement to exercise reasonable care, attention and caution to avoid negligence which would lead to the harm of other people

ECS workers = anyone who carries out work on behalf of ECS, including staff, volunteers [including management committee members], contractors and students on placement

Mandatory Reporter = the legislative requirement for selected classes of people to report suspected child abuse and neglect to government authorities [NSW Children and Young Persons (Care and Protection) Act 1998]

1.2 Acronyms

ADC = NSW Ageing and Disability Commission

ECS = Engadine Community Services

MRG = NSW Online Mandatory Reporter Guide

RAS = Regional Assessment Service

2. GENERAL POLICY

ECS has a legal and moral responsibility to keep people safe from harm whilst they are using an ECS service. This responsibility is known as 'duty of care', and is detailed in this policy in regard to the identification of, and response to, risk of harm – both in the community and within ECS services - to two of the most vulnerable groups of people that benefit from ECS supports:

- Children
- Frail, older people

These groups have been identified due to their limited capacity to care for themselves.

[Note: A specific **WHS Policy** details ECS's work, health and safety obligations to paid staff and volunteers, contractors, clients and others who enter the ECS workplace/s, and to reduce or limit the amount of harm or injury they may experience there.]

3. WHAT IS DUTY OF CARE?

Duty of care is a fundamental obligation of all ECS workers in the delivery of services, irrespective of their employment status or job title. It is the requirement to exercise reasonable care, attention and caution to avoid negligence which would lead to the harm of other people.

3.1 Key Aspects of Duty of Care

There are several aspects to duty of care on which ECS policy and practice is based:

- Legal – what the law requires us to do
- Contractual compliance - what our funding body/s say we should do to meet quality standards
- Professional/ethical - what our industry/s and other workers expect us to do
- Community - what our clients and other community members expect us to do

All ECS personnel have a duty of care for the clients of ECS services. ECS personnel include:

- paid staff and volunteers, who are collectively referred to as 'workers' in this policy
- workers who provide direct support [as opposed to administrative support only] to clients identified as members of particular groups identified in this policy [see various *Job Descriptions*]
- Coordinators with specific titles and areas of responsibility, including supervision of workers [see **Supervision & Performance Appraisal Policy**] and ECS Manager
- ECS Management Committee

Note: in sections 3 and 4, only Coordinators and ECS Manager are responsible for Reporting [ie. 3.5, 3.6, 4.5, 4.6]

3.2 Principles Underlining Duty of Care at ECS

In relation to children and young people the NSW Child Safe Standards below underline duty of care:

- Standard 1: Child Safety is embedded in organisational leadership, governance and culture
- Standard 5: People working with children are suitable and supported
- Standard 7: Staff are equipped with the knowledge, skills and awareness to keep children safe through continual education and training
- Standard 9: Implementation of the Child Safe Standards is continuously reviewed and improved
- Standard 10: Policies and procedures document how the organisation is child safe

Key Federal Legislation covers ECS actions in relation to all clients and ECS staff and volunteers:

- [Criminal Code Act 1995](#)
- [Crimes Legislation Amendment \(Sexual Offences Against Children\) Act 2010](#)
- [Fair Work Act 2009](#)
- [National Disability Insurance Scheme Act 2013](#)
- [Privacy Act 1998](#)
- [Work Health and Safety Act 2011](#)

In order to avoid actions that may be considered negligent, ECS recruits appropriate people and provides all ECS workers with training, supervision and workplace resources that ensure care, attention and prudence in the design and delivery of services [see also **Planning & Evaluation Policy**].

ECS encourages personnel making decisions about and/or working with children, older people and the carers of both groups to consider the following when exercising duty of care:

- Police and/or ambulance 000 should always be called first for serious injury or current threat
- Knowledge and understanding of relevant legislation by decision-makers and skills and capacity of workforce
- Compliance with funding agreements and quality standards by all, and participation in development of ECS services, policy and procedures
- Information gathering, storage and exchange by all that is lawful [ie. provides privacy, confidentiality and protection of vulnerable persons]
- Maintenance of a safe workplace environment by all that minimises risk of harm to clients [eg. all ECS personnel are cleared through background checks, including a Criminal Check and Working With Children Check]
- Individual workers to appropriately observe, and engage with, clients in order to identify and respond to any at risk of harm [specifics below]
- Everyone to provide information and advice within their area of expertise, and act according to their job roles when intervention is required, whether reporting to a supervisor or an external body [procedures detailed below]
- Everyone to work together as the ECS Team, sharing knowledge and experience, and in collaboration with colleagues in other organisations to benefit vulnerable clients per Information Exchange Guidelines (for example Chapter 16A and s248 Information Exchange Children and *Young Person's Care and Protection Act 1998*).
- Everyone to speak up and discuss concerns about the welfare of clients and/or the actions of colleagues that may cause harm [including if they become aware of Reportable Conduct by a worker from another agency, see below]

3.3 Supporting ECS Workers

ECS is committed to providing information and training on protection and abuse issues and continuing support of staff and volunteers who encounter situations involving ECS clients, including:

- informing all volunteers and paid staff about agency policy and procedures to be followed in cases of suspected or actual abuse and harm
- making a copy of the policy available to all staff on request
- encouraging staff to participate in available training
- offering continuing support, supervision and debriefing to all workers identifying abuse situations
- ensuring that staff reporting abuse situations are free from retribution or retaliation

The Child Safe Standards specifically refer to workers:

- Standard 5: People working with children are suitable and supported
- Standard 7: Staff are equipped with the knowledge, skills and awareness to keep children safe through continual education and training

4. IDENTIFICATION & RESPONSE TO CHILDREN AT RISK

Although ECS is an autonomous body, it works collaboratively with government and other organisations when addressing child wellbeing concerns. ECS has responsibilities to:

- Ensure Child Safe Standards are in place throughout the organisation, from governance level through to direct service delivery [Standard 1: Child Safety is embedded in organisational leadership, governance and culture]
- Respond to child wellbeing and protection concerns through referral, reporting and service delivery [Standard 6: Processes to respond to complaints of child abuse are child focused]
- Inform children and young people of their rights to be protected from abuse or neglect and of the avenues for support available to them [Standard 2: Children participate in decisions affecting them and are taken seriously]
- Provide care and support services to children, young people and their families [Standard 3: Families and communities are informed and involved]
- Promote the safety, welfare and wellbeing of children and young people in their agency [Standard 8: Physical and online environments minimize the opportunity for abuse to occur]
- Provide non-discriminatory, culturally appropriate services in accordance with the *Anti-Discrimination Act* [Standard 4: Equity is upheld and diverse needs are taken into account]

4.1 Key Legislation & Players

There are key Acts and Regulations under NSW Legislation relevant to child safety:

- [Child Protection \(Working with Children\) Act 2012](#)[Child Protection \(Working with Children\) Regulation 2012](#)
- [Child Protection \(Working With Children\) Regulation 2013 - Reg 24](#)
- [Child Safe Standards Guide](#)
- [Children and Young Persons \(Care and Protection\) Act 1998](#)
- [Children and Young Persons \(Care and Protection\) Regulation 2012](#)
- [Children’s Guardian Act 2019 No 25](#)
- [Crimes Act 1900](#)
- [Crimes Act 1900 \(Grooming\)](#)
- [Crimes Act 1900 \(Child Abuse Material\)](#)
- [Education Act 1990](#)
- [Guardianship Act 1987](#)
- [Health Services Act 1997](#)
- [Mental Health Act 2007](#)
- [Ombudsman Act 1974](#)
- [UN Convention on the Rights of the Child](#)

ECS is a very small player in the network of organisations involved in child wellbeing and child protection in NSW. This section describes some of the ways in which ECS may engage with agencies that have key roles and responsibilities:

- State Government agencies, such as Police, Health and ECS’s funding body, NSW Department of Communities and Justice (DCJ)
- Other non-government organisations, including peaks for training and advice eg. Association of Children’s Welfare Agencies (ACWA)
- Independent oversight and support agencies that promote and safeguard the interests and rights of all children and young people, such as the Office of the Children’s Guardian
- NSW Ombudsman under the *Community Services (Complaints, Reviews and Monitoring) Act 1993*
- Advocate for Children and Young People
- Child Wellbeing Units (CWUs) in government agencies

The NSW Child Safe Standards aim to ensure child safety, ECS needs to be a safe space for children with programs and services delivered by safe people.

The Standards are:

- Standard 1: Child Safety is embedded in organisational leadership, governance and culture
- Standard 2: Children participate in decisions affecting them and are taken seriously
- Standard 3: Families and communities are informed and involved
- Standard 4: Equity is upheld and diverse needs are taken into account
- Standard 5: People working with children are suitable and supported

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- Standard 6: Processes to respond to complaints of child abuse are child focused
- Standard 7: Staff are equipped with the knowledge, skills and awareness to keep children safe through continual education and training
- Standard 8: Physical and online environments minimise the opportunity for abuse to occur
- Standard 9: Implementation of the Child Safe Standards is continuously reviewed and improved
- Standard 10: Policies and procedures document how the organisation is child safe

4.2 ECS Clients & Services Affected

As a provider of NSW Government-funded Child and Family Services, ECS is a Mandatory Reporter of suspected and actual harm, and risk of harm, to the children who receive benefit from ECS services through:

- Sutherland Shire Toy Library for babies, toddlers and young children [ages 0-12 years]
- Playgroups for babies and toddlers [ages 0-5 years].

These services are targeted primarily at parents and it is the parent who is the Toy Library member or Playgroup member, and therefore the ECS client. Parents are required to supervise their children at all times while on ECS premises [see *Playgroup Policy*].

Child Safe Standards applying to this group:

- Standard 2: Children participate in decisions affecting them and are taken seriously
- Standard 3: Families and communities are informed and involved
- Standard 4: Equity is upheld and diverse needs are taken into account
- Standard 6: Processes to respond to complaints of child abuse are child focused
- Standard 8: Physical and online environments minimise the opportunity for abuse to occur

4.3 What are the Risks to this Group?

NSW legislation states that a child or young person is deemed to be at risk of significant harm if current concerns exist for their safety, welfare or wellbeing because of the presence of any one or more of the following circumstances:

- a) the child's or young person's basic physical or psychological needs are not being met or are at risk of not being met
- b) the parents or other caregivers have not arranged and are unable or unwilling to arrange for the child or young person to receive necessary medical care
- c) the child or young person has been, or is at risk of being, physically or sexually abused or ill-treated
- d) the child or young person is living in a household where there have been incidents of domestic violence and, as a consequence, the child or young person is at risk of serious physical or psychological harm
- e) a parent or other caregiver has behaved in such a way towards the child or young person that the child or young person has suffered or is at risk of suffering serious psychological harm [Section 23 from the *Children and Young Persons (Care and Protection) Act 1998*]

In addition, physical or sexual abuse, including grooming offences may incur penalties under Criminal Law. Under s316A of the *Crimes Act 1900*, any person over 18 years who is aware of a serious physical or sexual assault of a child/young person must report this to police or to another agency such as NSW Department of Communities and Justice (DCJ) via the Child Protection Helpline. Severe Neglect also comes under the *Crimes Act 1900*.

4.4 Recognising the Signs Using the Mandatory Reporter Guide

ECS follows the *Child Wellbeing and Child Protection – NSW Interagency Guidelines*. They require that Mandatory Reporters use the *NSW Online Mandatory Reporter Guide (MRG)* to determine whether or not the concern should be reported to the Child Protection Helpline for further assessment or the Keep Them Safe Hotline for advice if unsure [see <https://reporter.childstory.nsw.gov.au/s/mrg>].

Child Safe Standards applying:

- Standard 5: People working with children are suitable and supported
- Standard 7: Staff are equipped with the knowledge, skills and awareness to keep children safe through continual

All ECS workers are advised to look out for the signs that are described in the MRG, but only the paid Building Communities Coordinator and ECS Manager make reports.

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Please do not under any circumstances conduct your own investigation. Do not ask questions of children or parents - simply report to Coordinator.

Workers who provide direct support to children via the Toy Library and Playgroups, and other ECS workers are educated on the signs in order to assist in the selection of the main decision tree that most closely matches their concern/s. If they have more than one concern, they start with the most serious.

ECS recognises that each circumstance is different and every child and young person is unique, so staff must complete the MRG on each occasion they have risk concerns, regardless of their level of experience or expertise.

<i>Which Decision Tree?</i>	<i>Use this when...</i>
Physical Abuse	<ul style="list-style-type: none"> • You suspect a non-accidental injury or physical harm to a child/young person that may have been caused by a parent/carer or other adult household member. • You know of treatment of a child/young person by a parent/carer or other adult household member that may have caused or is likely to cause an injury or physical harm. • Child/young person was injured, or nearly injured, during a domestic violence incident involving adults. [NOTE: If any of the above are true, but the person causing physical harm or injury is a child living in the home, the decision to report should be guided by whether the incident was due to neglect: supervision. Please refer to that decision tree.] • If a child was injured by a non-household member, the issue may be a police matter. • Female genital mutilation is an injury likely to be caused by a non-household member and should be reported to both the Child Protection Helpline and NSW Police.
Neglect	<ul style="list-style-type: none"> • You suspect that a parent/carer is not adequately meeting child/young person's needs. • A child/young person appears neglected. • A child/young/person is a danger to self or others and parents/carers are not supervising or providing care. <p>Eg. Not adequately meeting child/young person's needs, such as: supervision, shelter, medical care, hygiene/clothing, mental health care, schooling/education, poor nutrition, or other basic needs.</p> <p>[NOTE: For concerns related to shelter, use this tree for a young person who is able to make an informed decision around placement. Use 'Relinquishing Care' if young person is unable to make an informed decision and for children whose parent/carer is refusing to provide shelter.]</p>
Sexual Abuse	<ul style="list-style-type: none"> • You learn about sexual abuse or have concerns about sexual contact involving a child/young person. • A child/young person has medical findings that give rise to suspicions of sexual abuse. • A child/young person's behaviour, including sexualised behaviour, makes you worry that he/she may be a victim of sexual abuse. • You are concerned that a child/young person is at risk of sexual abuse. • You are concerned/worried that a child or young person may be sexually harming another child or young person.
Psychological Harm	<ul style="list-style-type: none"> • A child/young person appears to be experiencing psychological/emotional distress that is a result of parent/carer behaviour such as domestic violence, carer's mental health, carer's substance abuse. • A child/young person is a danger to self or others as a consequence of parent/carer behaviour. • You are aware of parent/carer behaviours, including domestic violence that are likely to result in significant psychological harm. • You are aware of an underage marriage or similar union that has occurred or is being planned (see Glossary for definition of underage marriage). <p>[NOTE: When a child/young person exhibits emotional or psychological distress, including being danger to self or others, but the reporter lacks information on whether parent/carer behaviour had contributed to this behaviour, the Child/Young Person is a Danger to Self or Others, Neglect: Supervision or Neglect: Mental Health Care decision trees may be more appropriate.]</p>
Child/Young Person is a Danger to Self and/or Others	<ul style="list-style-type: none"> • A child/young person is demonstrating suicidal or self-harming behaviours. • A child/young person is a danger to self or others and the reporter does not know whether the parent/carer behaviours contributed now or in the past. Eg. parent/carer allows the child/young person to consume/use or has provided the child/young person with alcohol or drugs. <p>[NOTE: If you are aware that parent/carer actions or inactions contributed to this behaviour consider the Psychological Harm decision tree or the Neglect: Supervision or Neglect: Mental Health Care decision trees.]</p>

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Relinquishing Care	<ul style="list-style-type: none"> • Parent/carer states they will not or cannot continue to provide care for child under the age of 16; or a young person over 16 and he/she is unable to make an informed decision (temporarily or permanently). • If the young person is 16 years old or over and able to make informed decisions, please refer to the 'Physical Shelter' tree. • Child/young person is in voluntary care for longer than legislation allows. • Exclude appropriate care arrangements with other parents, relatives or kin (see Glossary for Informal Care Arrangements)
Carer Concern	<ul style="list-style-type: none"> • You have information that the child/young person is significantly affected by carer concerns such as substance abuse, mental health or domestic violence. <p>[NOTE: If the child/young person has already experienced abuse or neglect, use the relevant abuse/neglect decision tree first. If a report to the Child Protection Helpline is not indicated using those decision trees, you may consider a Carer Concern decision tree.]</p>
Unborn Child	<ul style="list-style-type: none"> • You are concerned for the welfare of an unborn child at birth. <p>[NOTE: Reports related to an unborn child are not mandatory but mandatory reporters should consider the benefits for the parent/s and unborn child in making a report. A report can enable DCJ and other agencies to work collaboratively with the parent/s to access support services. Furthermore, a report can enable DCJ to prepare for statutory intervention when the child is born. Where DCJ has received a ROSH report about an unborn child, a parent responsibility contract can be used to support expectant parents to address issues so the child is safe when born.]</p> <p>[NOTE: Where you are concerned about a child who has just been born and due to lack of information none of the other decision trees apply, use this tree to identify your concerns such as inadequate preparation for the birth.]</p>
[Other notes]	<ul style="list-style-type: none"> • Further guidance on the Neglect, Carer Concern and Sexual Abuse Decision Trees is at https://reporter.childstory.nsw.gov.au/s/article/Guide-To-Selecting-A-Decision-Tree • After selecting the applicable decision tree, you will be asked a series of questions. It is important to read the accompanying definitions to complete a 'yes' or 'no' answer until a final decision is reached. At the end, a decision report will be issued with an explanation of the outcome based on your completed decision tree. • If your concern does not fit any of the decision trees, it is probably not reportable, but you may consult other professionals and/or your supervisor as appropriate.

The role of ECS workers stops here; Coordinators and ECS Manager only beyond this point

4.5 Reporting Children And Young People Who Are At Risk Of Significant Harm Outside ECS Services

The ECS Manager's role and the role of Building Communities Coordinator are the same. As mandatory reporters, if they have concerns about the safety, welfare or wellbeing of a child or young person, they use the MRG in deciding whether to report their concerns to the Child Protection Helpline or identify what alternative responses and supports should be provided. The procedure is:

<p>Step 1 - GET SUFFICIENT INFORMATION</p> <p>Get essential details:</p> <ul style="list-style-type: none"> • child or young person's details (name, address, date of birth, details of siblings) • incident details (date, type of risk, person's causing or contributing to harm) • impact of the incident on the child or young person • network of support around the young person <p>Get this information by:</p> <ul style="list-style-type: none"> • engaging with the child or young person and related services (eg. https://www.patchworknsw.net.au/ will enable you to quickly and easily view and connect with other professionals) [Standard 2: Children participate in decisions affecting them and are taken seriously] • exchanging information with other prescribed bodies working with the child or young person and their family. You are permitted to do this under Chapter 16A of the Care Act where information exchange relates to the Safety, Welfare and Wellbeing of the Child.
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Step 2 – DECIDE WHAT TO DO

Use all of the information available to you to appraise the risk, needs and strengths of the family.

Step 3 – USE THE MRG [see Recognising the Signs Using the MRG, above]

- If the outcome of the MRG is ‘Immediate Report to the Child Protection Helpline’ or ‘Report to the Child Protection Helpline’, contact the Child Protection Helpline and have ready the essential details from Step 1 & the outcome of the MRG. You can also make an eReport for non-immediate matters <https://kidsreport.facs.nsw.gov.au>
- If the outcome of the MRG is ‘Continue to monitor and support’, go to Step 4
- Even if a report is required, proceed to Step 4

Step 4 – FIND LOCAL HELP

Your service - Consider what additional steps your service can take, including:

- whether your service is best placed to discuss your concerns with the family
- whether your service can offer to provide additional interventions or change your current interventions to further address risk factors.

Beyond your service - Explore appropriate support services for the child/young person and their family. The following options may assist you:

- Contact www.familyconnectsupport@dcj.nsw.gov.au for help referring the family, child or young person to local support services such as housing or respite

4.6 Reporting Allegations Or Convictions Of Reportable Conduct Within ECS Services

At no time is an ECS worker to take sole responsibility of a child as a part of their ECS duties or provide personal care [eg. toileting or changing nappies], nor are they to be alone with a child without a parent present. Any ECS worker breaching these rules may be subjected to disciplinary action.

If a report is made about an ECS worker which suggests a child has been placed at risk or harmed, whether or not the report has been made by a co-worker under procedures described in this policy [3.4, above], the ECS Manager’s role and the role of Building Communities Coordinator is the same as above, in 3.5. Where appropriate, it will be recorded in the *Feedback & Complaints Register*.

Any acts that are a breach of the Crimes Act should also be notified to NSW Police and must also be reported immediately to the Management Committee [Standard 1&9]. Reportable conduct may include:

- (a) a sexual offence
- (b) sexual misconduct
- (c) ill-treatment of a child
- (d) neglect of a child
- (e) an assault against a child
- (f) an offence under section 43 B or 316 A of the *Crimes Act 1900*
- (g) behaviour that causes significant emotional or psychological harm to a child

5. IDENTIFICATION & RESPONSE TO ABUSE OF OLDER PEOPLE

Abuse of older people is any behaviour that causes physical, psychological, financial or social harm to an older person. The abuse can occur in any relationship where there is an expectation of trust between the person who has experienced abuse and the abuser. Abuse may involve a single act, repeated behaviour or a lack of appropriate action. Almost all forms of abuse of older people are crimes.

Older people are affected by other forms of abuse including consumer scams, harassment and criminal acts by strangers or more distant acquaintances, self-neglect or self-mistreatment, and in residential aged care settings. While these are serious issues requiring intervention, they are not included in the definition of abuse of older people.

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ECS recognises that abuse of older people does exist in the community and that, in the course of its work, workers may encounter suspected and actual abuse situations involving either care recipients or carers. ECS is also an active member of [and Secretariat for] Collaborative Against Abuse of Older People in Sutherland Shire [see <https://www.ecs.org.au/abuse-collaborative>].

5.1 Relevant Legislation & Players

There is no Mandatory Reporting of abuse of older people in NSW; however, the NSW Ageing and Disability Commission (ADC) abuse helpline at 1800 628 221 provides guidance, and can investigate suspected and actual abuse of older people, and ECS liaises with ADC as Secretariat to the Collaborative Against Abuse of Older People in Sutherland Shire. Assault is a crime and should be treated as such [see 2.2].

5.2 ECS Clients & Services Affected

As a provider of Australian Government-funded Community Aged Care Services, ECS is subject to quality standards which require procedures for responding to suspected and actual abuse of the older people who receive benefit from ECS services:

- Social Support Groups, both centre-based and bus outings
- Social Support for Individuals, including accompanied activities, home visiting and phone/web contact

As independent adults with entry-level needs [see ***Aged Services: Access to Services Policy***], older people who are at risk of or have experienced abuse will be:

- provided with information about available options
- encouraged and assisted to make their own decisions
- respected and given the choice to refuse services if competent to make the decision

Each ECS client has the right to be free from abuse. ECS staff and volunteers are required to treat all clients and everyone else who comes into contact with the organisation with respect and consideration at all times (see *ECS Team Agreement*). Where a sub-contractor is engaged, such as an exercise instructor, s/he is regarded as an ECS worker [see also ***WHS Policy***].

5.3 What Are the Risks to this Group?

Research suggests the following risk factors:

- Cognitive impairment and other forms of disability: impairment of physical and mental capacity (including through dementia) is associated with increased overall risk of abuse of older people
- Social isolation and traumatic life events: isolation both increases the vulnerability to abuse and makes it more difficult to identify abuse; women who have suffered (often unreported) domestic violence are also at risk of different types of abuse.
- There is evidence that depression, drug or alcohol misuse by older people can make them more vulnerable to abuse
- There is also a higher rate of abuse where the perpetrator is financially, emotionally or relationally dependent on the victim

5.4 Recognising the Signs

There are different forms of abuse. It is very important that the specific type of abuse is identified as there are different response options for each type of abuse. There are five commonly recognised categories of abuse: physical abuse; sexual abuse; financial abuse; neglect; and psychological or emotional abuse. Different forms of abuse often occur together; in particular, social abuse, in which the older person is cut off from communication with others, may enable other forms of abuse.

Please do not under any circumstances conduct your own investigation. Do not ask questions of older people or those around them - simply report to Coordinator.

The following outlines the different forms of abuses, the behaviours that illustrate each form of abuse and the signs of abuse that should be reported to the Aged Services Coordinator or ECS Manager for investigation:

<i>Type of abuse</i>	<i>Behaviours by abuser</i>	<i>Signs of abuse</i>
Physical abuse - Intentionally inflicting physical pain or injury or physical coercion	Hitting, slapping & punching; burning; restraining (eg. tying to a chair or bed); locking the person in a room; overuse or misuse of prescription	Injuries or bruises, lacerations, choke marks, abrasions & scratches; burns (such as from cigarettes, matches, an iron, rope); broken bones; unexplained hair loss (such as from pulling);

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	medications; use of other chemical restraints such as alcohol, household chemicals or poisons	missing teeth; eye injuries; pressure sores from the use of restraints; hypothermia or dehydration; & cringing or acting fearfully
Sexual abuse - Unwanted sexual acts including sexual contact, rape, language or exploitative behaviours where the older person's consent has not been obtained, has been obtained through coercion, or where consent is not possible due to cognitive incapacity	Non-consensual sexual contact, language or exploitative behaviour; inappropriate touching, grabbing or treating someone's genitals roughly; unwanted exposure to pornography; enforced nudity; sexual harassment	Trauma around genitals, rectum or mouth; injury to face, neck, chest, abdomen, thighs or buttocks; presence of sexually transmitted diseases; recent incontinence (bladder or bowel); internal injuries; human bite marks; scratches, bruises, pain on touching, choke marks on throat, burn marks; torn or bloody underclothing or bedding; anxiety when near the alleged perpetrator; changes in sleep patterns, sleep disturbances or nightmares
Financial abuse - The illegal or improper use or management of an older person's money, property or other financial resources	threatening, coercing or forcing an older person into handing over an asset (such as signing paperwork concerning property, wills or powers of attorney); abusing or neglecting powers of attorney & financial management orders in managing an older person's finances; misuse of financial management orders to the detriment of the older person; stealing goods (such as jewellery, credit cards, cash, equipment or other goods); using banking & financial documents without authorisation (such as credit cards); managing a competent person's finances without their permission & denying them access to their own money; appropriating the proceeds of goods (e.g. the home), or securing sale of the home by misrepresenting provision of future accommodation or care; pressuring the person to relinquish an anticipated inheritance as a gift or a loan; incurring bills or debt for which the older person is responsible	Unexplained or sudden inability to pay bills; significant bank withdrawals; significant changes to wills; unexplained disappearance of possessions; lack of funds for food or clothing; disparity between living conditions & money; recent addition of a signature on a bank account
Neglect - The failure of a responsible person to provide the necessities of life [adequate food, shelter, clothing, medical or dental care] to an older person; neglect can be intentional or passive	Failing to provide for the needs outlined above; refusing to permit others to provide appropriate care.	Inadequate nutrition, malnourishment & unexplained weight loss; inappropriate clothing (such as for the season); poor personal hygiene, unkempt appearance; poor skin integrity; hypothermia or overheating; being left alone, abandoned or unattended for long periods, or lacking in social, cultural, intellectual or physical stimulation; injuries that have not been appropriately cared for; exposure to danger or lack of supervision; absence of required aids
Psychological/ Emotional abuse - The infliction of mental stress involving actions & threats that cause isolation, fear of violence, deprivation & feelings of shame & powerlessness, as well as restricting or	Name-calling, degrading, or otherwise treating an older person as if they are a child; engaging in emotional blackmail; pressuring, intimidating or bullying; threatening to harm the person, other people or pets; preventing the person from speaking; repeatedly telling the older person that they are not	Depression or tearfulness; feelings of helplessness; excessive fear; confusion or agitation; appearing ashamed or resigned; unexplained paranoia; disrupted appetite or sleeping patterns; sadness or grief at the loss of interaction with others; changes in levels of self-esteem & marked passivity or anger

DUTY OF CARE POLICY

stopping social contact with others	capable or have impairment; threatening to withdraw affection or access to loved ones; threatening to put a person in a nursing home; preventing contact with family & friends or access to services; withholding mail or other contact; not allowing use of phone, email or internet, or monitoring communications, or disconnecting access without consent; preventing the person from engaging in religious or cultural practices; moving an older person away from their immediate family	
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The role of ECS workers stops here; Coordinators and ECS Manager only beyond this point

5.5 Reporting Suspected Abuse Outside ECS Services

The ECS Manager's role and the role of the Aged Services Coordinator are the same. If they have concerns about the safety or welfare frail aged person who is an ECS client, whether care recipient or carer, they will follow the five stages to identifying and responding to abuse, detailed in the *NSW Elder Abuse Toolkit*:

<p>Step 1: IDENTIFY ABUSE Consider whether a risk assessment is appropriate. Where you suspect, have witnessed or have had abuse disclosed, gather information. Always take an account directly from the victim rather than the 'carer' or family member.</p>
<p>Step 2: ASSESS IMMEDIATE SAFETY Evaluate the urgency of safety concerns. Contact emergency services where appropriate. Protect evidence. Report via internal channels.</p>
<p>Step 3: PROVIDE SUPPORT Listen, acknowledge and validate. Offer information to support fully informed decision-making. Refer to other services as appropriate. Inform management and document.</p>
<p>Step 4: REPORT SUSPECTED, WITNESSED OR DISCLOSED ABUSE Document the abuse and response according to ECS's policies and procedures. Document where the older person has made an informed decision not to accept intervention.</p>
<p>Step 5: RESPOND AND REFER Discuss the available options with the older person (not an intermediary). If the person does not have decision-making capacity, discuss the available options with the older person and their lawful substitute decision-maker. Offer information in an easily understood way. Seek consent from the older person or their substitute decision-maker for referral, then make the referrals. Where the older person makes an informed decision to not accept assistance, assess whether their safety is at risk or there is criminal activity. Be aware of the need for additional resources such as language or culture-specific supports. Understand when it is important to act without the consent of the older person.</p> <p>Understand when to refer to the NSW Police – staff should refer to internal policies clarifying situations when police must be called for reports of violence, abuse and neglect. Coordinate and monitor as appropriate.</p>

ECS acknowledges that each case of abuse is unique and that the determined interventions should take into account the nature and context of the abusive relationship and whether consent for intervention is given, other than in a situation where the law

requires the matter to be reported. The Aged Services Coordinator and/or ECS Manager will seek information and advice from a range of sources:

- the table at 4.4
- ADC
- the primary Regional Assessment Service (RAS) named on the ECS client's My Aged Care care plan
- the referral tool developed by the Collaborative, which contains local contact numbers and a flow chart, *Responding to the abuse of older people*

5.6	Reporting Abuse Allegations Within ECS Services
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In the case of allegations of abuse and neglect made by someone against ECS workers, ECSs complaints and grievance resolution policies and procedures will be adhered to (see **Complaints Policy**). Any allegation of abuse or neglect must be investigated and dealt with as a priority and as expeditiously as possible and must be reported to the ECS Management Committee.

People will be encouraged and supported to report allegations of criminal conduct to the police. Support will be offered and the ECS Manager's role and the role of the Aged Services Coordinator is the same as above, in 4.5. Where appropriate, it will be recorded in the *Feedback & Complaints Register*.