

Service User Protection Policy

1. Purpose

Inala Community House (ICH) is committed to delivering high quality services which provide and promote the safety and wellbeing of all service users, this is particularly important when working with vulnerable people. ICH aims to reduce the risk of harm occurring and to take an appropriate and caring approach where harm has occurred. ICH ensures that processes are developed with respect to appropriate risk management, legislative and regulatory requirements, and with the best interest of ICH's service users in mind.

This policy should be read in conjunction with all Inala Community House policies, procedures and any relevant legislation. Services may also have policies and procedures which operate pursuant to this policy.

2. Scope

This policy applies to all employees, Board members, volunteers, students, trainees and contractors. For the purposes of this policy, these persons shall be referred to as workers.

3. Definitions

Bullying: Repeated and unreasonable behaviour which may occur verbally, physically, or through social behaviour and is intended to cause distress and/or physical, social, emotional or psychological harm. Bullying can involve one or more persons. It can occur in person or through the use of technology. Bullying can have a significant impact upon persons involved, including witnesses.

Bullying does not occur where it is a single incident.

Cyberbullying is a type of bullying which frequently occurs on social media and other online forums. This can include:

- Posting photos of other people without their permission
- Sending offensive, derogatory or hurtful messages or posts
- Harassing someone online
- Excluding people from online activity
- Posting from another person's social media profile without consent or creating fake pages/profiles

Cyberabuse: is behaviour which uses technology to threaten, intimidate, harass or humiliate another person.

Sexual Harassment: means any unwelcome sexual advance, unwelcome request for sexual favours or other unwelcome conduct of a sexual nature, which, in the circumstance, a reasonable person would anticipate the possibility that the recipient would feel offended, humiliated or intimidated. A single incident can constitute sexual harassment however,

behaviour that is based on mutual attraction, friendship and respect is not sexual harassment.

Physical abuse: Any non-accidental physical injury resulting from practices such as: hitting, punching, kicking (marks from belt buckles, fingers), shaking, burning (irons, cigarettes), biting, pulling hair, alcohol and/or inappropriate drug administration.

Sexual abuse: Involvement of a person in a non-consensual sexual activity including any assault or abuse of a sexual nature, sexual exploitation, indecent exposure, sexual harassment or intimidation. For children, involvement in any sexual activity constitutes sexual abuse.

Emotional abuse: The chronic negative attitude or behaviour of one person which is directed at another person, or the creation of an emotional environment which erodes a person's self-esteem and social confidence over time. Behaviours may include insulting, bullying, devaluing, ignoring, rejecting, isolating, terrorising or other extreme acts in the person's presence. The exposure of children to domestic violence may also result in emotional harm.

Financial abuse: May include activities by a person who acts in violation of their powers, duties and responsibilities (e.g. under an Enduring Power of Attorney or trust) or who takes advantage of a person by coercing, intimidating, threatening or other adverse action in regard to their finances. This can include misappropriation of money, valuables or assets, forcing signatures on cheques, denial of access to personal assets, accessing a person's funds and forced or unauthorised changes to legal documents. This can also occur where a person takes advantage of another person (who has lost or is losing their capacity) by coercing them to enter into an arrangement where the person is unable to understand the nature and effect of the document.

Chemical abuse: Withholding or over-administration of prescribed medication, giving unnecessary medication (such as using a chemical restraint to control behaviour rather than for a medical reason).

Neglect: The failure of a caretaker to provide adequate supervision, emotional care, appropriate medical care, food, clothing, and shelter for a vulnerable person. Care must be taken as this can be contextual (e.g. poverty does not necessarily mean neglect).

Harm: refers to the detrimental effect or impact of actions (such as abuse, bullying or harassment) on a person's physical, emotional or psychological wellbeing.

Children: Includes any child or young person up to the age of 18.

Vulnerable people: Includes any person who may be at risk of harm or who lacks capacity to take care of themselves or is unable to protect themselves against harm or exploitation (those with diminished capacity to whom a greater duty of care is owed). This can include:

children, the aged, persons with a disability or illness and in some cases, this may also at times include those from culturally and linguistically diverse peoples (CALD) or those who have suffered trauma.

Reasonable suspicion: A reasonable suspicion is a belief that a reasonable person would form in the same position and with the same information. Whether a reasonable suspicion would be formed will always depend upon the circumstances and can be identified through a disclosure of harm and/or indicators of harm.

4. Policy

ICH seeks to ensure high quality, safe and supportive environments for all service users. ICH will ensure that appropriate systems are in place to safeguard and promote the safety of all service users.

ICH will at all times seek to comply with relevant laws and reporting obligations relating to service user protection.

4.1 Service User Rights

ICH seeks to uphold and promote the human and legal rights of all people.

Service users have the right:

- To be treated with dignity and respect and to receive services without exploitation, abuse or neglect
- To feel physically and emotionally safe, secure and valued
- To receive services without discrimination or victimisation
- To provide feedback or make a complaint about services received

ICH will seek to maintain a service users' rights by having effective systems which seek to safeguard and recognise these rights.

ICH will seek to act and make decisions in a way that gives proper consideration and is compatible with human rights (see the ICH *Human Rights Policy*).

4.2 Proactive Safeguarding

ICH has strategies in place which seek to proactively ensure the safety and wellbeing of all service users.

4.2.1 Workers

All workers at ICH are required to:

- Comply with the Code of Conduct which outlines appropriate and professional behaviours expected of workers.
- Comply with required screening and suitability checks in accordance with legislative requirements
- Complete harm training (as required) at least every two years
- Promote and uphold service user rights, safety and wellbeing
- Report incidences of harm in accordance with relevant laws and reporting obligations
- Undergo an Induction which provides information and training about this policy and any service specific policies and procedures including reporting requirements

To ensure the suitability of job candidates during recruitment, ICH will ensure that:

- Formal interviewing and selection of candidates occurs using a merit-based process which assesses their suitability for the role and their past experience working with clients, particularly vulnerable people
- At least two references are contacted (where possible) using questions which aim to establish the candidate's suitability for the role

4.2.2 Service User Engagement

To protect the safety and wellbeing of service users it is important to understand how, where and when they may be at risk. This includes having processes to manage any challenging behaviours exhibited by service users. ICH also recognises that previous trauma and harm may impact on the service user's situation and behaviour.

Risks for service users can be identified through processes which vary dependent upon the Service however this can include, but is not limited to:

- Consideration during case management processes including intake, assessment, planning and review
- Safety/risk assessment forms
- Home safety checks
- Interviews with family members/adult occupants
- Consultation with other stakeholders
- Previous history
- Information contained in referrals

It is important to recognise that service users can experience risks during intake or upon exit such as when transitioning to or from another service and also risks which may arise while services are being delivered.

4.3 General Risk Management

ICH recognises that incidents of abuse are unlikely to take place in front of another person. It is therefore essential that proper risk management strategies are in place to safeguard the wellbeing of all people, particularly vulnerable service users.

Given the broad scope of ICH services and programs, risk management strategies will vary according to the nature and scope of the activity.

All Services at a minimum have:

- Feedback and complaints frameworks
- Referral systems to appropriate support agencies (e.g. Family and Child Connect)
- Processes to determine whether police involvement is required or if the funding body should be notified
- Incident reporting processes

Where Services are not required to have direct contact with vulnerable people (as part of service delivery requirements), workers will avoid being alone with vulnerable service users (e.g. without a parent, guardian or other person present) wherever possible. Where this is not possible, alternative strategies may be used (as appropriate) such as:

- Having the contact in an open room or public location which is easily observed by others
- Monitoring and limiting the amount of contact time
- Regularly rotating workers

Where possible, workers will avoid being alone with a vulnerable service user in a vehicle. Where this is not practical, they should take service users directly to and from arranged venues and not spontaneously or unnecessarily detour, or make additional arrangements. Wherever possible, workers should notify their supervisor of any changes to the planned transport prior to this occurring.

Where possible, inexperienced workers will work with a more experienced worker when working with a vulnerable person. Where this is not possible, the inexperienced worker will consult with more experienced workers.

Workers will respect a service user's feelings and privacy when engaging in any form of physical contact. All physical contact must be professional and appropriate.

4.4 Identifying and Responding to Harm

Where harm is identified (whether through observation or disclosure), workers must respond appropriately to safeguard and support the service user. Workers may also be required to report harm in accordance with Service or Program requirements.

Disclosures or suspicions of harm relating to children and young people must be reported in accordance with the ICH *Child and Youth Risk Management Strategy*. This Strategy outlines mandatory, child sexual offences and internal reporting requirements.

4.4.1 Identification of Harm

Harm can be identified by observation, disclosure or a combination of both. Harm can occur through:

- Abuse (physical, sexual, emotional, financial, chemical, cyberabuse)
- Neglect
- Bullying (including cyberbullying), discrimination or sexual harassment

Harm can occur both within, and external to the organisation. It can also occur on a single occasion or over a longer period of time.

Identification can include but is not limited to:

- Physical injuries such as bruising, fractures, internal injuries, burns
- Emotional affects (e.g. their ability to express emotions) such as depression, hypervigilance, poor self-esteem, self-harm, fear/anxiety, changes in mood
- Psychological impacts (e.g. their mind and cognitive processes) such learning and development delays, impaired self-image, etc.
- Signs of neglect such as not receiving medical treatment, being underweight, poor clothing or hygiene
- Financial constraints such as someone else being responsible for/holding the service user's money/assets, pressure or coercion on the service user to make financial decisions for other's benefit, other people spending the service user's money without their knowledge or consent
- Chemical abuse signs can include unusual levels of confusion/disorientation

Other more general signs of harm can include but is not limited to:

- Difficulty sleeping
- Headaches, nausea or stomach aches
- Avoidance of normal activities

Where a disclosure of abuse is made, the worker who receives the disclosure will maintain appropriate pastoral care to the one making the disclosure. This will include:

- Creating a trusting environment where the person making a disclosure has a sense of safety and security
- Treating each allegation seriously and not attempting to deny the allegation or minimise its impact on the alleged victim. The matter should not be 'swept under the carpet' and no promises should be made about keeping the matter secret.
- Not pushing the person to disclose details of the alleged harm or attempting to investigate the allegation.
- Assuring the person that their disclosure is being taken seriously, that what has happened is not their fault and that they are correct in disclosing the incident.
- In some cases, where appropriate, offering choices and collaborating with the person to explore their preferred options for referral or non-referral
- Avoiding contact with the alleged perpetrator and if appropriate, the place where the alleged incident took place. If the worker is already working with the alleged perpetrator (as a service user), it may be appropriate for another person to assume this responsibility for the duration of any investigation.

All workers should carefully document and report any reasonable suspicions or disclosures of harm.

4.4.2 *Responding to Harm*

ICH is committed to creating safe spaces where either a victim or worker feels able to report any such harm.

Suspicions or disclosures of harm pertaining to a child or young person should be responded to in accordance with the *Child and Youth Risk Management Strategy*.

Workers must report reasonable suspicions of harm or abuse for all other persons to a member of the management team.

Where appropriate, ICH may appoint a worker/s with specific duties to deal with any allegations of harm or abuse.

The details of those reporting abuse will be kept private and confidential (except where disclosure is required).

If there is a reasonable suspicion that a service user or other person involved with ICH has been or is subjected to abuse, relevant authorities and agencies will be contacted. This may include: the police, the Department responsible for child protection, a funding body, ICH insurers or other agencies or bodies as required. This may also include where there is a disclosure of harm occurring outside of the organisation. Where possible and appropriate, ICH will promote the right of service users experiencing harm to control how information is collected and disclosed.

Where possible and appropriate, ICH will support those involved by:

- Contacting emergency services if there is an immediate threat to the safety of persons involved
- Encouraging reporting to appropriate authorities (such as the police or the Queensland Human Rights Commission, Office of the Children's eSafety Commissioner)
- Supporting access to resources produced by the eSafety Commissioner (for parents/carers and children/young people)
- Assisting and empowering service users to make a complaint with another organisation
- Referring to external support agencies

In responding to incidences of bullying (including cyberbullying) responses may include encouraging non-engagement with bullying and keeping records relating to bullying. In regards to cyberbullying, responses may include encouraging:

- Deletion of any offensive messages or posts
- Untagging from inappropriate posts

- Unfriending or blocking person posting inappropriate content
- Changing privacy settings and passwords on social media

These actions should take place after documenting the material, date and time (e.g. taking screenshots).

If harm has occurred within the organisation, depending upon the circumstances, an investigation may be required and actions may be taken in accordance with relevant policies and procedures.

Further responses may be required, if the harm has been perpetrated by another service user or person associated with ICH.

For workers involved, ICH will seek to provide support through debriefing, supervision and encouraging the worker to access the Employee Assistance Program.

All workers are required to keep information pertaining to harm or suspicions of harm confidential to the extent possible. All documentation which pertains to incidences of harm will be held in a secure location where a breach of privacy cannot occur.

4.5 Children and Young People

4.5.1 *Child and Youth Risk Management*

In accordance with the Blue Card requirements, ICH has a Child and Youth Risk Management Strategy (*the Strategy*) which contains:

- A statement of commitment to the safety and wellbeing of children and the protection of children from harm
- A code of conduct for interacting with children
- Procedures for recruitment, training and managing persons engaged or proposed to be engaged by ICH
- Policies and procedures for handling disclosures or suspicions of harm
- Processes for managing breaches of the Strategy
- Policies and procedures for compliance with the Blue Card system and Child Safety and Personal History Screening checks
- Risk management for high-risk activities and special events
- Policies and procedures relating to documentation, confidentiality and communication of the Strategy

ICH requires all workers to report disclosures or suspicions of harm for children and young people in accordance with the *Child and Youth Risk Management Strategy*. This includes reporting obligations for mandatory reporters and reporting of child sexual offences.

4.5.2 Discipline

It is not the responsibility of ICH workers to discipline a child. If a child does not abide by the rules set by ICH or becomes a risk to others the child should be removed and referred to their parent, guardian or other responsible person. If it is unsafe or impractical to remove the child and the child's behaviour is a risk to others then where possible, other individuals in the area should be removed to a safe place and the child should be monitored, kept safe and then referred to their parent, guardian or other responsible person.

At no time will ICH workers administer any form of physical, emotional or mental discipline. Where the child's behaviour poses an imminent risk to themselves or others, workers should seek to respond appropriately to either minimise or eliminate the risk, whilst ensuring the safety of themselves and others.

ICH workers may be required to provide guidance or support to parents, guardians or responsible persons regarding discipline, this shall be in accordance with positive behaviour support principles and practices such as role-modelling, positive reinforcement, skill development and other collaborative and inclusive approaches. This will always be provided with consideration of the individual's cultural norms and beliefs, unique circumstances, strengths, needs, insights and motivations.

4.5.3 Privacy

Adults and children are expected to respect each other's privacy, during times that require undressing, dressing or changing clothes. No worker should be alone in a room with a vulnerable person while these activities are taking place. However, in limited cases, workers may be required to assist a young child or baby with these tasks where their normal carer is not available. In this situation, assistance should be provided in a respectful and professional manner and in a way that minimises the length of this interaction and upholds the privacy and dignity of the child.

4.6 Breaches

Breaches of this policy may result in disciplinary action up to and including termination from ICH.

4.7 Responsibilities

All workers are responsible for:

- Acting professionally and respectfully with service users
- Promoting service user rights
- Reporting suspicions of harm
- Responding sensitively and appropriately to disclosures of harm
- Documenting any suspicions or disclosures of harm in a timely manner
- Maintain the confidentiality of all information relating to incidences of harm

The Management Team are responsible for:

- Promoting service user rights within the team
- Implementing appropriate risk management measures to safeguard the wellbeing of service users
- Ensuring appropriate systems are in place to identify and respond to incidences of harm
- Make reports to external bodies where harm or reasonable suspicions of harm have been identified (where appropriate)
- Ensure workers who are involved in situations where they have identified harm occurring or have a suspicion of harm are supported
- Maintaining confidentiality where required, which may include the reporter's identity
- Ensuring that workers have access to regular professional supervision and debriefing after critical incidents.

5. Review

A review of the ICH policies, procedures and actions may be required subsequent to any disclosure or reports of suspected abuse. Otherwise, this policy shall be reviewed annually.

This policy remains in effect unless otherwise determined by resolution of the Board of Directors.

6. Related Documents

Policies

ICH Suitability Policy
ICH Recruitment Policy
ICH Induction Policy
ICH Code of Conduct Policy
ICH Confidentiality Policy
ICH Human Rights Policy

Other Documents

ICH Child and Youth Risk Management Strategy
ICH Service user Service Charter