



Client Protection Policy and Reporting Guidelines

Whiddon

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Client Protection Policy

Policy Statement

Abuse or ill treatment of clients is unacceptable and will not be tolerated under any circumstances.

Whiddon's My Life Care model is aligned with our purpose and values and it is designed to guide all employees with their approach to care. It is structured around seven wellbeing outcomes and integrates care for our clients' emotional, social and physical wellbeing. We want our clients to feel safe and secure, and Whiddon will take all appropriate actions to safeguard clients from ill treatment or abuse for the duration of their contract with Whiddon.

Application of Policy

This policy applies to all care team members of Whiddon that have responsibility for the care of clients. Protecting our clients from abuse and neglect aligns with Whiddon's MyLife model of care by ensuring that we have systems and processes to prevent and identify abuse and neglect, that we monitor the health and wellbeing of our clients, and that we respect their rights.

Purpose

The purposes of this policy and procedure are as follows:

- to provide a framework for Whiddon team members to manage alleged and suspected abuse and neglect of clients. The framework includes assessment, internal reporting, and response processes.
- to ensure compliance with Whiddon's external compulsory reporting obligations as registered providers with the NDIS Commission (Reportable Incidents) and with other relevant agencies including the Department of Health.

Definitions

Abuse is the single or repeated act of harm or lack of appropriate action causing wilful or unintentional harm to a person by another person within any relationship where there is an expectation of trust. Abuse is a serious crime and contravenes basic human rights.

Abuse can include;

Psychological (Emotional) Abuse

Behaviour that causes mental or emotional suffering, isolation, fear of violence, deprivation and feelings of shame and powerlessness. Examples include demeaning, name calling, treating the client as though they were a child and/or insulting, frightening, humiliating, intimidating, threatening or isolating them.

Physical Abuse

The infliction of physical pain, injury or force including sexual assault. Examples include physical acts such as hitting, slapping, punching, pushing, burning, restraint, and misuse of medications. Physical

indicators may include bruising, lacerations, abrasions, burns, sprains, dislocations, fractures, hair loss and pressure injury. The reporting of such acts is compulsory.

Sexual Abuse

A range of sexual acts where the victim's informed consent has not been obtained or where consent has been obtained through coercion. Indicators of sexual abuse may include trauma to the genital area, rectum or mouth, presence of sexually transmitted infections, human bite marks, and anxiety around the perpetrator. Inappropriate touching that causes a person to feel violated or distressed. This includes sexual abuse of people who do not have the capacity to give consent.

Financial Abuse

The illegal or improper use of a client's property, finances and other assets without the informed consent of that person. This includes misuse of power of attorney, forcing or coercing a person to change their will, unexplained disappearance of possessions, and lack of funds for food or clothing.

Neglect

The failure to provide or allow others to provide a person with the basic necessities of life. Examples include inadequate food, shelter, clothing, medical, personal care or dental care. Neglect may also involve the refusal to permit others to provide appropriate care of the person. Indicators of neglect may include dehydration, poor skin integrity, malnutrition, inappropriate clothing, poor hygiene, unkempt appearance, and/or absence of required aids.

Roles and Responsibilities

All Team Members

It is the responsibility of every team member to report an allegation or suspicion of abuse and/or neglect immediately to the Coordinator or senior managers if the Coordinator is not available.

Approved/Registered Provider

The Whiddon executive and board have a responsibility to ensure that there is a robust system and process in the prevention and management of allegations or suspicion of abuse and neglect.

Coordinators and Managers

Coordinators and Managers are responsible for:

- Ensuring that all clients are free from harm by implementing immediate corrective actions to allegations or suspicions of abuse or neglect
- Reporting the allegation /suspicion in accordance with the internal escalation process
- Reporting the allegation/suspicion in accordance with the external process (such as Police, Aged Care Quality and Safety Commission, the NDIS Commission, the client's nominated substitute decision maker, the client's general practitioner)
- Undertaking a full investigation which includes but is not limited to interviews, statements, photos, roster reviews, medical reports, past history and care plan reviews.
- Documenting all findings and storing all completed documents in the risk management system in a timely manner
- Maintaining confidentiality and privacy
- Open and transparent reporting and communications (open disclosure)
- Ensuring Procedural Fairness is applied
- Working with key stakeholders to ensure that client's rights are respected, that employee rights are respected and that Whiddon is compliant with legislative requirements.

Quality, Care and Compliance Team

This team is responsible for:

- Ensuring that all reporting authorities have been informed with legislative timeframes
- Monitoring compliance with the process as required by both Whiddon policy, the NDIS Commission and the Aged Care Quality and Safety Commission.
- Ensuring the investigation process is undertaken
- Ensuring all documentation is timely and accurate
- Reporting to the Whiddon executive and board
- Identifying trends and opportunities for improvement in process, training and education.

People and Culture Team

This team is responsible for:

- Ensuring that all appropriate steps are taken in relation to all team members involved including but not limited to:
 - Suspension of team member/s following an appropriate review of all information relating to the matter;
 - Consider and/or action any immediate change of shift/area/location to assist with the management of the process.
 - Offering the Employee Assistance Program (EAP) to all team members involved
- Ensuring all documentation/correspondence is provided/attended in a timely manner.
- Providing assistance and support to the management team in a timely manner.

Learning and Development Team

This team is responsible for:

- Developing education modules in line with legislation and current policy
- Providing quarterly MyLearning reports of online module completion.

Media and Confidentiality

Disclosures of alleged or suspected abuse may attract media attention. Whiddon will use all reasonable endeavours to protect the privacy interests of all parties involved. Team members must not make any statement to the media. If a team member is approached to make a statement or comment, they must refer the person to the Chief Executive Officer; if the CEO is not available staff must contact a member of the Executive.

In cases of suspected abuse and neglect, the client's confidentiality is to be respected. The client has the right to decide what personal information is disclosed to outside sources, except in relation to Reportable Incidents to the NDIS Commission.

Support and Advocacy Services

Whiddon will use all reasonable efforts to provide or make support and counselling available to those who require it including: clients, family, the person reporting the alleged or suspected conduct, team members and other relevant people.

Whiddon will endeavour to provide staff with the opportunity for debriefing at a service level and support them by providing information about other available counselling options.

Whiddon will use all reasonable efforts to ensure that the clients subjected, or suspected to be subjected, to any form of abuse, neglect and/or assault is provided with and/or assisted to access opportunities for support, counselling and/or debriefing. This may include providing information on or contacting support or advocacy services.

Identifying and Reporting Abuse and Neglect

Abuse can take various forms such as physical, psychological or emotional, sexual, financial or material abuse. It can also be the result of intentional or unintentional neglect.

Abuse and neglect can occur in any setting including in the client's home, in residential care facilities or in the community.

Who commits abuse?

Perpetrators of abuse can include:

- family members;
- Whiddon team members;
- visitors (in a community care or residential care setting);
- volunteers; and
- staff from other service providers.

Not all forms of abuse are counted equally and workers must report to the police any instances where;

- The abusive situation results in injury being inflicted on a victim
- The perpetrator has access to a gun and is threatening to cause physical injury to a person
- The perpetrator is carrying a weapon such as a gun or knife and is behaving in a manner that is likely to cause harm or reasonable fear to a person.

Staff must report all instances of actual, alleged or suspected abuse and/or neglect immediately to their Coordinator or Manager.

Reporting of actual or suspected abuse and/or neglect to the Coordinator or Manager is required irrespective of a client's diagnosis (e.g. confusion, delirium, sepsis, cognitive impairment, or mental health issues).

Team members must report to the Coordinator or Manager when:

- a client tells them that they are or have been abused;
- a family member or friend tells them that they suspect the client is being abused;
- the perpetrator tells them that they are abusing a client;
- they observe an act that may be considered abuse or neglect;
- a client displays a change in behaviour or mood that may be a result of abusive behaviour;
- a client has unexplained bruising, scratches or other injuries;
- they have any suspicion of abuse or neglect.

The Coordinator must report the matter to the relevant Community Services Manager immediately.

Whiddon is committed to taking all reasonable steps to protect and respect the rights of Whiddon team members who make a report in good faith. All allegations and suspicions of abuse will be dealt with promptly, seriously, sensitively and confidentially. Provided a report is made in good faith, Whiddon will take all reasonable steps to protect team members who report actual, alleged, or

suspected abuse from the possibility of reprisal, demotion or victimisation. The identity of the staff member who makes the report will be kept confidential, to the extent permitted by law.

Responding To Abuse and Neglect

Immediate threat

In an emergency where there is an immediate threat to a client and others, team members should have consideration for the safety of the client, themselves and others.

The Police and/or the Ambulance should be contacted immediately. The team member should notify the Coordinator as soon as practicable and document the incident in the client's ComCare notes and the eQstats incident reporting module.

No immediate threat

When a team member witnesses or suspects abuse or neglect, they should firstly ensure that the client, themselves and others are safe. If there is no immediate threat, the team member should comfort the client as appropriate and notify the Coordinator immediately. The Coordinator will provide direction to the team member on what they are required to do. The team member is required to document the circumstances in both the client's ComCare notes and the eQstats incident reporting module.

In reporting actual or suspected abuse and/or neglect, team members must provide a factual account of their concerns using the specific words the client used, and details such as who were present, the date and time, what was observed or heard and what was done about it.

On receipt of a report of actual, alleged or suspected abuse, if there is no immediate threat, the Coordinator should

- place the interests of the client first;
- document the events; and
- determine if the client has capacity to understand the circumstances and make decisions.

Capacity

When responding to suspected or alleged abuse and neglect, the rights of the client must be respected. If the client has the capacity to understand the circumstances and make decisions, the Coordinator should raise the concern with the client and discuss their wishes. Clients with capacity have the right to make their own choices, including the right to refuse assistance. The client must therefore consent for the abuse to be reported to external agencies (except if it is a Reportable Incident as defined by the NDIS Commission).

The Coordinator should ensure that the client is made aware of their rights to:

- Make a complaint in accordance with the Complaints Management Policy or through the internal and external complaints mechanisms available, namely the Aged Care Quality and Safety Commissioner or the NDIS Commission, if the abuse or neglect involves a Whiddon team member.
- Contact Advocacy and Support Services.

The Coordinator should seek advice from senior managers to determine whether due to genuine safety concerns for the client, they may need to report the incident to Police despite possible issues of consent or confidentiality. If in doubt, Whiddon will seek legal advice.

Clients with Impaired Capacity

Where a client does not have the capacity to understand what is happening to them due to cognitive impairment, the Coordinator should consult their nominated representative. If the nominated representative is the perpetrator, the Coordinator will discuss with senior managers the most suitable course of action. This may include involving other family members or the relevant Trustee and Guardian organisation.

Wherever possible, the client will be encouraged and assisted to make their decisions based on information about all relevant intervention options available to them to address the situation of abuse.

Incidents involving physical and or sexual assault, theft or fraud are criminal offences and the organizations staff must ensure that the clients understand the seriousness of these crimes and of their need to protect themselves.

The right of the client to nominate an advocate to represent their interests in any abuse assessment or intervention shall be respected.

NDIS Commission Reportable Incidents

This information is taken directly from the NDIS Commission website and only applies to clients whose services are funded through the NDIS.. Registered NDIS providers are required to record and manage all incidents that happen in the delivery of NDIS supports and services in their internal incident management systems, and **notify the NDIS Commission of reportable incidents.**

Registered NDIS providers must notify the NDIS Commission of all reportable incidents (including allegations), even where the provider has recorded and responded within their own incident management system.

For an incident to be reportable a certain act or event needs to have happened (or alleged to have happened) **in connection with the provision of supports or services by the registered NDIS provider.** This includes:

- The death of a person with disability
- Serious injury of a person with disability
- Abuse or neglect of a person with disability
- Unlawful sexual or physical contact with, or assault of, a person with disability
- Sexual misconduct, committed against, or in the presence of, a person with disability, including grooming of the person with disability for sexual activity
- Unauthorised use of restrictive practices in relation to a person with disability.

There are key steps for registered NDIS providers to notify the NDIS Commission about reportable incidents. These are outlined below.

STEP 1. Notify the NDIS Commission

- The Immediate Notification Form must be submitted via the [NDIS Commission Portal](#) **within 24 hours** of key personnel becoming aware of a reportable incident or allegation.
- The Immediate Notification Form includes a number of sections and questions, concerning details of the reportable incident, actions taken in response to the incident and the individuals involved in the incident.
- An exception to this rule is notifying the NDIS Commission of the use of a restrictive practice that is unauthorised or not in accordance with a behaviour support plan. In these instances, the provider must notify the NDIS Commission within five business days of being made aware

of the incident. If however, the incident has resulted in harm to a person with disability, it must be reported within 24 hours.

- To notify the NDIS Commission of an incident the authorised 'Notifier' or 'Approver' needs to login to the NDIS Commission Portal and select 'My Reportable Incidents' tile at the top of the screen. From here, you will be able to complete an Immediate Notification Form.
- The NDIS Commission suggests the '**Authorised Reportable Incidents Approver**' is the person you want to have the authority to review and be responsible for submission to the NDIS Commission. This could be the person specified in your incident management system who is responsible for reporting incidents to the NDIS Commission. The authorised 'Approver' will have the ability to submit new Reportable Incidents and view previous Reportable Incidents submitted by their organisation.
- The NDIS Commission suggests the '**Authorised Reportable Incidents Notifier**' is a supporting team member who can assist the 'Authorised Reportable Incidents Approver' to collate and report the required information. The authorised 'Notifier' will have the ability to create new Reportable Incident notifications to be saved as a draft for review and submission by the authorised 'Approver'. The authorised 'Notifier' will need to inform the authorised 'Approver' that the Incident is awaiting their review and submission. The 'Notifier' can also view past Reportable Incidents they have created through the page.

STEP 2: Submit a 5 Day Form

- The 5 Day form must be submitted via the 'My Reportable Incidents' portal **within five business days** of key personnel becoming aware of a reportable Incident. This provides additional information and actions taken by the NDIS registered provider.
- The five-day form is also to be used for incidents involving the unauthorised use of a restrictive practice, other than those resulting in immediate harm of a person with disability.

STEP 3. Submit a final report, if required

- You may be required to provide a **final report**. When this is the case, the NDIS Commission will notify you via email and tell you the date this is due.
- If you are required to submit a final report, you will have access to the final report fields on the NDIS Commission Portal for that incident.

There are key considerations for registered NDIS providers. In all cases, providers must assess:

- The impact on the NDIS participant.
- Whether the incident could have been prevented.
- How the incident was managed and resolved.
- What, if any, changes will prevent further similar events occurring.
- Whether other persons or bodies need to be notified.

Where appropriate, the NDIS Commission may require a provider to take remedial measures. The NDIS Commission may work with the provider to implement these measures, and monitor progress. Remedial measures may include, but are not limited to, additional staff training and development or improved services to support NDIS participants and updating policies and procedures.

Investigation Process

The Coordinator with the assistance of the relevant Community Services Manager (or delegate) must conduct an internal investigation without delay into all reported allegations or suspicions of abuse and/or neglect. Whiddon's Critical Investigations Manual and documents may be used to ensure a consistent approach. The following must be completed in a timely manner including

- Ensure the incident has been documented in eQstats with immediate actions taken to secure the safety and wellbeing of the client and others documented
- Record contacts to substitute decision maker/general practitioner and all other relevant stakeholders

- Ensure emotional support is offered to the client and others as appropriate and that this is monitored and documented.
- Undertake the investigation completing the reporting in eQstats Step 8
- Upload all relevant supportive documents into eQstats – Step 7 interviews/statement, photos/memorandums /meeting minutes /counselling and disciplinary notations (if appropriate)
- Update the client’s care plan as required
- Undertake case conferencing with the client and / or their preferred representative as required
- Document in ComCare
- Provide emotional support as per the preference of the client

All reasonable steps must be taken to avoid contact between the alleged victim and the alleged perpetrator until the reported abuse has been investigated and resolved to the satisfaction of those concerned. This may include suspension of an employee on full pay pending the completion of an investigation. This must be approved by an Executive Manager.

Grievances

Concerns relating to the implementation of this policy and any associated guideline or procedure should be addressed under the Grievance Handling Policy.