SAFESpace Disability Training

Risk of Harm – discussion points

The *Risk of Harm* video is designed to assist viewers who have a responsibility for creating and maintaining child safe organisations. The intention of the videos is to promote discussion around four main topics in a child-related setting:

* recruitment processes
* risk management
* restrictive practices
* reporting allegations

This document should be used to allow learners to reflect on the actions of the staff at Cathcart Towers Before and After School Care Centre and consider the risks that children have been exposed to as a result of poor practice and policy. To assist viewers there are suggested answers and conversation points toward the end of this document.

This document is designed to complement the videos by providing discussion points and conversation starters on the topics it addresses. It should be used in conjunction with the Safe Space disability eLearning package or the OCG’s Child Safe eLearning package and the Family and Community Services Behavioural support policy.

Recruitment processes

1. Consider both recruitment scenarios. Which did you think was the better recruitment process? Why?

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1. Poor recruitment can result in hiring the wrong person for the job. What might be the consequences of not having a good recruitment policy and thorough recruitment process?

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1. Can you identify three elements of Caitlin’s recruitment which demonstrate a poor recruitment process?



1.

2.

3. 

1. Can you identify three elements of Serafina’s recruitment which demonstrate a good recruitment process?



1.

2.

3. 

1. In Serafina’s recruitment she was asked a variety of questions, these were a mix of:

* ‘direct’ questions
* ‘values-based’ questions
* ‘situational’ questions

Can you list one example of each type of question?

a.

b.

c. 

1. How effective do you feel Soon Le’s call to Serafina’s referee was? Why?
2. What were the positive aspects of Soon Le’s call to Serafina’s referee? And how could it have been improved?

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1. After offering Serafina the job, what formal induction processes were followed?

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| 1. Was Cathcart Towers’ organisational culture reflected in each scenario? Did you feel children were important in to the organisation?   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |

Risk Management

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|  | 1. Do you feel the organisation should have a say in whether Ben has access to his wheelchair? Why?   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

1. Did Cathcart Towers follow appropriate risk management procedures for Ben’s chair?

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1. When should the planning and risk assessment been done for Ben’s wheelchair?

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| 1. Are there any other behaviours in the video that could expose a child to a risk of harm?   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |

1. Does your organisation have a policy around physical interaction (touch) with children? Is it communicated to all staff?

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1. What is your organisation’s policy around children being given gifts? Or being offered lollies?

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1. Can you list some reasons why Alison may be at risk of harm from Caitlin?

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|  | 1. How well do you feel risk management was dealt with in the Cathcart Towers’ staff meeting?   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Restrictive Practice

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| 1. Name the policy document your organisation should consider if it intends to use restrictive practice.   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |

1. What ‘restrictive practices’ did Caitlin use on Ben? Did she refer to the policy document in question 17? Or did she use a prohibited practice?

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1. Did Ben’s apparent inability to follow Caitlin’s rules with the new wheelchair require the use of restrictive practice? If not, why not?

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1. In the FACS Behaviour Support Policy document, what is required before restrictive practices can be used?

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1. What is the difference between ‘restrictive practice’ and ‘abuse’?

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1. What should Caitlin have done if she felt Ben and his wheelchair was a danger to others?

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Reporting Allegations

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|  | 1. What do you think made Ben feel confident enough to talk to Serafina about how he was feeling?   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

1. What policy should Serafina follow if she thinks Ben has been harmed?

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1. Why is it important that all breaches of policy are reported, regardless of how minor?

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1. Why do you think staff at Cathcart Towers didn’t report the breaches of policy earlier?

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| 1. Do you think Soon Le should have told the staff that Caitlin had been barred from working with children?   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |

1. What should happen if Serafina has uncovered Caitlin has abused Ben?

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| Notes: |

SAFESpace Disability Training

Answers

**Recruitment Processes**

1. Serafina had a robust recruitment process that included:

* panel selection
* pre-determined questions
* Serafina providing the name of a referee who could describe her skills and ability in a professional capacity and more specifically, speak of her experience in a child-related role

1. The consequences of a poor recruitment process include:
   * costs to the organisation in terms of recruitment, dismissal, training etc,
   * staff who are barred working with children without a Working With Children Check
   * financial penalties for an organisation failing to comply with WWCC legislation
   * a risk to reputation for hiring unsuitable or difficult staff
   * a risk to reputation where a children have been abused by the staff member
2. The elements of Caitlin’s recruitment which demonstrated a bad recruitment process include:

* Cathcart Towers not appearing to have a Recruitment Policy
* Danielle appearing unorganised and unprepared without time set aside for the interview
* The interview appearing informal which could indicate to a perpetrator that Cathcart Towers is an easy place to groom children and manipulate staff
* a single interviewer – an interview panel is more likely to gain a better insight into a person’s suitability for the role
* ‘basic’ questions which are not specifically targeted to obtain behavioural or situational responses
* Danielle not probing Caitlin when she failed to answer questions appropriately (‘Do you follow policies?’ ‘Of course. You have to tick all the boxes, don't you?’)
* Caitlin referring to inappropriate interactions with children: ‘I have a calling to work with kids. At the last place I was able to form a bond with one of the most challenging ones. She was a real loner, but we got on really well. I'm still in contact with her family.’ This statement indicates she may not fully understand appropriate interactions with children and their families and has a history of crossing professional boundaries.
* Caitlyn having a poor work history which indicated short term jobs with dubious reasons for leaving ‘Just not a good fit. They were very strict.’ and ‘…the supervisor and I didn't see eye to eye. She was overly critical.’ Both could be indicators that she is a difficult member of staff.
* Caitlin nominated poor referees: one was a relative and the other had not employed her in a child-related work scenario

1. Elements of Serafina’s recruitment which demonstrate a good recruitment process include:

* the use of a panel allowing more than one impression to be formed of Serafina
* structured pre-determined process and questions
* the use of different kinds of questions
* a formal setting away from distractions

1. Examples of the various types of questioning include:

* ‘Direct’ questions: ‘Serafina, can you please tell us what kind of experience you've had working in child care?’
* ‘Values-based’ questions: ‘What would you like to see a child personally achieve from participating in our activities?’
* ‘Situational’ questions: ‘Have you ever been annoyed by a child's behaviour? What did you do about it?’

1. Soon Le’s call to Serafina’s referee included the following positive questions:

* Soon Le explored how long Serafina had worked in her current position and checked her dates of employment
* she asked about her attitude towards professional development and confirmed her qualifications
* she asked about her strengths

Soon Le’s call to Serafina’s referee could have been improved by asking:

* what the referee believed were Serafina’s weaknesses
* what specific tasks were performed in her role
* what management style she responded well to
* about her honesty and integrity, attendance and punctuality – and requesting examples to support their opinions
* what her pay rate was (useful for determining competence for a new position)
* what the reason for leaving the organisation is, as the referee understands it?
* how they knew Serafina – professional versus personal capacity

(For more information on recruitment, see the OCG’s page on recruitment [here](http://www.kidsguardian.nsw.gov.au/child-safe-organisations/become-a-child-safe-organisation/staff-recruitment-and-management/recruitment--induction-and-training).)

1. Formal induction processes for Serafina included:

* assigning Tyrone as her mentor.
* work time being allocated for her to read and understand Cathcart Towers’ policies and procedures.
* being provided with an induction manual containing the organisation’s ‘Code of Conduct, updated Policies and Procedures etc.’

1. Potential perpetrators may assess an organisation in order to determine how easy it is to commit abuse – and how likely they are to be caught. These outcomes are indicated by an organisation’s culture. Discussion points include:
2. For Caitlin, the first thing she saw in the Cathcart Towers building was a staff member on a phone – this suggested people were lax when it came to policies about phone use.
3. Danielle’s interview was unprofessional, which reflected poorly on Cathcart Towers.
4. In Serafina’s situation, she experienced a structured interview, which reflected a commitment to a positive recruitment outcome. The interview questions were tailored towards a child safe culture, which demonstrated that this was a priority for Cathcart Towers.
5. While there were instances which indicated children were valued in the organisation, when Serafina was introduced as a new staff member for the first time by Soon Le, all the adults were acknowledged – but the children were ignored. This reflects poorly on Cathcart Tower’s organisational culture and how it values children

Risk Management

1. Every child should be given the opportunity to live to their full potential. As far as we can see, Ben appears capable of controlling his new chair. The organisation has a duty of care to everyone in the premises, it should conduct a risk analysis for any significant change in circumstances, such as Ben progressing from manually operated wheelchair to a motorised one.
2. The right risk management procedures weren’t followed, because ideally Cathcart Towers should have conducted a risk analysis *prior* to delivery of the chair. Conducting a robust risk analysis and using tools like a risk matrix are appropriate assessment tools, however it’s worth noting that despite Caitlin’s assessment that Ben’s use of the chair was a ‘severe risk’ to others, senior staff ignored the finding and overruled it. No plan was put in place to review or modify the use of the chair. If Soon Le felt Caitlin’s assessment was harsh she could have considered what more should be done to ensure a thorough risk assessment was conducted to ensure the safety of children and staff.

It should be noted that not all risks can be eliminated but that doesn’t mean they can’t be managed so that the likelihood of harm occurring is minimised, and that the harm itself is reduced.

1. Risk assessment is ideally a proactive activity. In this case, it was reactive because the risk analysis occurred after the chair arrived and was conducted by a potentially inexperienced staff member identifying the risks they had observed. As well as prior to a significant change, or the introduction of new equipment, a risk analysis should also be undertaken after critical incidents, and at regular intervals.
2. There were behaviours that could expose a child to a risk of harm. Caitlin’s attitude towards Alison could indicate she was grooming Alison in an attempt to harm her. This was evident in Caitlin’s disregard for the Child Safe polices of Cathcart Towers – she practiced favouritism, gave Alison gifts and showed her images on her phone, all of which contravened the centre’s policies and all of which went unreported by colleagues. It could be argued that Caitlin was never made aware of these policies as the video suggests they were never provided.

Caitlin also practiced seclusion towards Ben (this topic and the use of restricted practice is discussed later in this document.)

1. Organisations will have different policies on physical interaction with children. The policy will be dependent on the level of interaction required, such as providing toileting assistance or nappy changing. Organisations providing personal care will need a more detailed policy than a football club, for example, which does not provide intimate care.

In these situations policies should be in place to prevent circumstances occurring where a child could be harmed. In other situations, physical contact is something that children need for healthy personal development, however the *type and level* of contact needs to be considered. If a swimming teacher is required to touch a child to support them in the water or to correct a technique it is appropriate to explain the physical interaction to the child and ask their permission. If permission is not granted, the adult needs to to find a way to communicate their lesson *without* touching the child. In all cases, policies should be developed and created – and then adhered to. Policies should align with commonly accepted guidelines for the behaviours they describe.

1. Gifts and benefits may be a form of grooming. They can include the giving of gifts or allowing a child to ‘break the rules’ that then enable the adult to threaten or bribe the child. Giving gifts can also help the adult to exclude the child from their peers (a source of support for the child.) If the child is considered the favourite, other children may further exclude the child. Grooming is the manipulation of a child (or adults, or organisations) to cover and allow inappropriate behaviour.
2. Alison may be at greater risk of harm from Caitlin than Ben because:

* Alison’s seems eager to please Caitlin as she appears highly vulnerable to suggestion.
* Caitlin isolates Alison, making her a ‘favourite’. She gives her chocolate, asking her not to tell anyone and she spends most of her time with Alison to the exclusion of Ben, who she is also supposed to be caring for.
* Caitlin shows Alison images on her phone in contravention of the organisation’s Child Safe policy. While the images appear innocent, this may be Caitlin’s way of testing Alison to see if she is prepared to tell anyone. Furthermore, if Caitlin is intending to harm Alison she may begin to show Alison more inappropriate images, breaking down Alison’s resistance to being harmed.
* Caitlin takes Alison into areas that she is not allowed, such as the staffroom, to show her images on her phone and sitting her on her knee – a contravention of Cathcart Towers policy.
* Caitlin’s behaviour seems consistent with grooming, not only Alison, but also her colleagues. She has successfully manipulated her colleagues into ignoring her poor behaviour and not reporting her for breaches of the organisation’s policies.

1. Risk management was represented in the Cathcart Towers staff meeting when Soon Le stated her intention to address policies at every staff meeting, which was a positive approach.

Soon Le also stated that she intended to explore each policy thoroughly – yet she then skipped over disciplinary policy saying ‘I can't see we're going to have any issues here. Just have a quick glance and get back to me if you have any questions.’ This approach to policy review would demonstrate that the policies are not embedded into everyday practice. It also shows they are not a valued part of the culture at Cathcart Towers as Soon Le doesn’t explore the relevance of the policy or examine how it supports a child-safe approach.

Restrictive Practices

Restrictive Practices are any practices that impose a restriction on a person’s rights or freedoms, including children. Restrictive practice should be considered as any practice or strategy which is inherently restrictive, impacting on the rights, freedom or dignity of a child with disability.

Any use of restrictive practice must be as part of a behavioural management plan created within the guidelines set out in the FACS [Behaviour Support Policy](https://www.adhc.nsw.gov.au/__data/assets/file/0007/228364/Behaviour-Support-Policy.pdf).

Some practices can be so restrictive that their use requires additional safeguards and therefore their use is restricted. These practices and the accompanying safeguards are outlined within the Behaviour Support Policy.

Where support strategies are used with the intention of influencing or changing behaviour they must be sanctioned by means of a documented:

* Behaviour Support Plan (BSP) *or*
* Incident Presentation and Response Plan (IPRP)

These support plans need to be developed in accordance with ADHC work practice requirements for behaviour support services. Where a documented BSP recommends the use of certain strategies or practices which impose restrictions on a child’s rights or freedom, they must be justifiable in the context of ADHC work practice requirements and may be considered for implementation only with legal consent.

1. From what we know Cathcart Towers did not have a Behaviour Support Plan (BSP) in place for Ben – in reality what Caitlin did was make a personal choice to act in an abusive way. It was not an example of restrictive practice.

In threatening to take Ben’s chair away, Caitlin’s was suggesting a form of punishment rather than a sanctioned form of restrictive practice. Additionally, locking Ben in a room where he is unsupervised and unable to leave is seclusion, which is also a **prohibited practice**. Neither punishment nor seclusion are **permitted** to be used on a child under 18.

Giving Ben food where there is evidence he does not like it is an aversive experience for Ben and could be considered punishment or a form of abuse. Creating an aversive experience is a **prohibited practice**.

It is worth noting that the NSW Department of Education uses the Positive Behaviour for Learning (PBL) framework. This focuses on the use of strategies to address concerning behaviour that do not rely on the use of restrictive practices. This largely aligns with the ADHC behaviour support practice requirements

1. Children who display ‘challenging behaviour’ or ‘behaviours of concern’ may be subjected to restrictive practices if the child is perceived to be in danger of harming themselves or others. Prior to recommending a restrictive practice, all potential non-restrictive options should be considered.

As restrictive practices are used as interventions that restrict the rights or freedoms of movement of a child with disability, protocols exist that describe initially using the least restrictive option, and escalating a response only if behaviour escalates. Identification of what symptoms or behaviours indicate escalation of behaviour is occurring (which require a consequent escalation of the form of restrictive practice being used) should be described in relevant support plans.

The fact that no other staff member saw Ben acting in a dangerous manner while using his wheelchair could mean he was not a danger to himself or others, and that he was instead subject to Caitlin’s manipulation. A plan to use restrictive practice should not have been considered in this instance.

1. A restrictive practice may be recommended for use as a component of a behaviour support strategy only within the context of a documented behaviour support plan or incident prevention and response plan which has been developed in accordance with ADHC work practice requirements for behaviour support services.

Before restrictive practices can be used, there should be:

* identification of what behaviour requires restrictive practice
* a behaviour support plan or incident presentation and response plan
* consent from parent or carer or person who has parental responsibility
* authorisation via a mechanism which considers the appropriateness of a documented support plan or strategy

1. Restrictive practice is used for the management of challenging behaviours where other methods have not worked or some additional behaviour supports are required. The use of restrictive practice is not considered a long term solution.

Where the requirements listed above (question 20) have not been met then the use of restrictive practice is abuse.

1. If Caitlin felt Ben was a danger to others in his wheelchair it would have been more appropriate for her to provide Soon Le with documented examples and incorporated these into her risk assessment. Instead, Caitlin diverted attention from her lack of skill and ability to correctly assess the situation and instead blamed Ben.

Reporting Allegations

1. Serafina demonstrated compassion and empathy towards Ben in a way that Caitlin didn’t. She:

* engaged his trust, and let him know she wanted to hear what he had to say.
* talked about the Cathcart Towers Code of Conduct, which stated that all children have a right to be heard.
* attempted to make him feel empowered enough to speak.
* facilitated his desire to communicate by use of his speaking cards

1. Serafina should access the Cathcart Towers ‘Reporting allegations and complaints’ policy in order to act appropriately following Ben’s disclosure. If she felt she needed further assistance Serafina could speak to her manager, FACS (Child Protection Helpline 132 111 or for mandatory reporter 132 627 or www.keepthemsafe.nsw.gov.au) NSW police 131 444, the Cathcart Towers child wellbeing unit – if it had one – and the NSW Ombudsman office regarding her obligations to Ben’s safety and how to report the allegations.
2. Staff members at Cathcart Towers witnessed the following inappropriate conduct
   * Tyrone witnessed Caitlin breach Cathcart Tower’s policies when he saw Caitlin showing Alison things on her phone, when he saw Alison in the staffroom where children were not permitted, and seeing Alison sitting on Caitlin’s lap
   * Danielle said she sometimes saw Caitlin with Alison on her knee
   * Serafina found out from both Tyrone and Danielle that celery was not a food that Ben liked, even though Caitlin had indicated it was on his file.
   * Soon Le also indicated she had seen Caitlin breach policy.

It’s important that all breaches of policy are reported because while some breaches might appear unimportant or as a colleague you may believe that it’s ‘un-Australian’ to ‘dob in a mate’, when looked at as a pattern of behaviour, Caitlin’s actions could be an indicator that she was grooming Alison in an attempt to harm her.

1. It’s possible that the breaches were not reported because Caitlin appeared innocent and well-liked by her colleagues – presumably because she was grooming them to see her in this way. As Soon Le says, ‘She seemed so nice.’ It could also be that in Cathcart Towers a poor organisational culture accepted that it was OK to break the rules for minor things, or there is a ‘mate’s code’ about not dobbing in each other. In the video Tyrone correctly states ‘If you see something, you should say something’ but Tyrone was also seen a number of times on his phone, on at least one occasion in breach of the policy of not using phone near children. Applying policies that guide appropriate behaviour consistently will provide a safer environment for children.
2. In deciding whether Serafina breached Ben’s privacy in letting Danielle and Tyrone know he had made a disclosure, it should be asked *why* she told them. As she is the manager, it would be expected that Soon Le was informed. It could be that Danielle and Tyrone are part of the management team, but if not, perhaps they shouldn’t have been informed. A reporting policy should outline the appropriate ways a member of staff should raise concerns of child abuse or harm.

Soon Le may have breached Caitlin’s privacy by telling Danielle and Tyrone that she was barred – and also because the door was open, as their conversation could be overheard. Having a Working with Children Check policy that includes how to respond to barred notifications assists organisations to act appropriately.

1. In cases of disclosure, the Cathcart Towers Reporting policy should be referred to. If the disclosure indicates a criminal matter, then the matter should be referred to NSW police. As mandatory reporters the policy should outline the next steps in reporting the matter to Family and Community Services (FACS). Soon Le should seek advice from the Cathcart Towers Child Wellbeing Unit or child protection officer.

The organisation, as a provider of services to children with disability, will also have reporting obligations to the NSW Ombudsman.