

Office of the
Children's Guardian

Annual Report 2024-25



Acknowledgement of Country

We acknowledge the Traditional Custodians of the land where we live, learn and young people play. We celebrate the longest living cultures in the world, Aboriginal and Torres Strait Islander peoples.

We pay respect to Elders past and present and commit to respecting the lands we walk on, and the communities we walk with. We acknowledge their continuous connection to Country, including the land, waterways, and skies.

We reflect on the ongoing impacts of government policies and practices and recognise our responsibility to work together with and for Aboriginal and Torres Strait Islander children, families, and communities.

We extend this acknowledgment to all Aboriginal and Torres Strait Islander peoples across NSW and recognise the unique and vital contributions they provide in keeping their children safe.

Artwork on this page
with thanks to Wiradjuri woman,
Lua Pellegrini



Letter of submission

The Honourable Ben Franklin MLC
President of the Legislative Council
Parliament House
SYDNEY NSW 2000

The Honourable Greg Piper MP
Speaker of the Legislative Assembly
Parliament House
SYDNEY NSW 2000

Dear Mr President and Mr Speaker,

In accordance with sections 138 and 141 of the *Children's Guardian Act 2019*, I am pleased to present to Parliament the Office of the Children's Guardian Annual Report for the 2024–25 financial year.

The Annual Report has been prepared in accordance with the *Government Sector Finance Act 2018* and the *Children's Guardian Act 2019*.

As provided by section 141(2) of the *Children's Guardian Act 2019*, I recommend that this report be made public forthwith.

Yours sincerely,



Rachael Ward

Acting Children's Guardian

Foreword

Our annual report outlines our safeguarding work across NSW.



The people of the OCG have remained resilient during a time of uncertainty in the first half of 2025 with a Special Ministerial Inquiry into our culture and workplace practices announced in late February 2025. I commenced the role as Acting Children's Guardian at the beginning of March 2025, and I have witnessed the staff's passion for their work and unwavering commitment to the safety of children and young people and vulnerable people living with disability.

It is with great pleasure that I present the Office of the Children's Guardian (OCG) Annual Report for the 2024–25 financial year. This report outlines our safeguarding work across NSW.

This past year, the OCG continued to implement its Strategic Plan and supporting Business Plan, which will be reviewed and updated in line with the Ministerial Inquiry recommendations. Our strategic priorities, including "Being a model administrator and oversight body," have been, and will continue to be, a guiding force in our work.

A significant achievement for the OCG this year was the implementation of a new business planning process. This has allowed us to link our strategic priorities to tangible business activities and key performance indicators. We also undertook key legislative reform work, including progressing the review of the *Children's Guardian Act 2019* and the *Child Protection (Working with Children) Act 2012*.

We have made significant progress in key operational areas, including the Child Safe Scheme, Working with Children Check, Reportable Conduct Scheme, and Out-of-Home Care and Adoption. Our work to improve First Nations outcomes has also been a priority, with projects like engaging Curiyo and Yamurrah to provide cultural supervision and support.

The dedication of our team and our collaborative work with our stakeholders have been instrumental in our achievements this year. The Inquiry report was tabled on 10 September 2025, and as we look ahead to the future of the OCG and building a workplace culture we are all proud of, we remain unwavering in our commitment to our mission of ensuring the safety and wellbeing of children and young people across NSW.

My sincere gratitude goes to the dedicated people of the OCG, our valued partners across the state, and the communities we serve. Your tireless efforts and collaborative spirit are the cornerstone of our success in creating a safer future for our children and young people.

As we look to the year ahead, I am committed to a positive transformation of the OCG and fostering staff collaboration to deliver our important functions.

Rachael Ward

Acting Children's Guardian

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Overview

The Office of the Children's Guardian's reporting framework and management structure.

Reporting Framework

The *Children's Guardian Act 2019* requires the Children's Guardian to provide an annual report to NSW Parliament on our operations.

The Children's Guardian is an independent statutory officer, appointed by the Governor and reports to Parliament. However, the Children's Guardian reports to the Minister for Families and Communities in relation to the administration of the legislation relating to their statutory functions.

The Joint Parliamentary Committee on Children and Young People monitors the execution of the Children's Guardian's functions under the *Child Protection (Working with Children) Act 2012*, and Parts 3A, 4 and 9A of the *Children's Guardian Act 2019*, and in relation to out-of-home care.

The Office of the Children's Guardian (OCG) meets its obligations under the *Government Information (Public Access) Act 2009* and other reporting frameworks listed in our [Legislative Compliance Policy](#).

Management and Structure

The executive team as of 30 June 2025 comprised:

Ms Rachael Ward, Acting Children's Guardian

Bachelor of Laws, Diploma of Legal Practice

Mr Steve Kinmond, Children's Guardian

Bachelor of Arts, Bachelor of Laws, Diploma of Education, Diploma of Criminology,

Diploma of Legal Practice

Ms Ada Leung, Director Corporate Services

Bachelor of Commerce,

Canadian Chartered Accountant,

American Certified Public Accountant,

Member of the Australian Institute of Company Directors

Ms Jill Adams, Director People and Culture

Bachelor of Arts (Communications),

Graduate Diploma in Employee Relations

Strategic HR Management AGSM

Ms Larissa Johnson, Director, Out-of-home care Regulation

Bachelor of Social Work

Ms Natasha Mewing, Director, Reportable Conduct

Bachelor of Arts, Bachelor of Laws (Hons)

Mr Ricky Hennessy, Director, Reportable Conduct

Bachelor of Policing (Investigations),

Advanced Diploma of Public Safety

Mr Michael Rosmalen, Director, NDIS Worker Check

Bachelor of Commerce (Economics),

Master of Applied Economics

Mr Steve Gholab, Director, Working with Children Check

Bachelor of Social Science (major in Criminology and Sociology)

Advanced Diploma of Management, Diploma of Project Management

Ms Sharminie Niles, General Counsel

Master of Laws, Solicitor of the Supreme Court of NSW

Solicitor of the Supreme Court of England and Wales

Ms Virginia Maguire, Director Child Safe Organisations

Bachelor of Arts in Communication, Master of Policy and Applied Social Research

Ms Leanne Kinsella, Director Strategic Projects Child Safe Organisations

Bachelor of Arts in Criminology (Hons), Master of Public Policy

Master of Criminology (Forensic Psych), Graduate Certificate in Criminal Intelligence

Former executive team

Mr Peter Crimp, Interim Chief Financial Officer

Bachelor of Commerce, Master of Commerce (Hons), Chartered Accountant

Ms Jo Blackwell, Director People and Culture

Bachelor of Business, Master of Business Administration

Ms Milena Milojevic, Director People and Culture

Diploma of Positive Psychology and Wellbeing, Diploma Coaching, Diploma Marketing

Ms Nadine Woodward, Director Strategic Projects Child Safe Organisations

Bachelor of Science, Bachelor of Laws (Hons), Graduate Diploma in Legal Practice

Dr Helen Price, Director Strategic Projects Child Safe Organisations

Doctor of Philosophy, Master of Applied Linguistics

Diploma of Architecture, Bachelor of Science (Hons)

Ms Vanessa Ford, Director Strategic Projects Child Safe Organisations

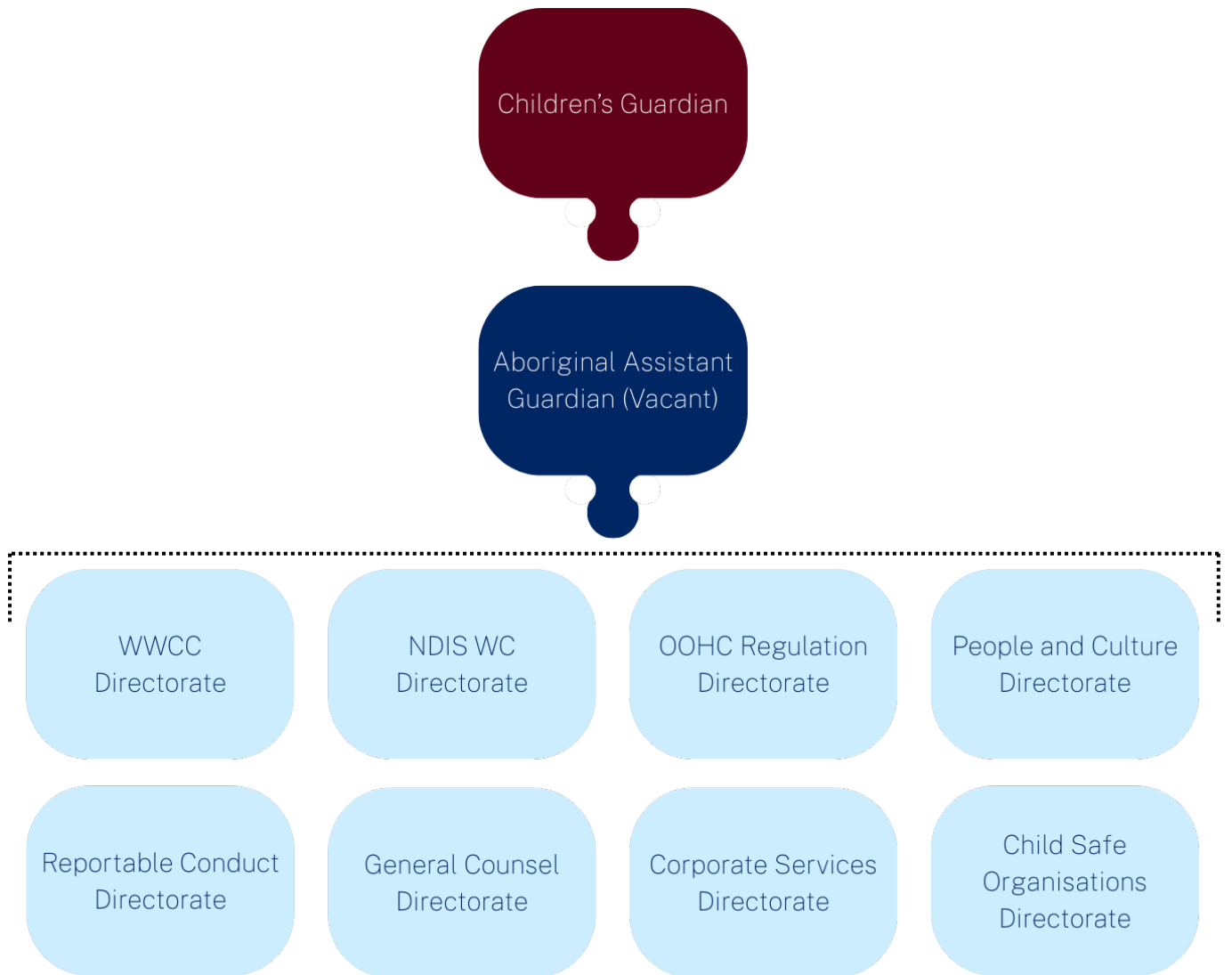
Bachelor of Arts, Bachelor of Laws (Hons), Graduate Diploma in Legal Practice

Ms Rosemary Gerardis, Director Strategic Projects Child Safe Organisations

Bachelor of Applied Science (Occupational

Therapy), Master of Management, Master of Business Administration

Figure 1: Organisation chart indicating functional responsibilities of senior executives as of 30 June 2025:



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Strategy

The Office of the Children's Guardian's role, strategic priorities and responsibilities.

Our primary role

- We regulate and oversee select child-related organisations and certain employers of children to keep children safe.
- We administer worker screening checks to identify those who should be prevented from working with children and people with disability.
- We ensure out-of-home care agencies meet essential standards in relation to the care they provide.
- We have the responsibility to be a leading authority on child safety, shaping NSW and Australian policy and practice.

Strategic priorities

In 2024, the OCG developed and implemented a new business planning process to link the strategic priorities to tangible business activities and Key Performance Indicators.

The OCG Corporate Strategy 2024–2027 outlines 6 strategic priorities below, which are detailed further on our website.



* Artwork with thanks to Kaurna and Narungga woman, Charmaine Mumbulla.

Summary of operational responsibilities

Child Safe Scheme

The Child Safe Scheme is a significant reform to child safety in NSW and provides an overarching framework for the operation of our functions under the *Children's Guardian Act 2019*.

The 10 Child Safe Standards were recommended by the Royal Commission into Institutional Responses to Child Sexual Abuse. These standards provide a framework for organisations to create, maintain and improve child safe environments by building child safe cultures and improving child safe practices to prevent harm and abuse from occurring.

The scheme has been in place for more than 2 years, and monitoring, assessment and compliance powers commenced in February 2023.

Working with Children Check

The Working with Children Check Scheme (WWCC) is one of several child safe tools that organisations should use to build a safe environment for children.

The WWCC continues to play a critical role in helping organisations across NSW create and maintain safe environments for children and young people.

In NSW, individuals who work or volunteer in child-related roles are legally required to hold a valid WWCC clearance or application. It is an offence to engage in child-related work without a current application or clearance.

Employers of child-related workers also have legal responsibilities under the WWCC. We monitor employers' compliance with WWCC laws with an initial focus on employer education and support, particularly the importance of verifying their workers' WWCC status.

Reportable Conduct Scheme

The Reportable Conduct Scheme requires certain government and non-government organisations ('relevant entities') to notify a

range of child abuse allegations (called 'reportable allegations' and 'reportable convictions') against their employees to the OCG. The OCG's primary role under the Scheme is to ensure that those organisations respond appropriately to the allegations, including through investigation and taking action to prevent future harm to children in their organisation. The OCG fulfills this role by providing advice, guidance and scrutiny to promote thorough, evidence-based and accountable responses that are fair to employees and protective of children.

The OCG also facilitates interagency responses and the exchange of risk-related information, both internally to inform other OCG functions and with external parties. In administering the Scheme, the OCG acts collaboratively with the NSW Police Force and Department of Communities and Justice (DCJ – in its capacity as the state's statutory child protection body) given the intersection of each agency's briefs. In this regard, 40% of matters notified under the Scheme and assessed as in the reportable conduct jurisdiction over the reporting period were also reported to police, while 55% were also reported to DCJ.

Statutory out-of-home care and adoption

The OCG is responsible for accrediting and monitoring government and non-government agencies accredited to provide statutory out-of-home care to children and young people across NSW. Our role is to protect and promote the safety, wellbeing and welfare of children and young people who have been placed in out-of-home care.

The OCG also regulates adoption services in NSW. Non-government agencies that offer adoption services are required to be accredited, and all agencies are required to meet specific adoption standards and comply with legislative requirements.

Carer and residential worker monitoring

The OCG manages the Carers Register and Residential Care Workers Register. The Carers Register records information about carer applications, authorised carers who are providing out-of-home care and their household members. The Residential Care

Workers Register records information about individuals who have applied for and are engaged as residential care workers, including those who are authorised to provide out-of-home care in a residential setting.

Each register assists in the selection and probity assessment of carers and residential care workers. Information collated from the Carers Register and Residential Care Workers Register informs our out-of-home care accreditation and monitoring process work.

Specialised substitute residential care

Specialised substitute residential care is an arrangement between a parent and an organisation for a child to receive care away from their usual home for 3 or more nights in any 7-day period. The care must be for respite or behaviour support or funded by the National Disability Insurance Scheme.

It provides support for families caring for children and young people with complex needs, many of whom are living with disability.

In NSW, providers of this type of care are required to complete a self-assessment using our online tool and comply with the Code of Practice which we use to monitor them.

Children's employment

The OCG is responsible for regulating organisations that employ children in the entertainment, exhibition, still photography and modelling to ensure that children's welfare is protected while they are working.

NDIS Worker Check

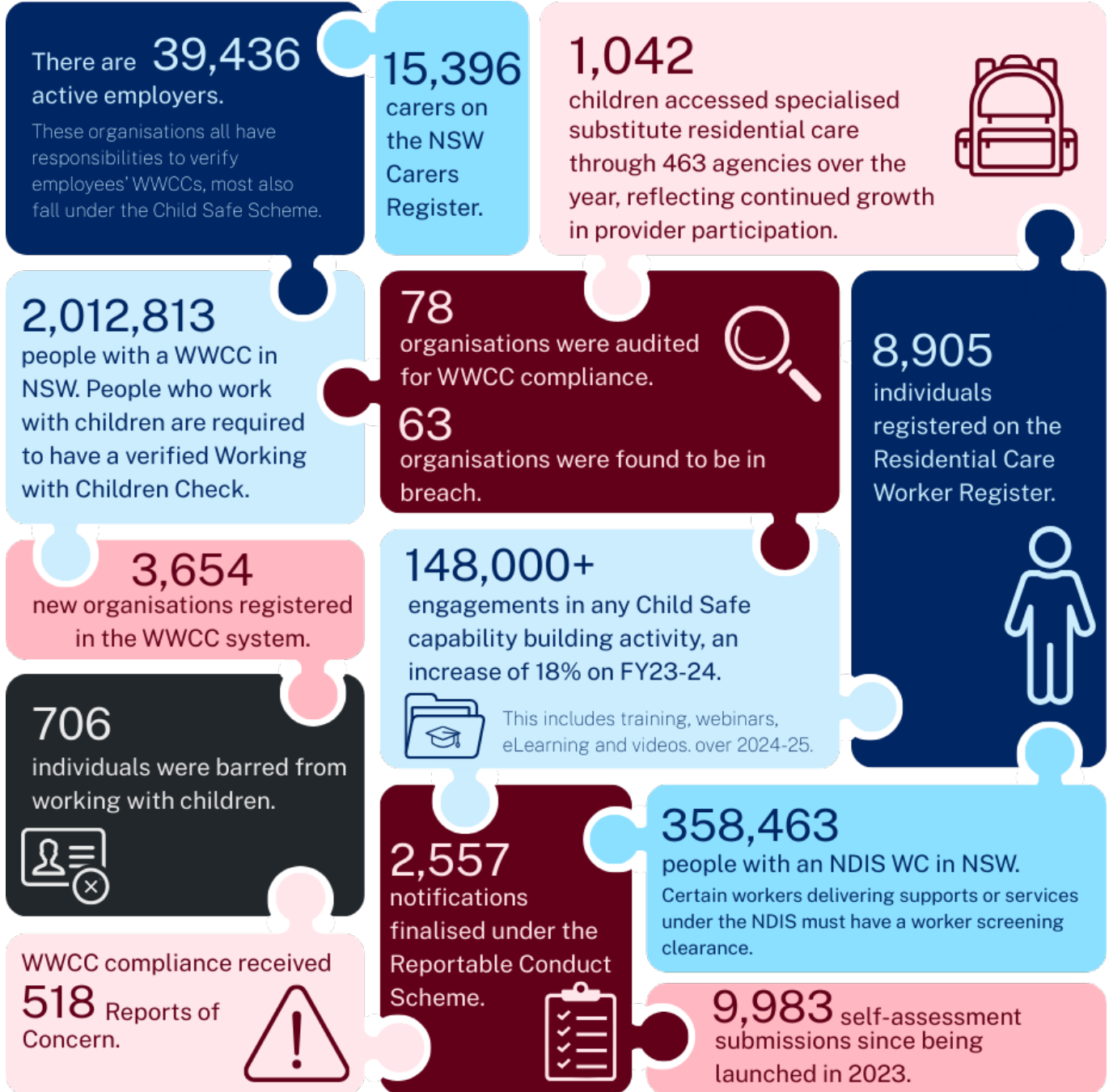
Certain workers delivering supports or services under the National Disability Insurance Scheme (NDIS) are required to have a worker screening clearance. In NSW the OCG is responsible for administering the NDIS Worker Check. All states and territories are operating an equivalent worker screening check that is recognised by the Commonwealth Government. An NDIS Worker Check is valid for 5 years and can be used across Australia with any NDIS employer and in any NDIS role.

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Operations and Performance

Summary of our operations and our performance highlights that help keep vulnerable people safe in organisations.

Highlights for 2024-25



Strategic Plan Progress Highlights

In 2024-25, the OCG continued to implement its Strategic Plan and supporting Business Plan. These will be reviewed and updated in line with the Inquiry recommendations.

A review of the activities in the 2024-25 Business Plan demonstrate progress towards key strategic objectives as well as highlight areas for continued progress and improvements into the next financial year.



Priority Area 1 Being a model administrator and oversight body

- The OCG undertook significant legislative reform work including progressing work on the review of the *Children's Guardian Act 2019* and the *Child Protection (Working with Children) Act 2012* and amending the *Children's Guardian Amendment (Code of Practice) Regulation 2024*.
- OOHC restructured the regulatory process, to move from a one-size-fits-all accreditation assessment process, to one that is more tailored to the specific compliance circumstances of individual agencies. We now monitor agencies annually using a mix of agency self-assessment and onsite assessments of practice by OCG assessors. Under this new approach, agencies that can demonstrate ongoing compliance with the Standards over the course of their accreditation period have the option of an abridged renewal accreditation assessment.
- WWCC ran workshops to support consistent and efficient used of The Assessment Framework (TAF) guidelines, followed by ongoing case discussions.
- WWCC Risk Assessment teams received training in Trauma Informed Interviewing. Feedback from staff was that this was a helpful workshop and provided them with enhanced skills to approach conversations about difficult topics in a trauma informed manner.
- OOHC staff consistently used internal assessment decision making tools, published our regulatory decisions and ensured that information on our standards is clear and available to agencies on our website.
- Ongoing weekly Directors Case Review Meetings to ensure that complex cases are carefully considered to share advice and manage risk.
- Child Safe Assessment and Monitoring team enhanced our risk-based approach to assessment and monitoring introducing a triaging process and trialled proactive monitoring to increase awareness of obligations under the Child Safe Scheme within selected sectors.



Priority Area 2 Increasing awareness of and building capability in Child Safe practice

- Following significant consultation over the last few years, a new Code of Practice, bringing the OOHC sector under the 10 Child Safe Standards, was approved by Government in September 2024, and published on the NSW Legislation website *Children's Guardian Amendment (Code of Practice) Regulation 2024*. With the introduction of the *Children's Guardian Amendment Act 2025*, the Code of Practice will commence on 1 October 2025.
- The OOHC directorate have developed a suite of resources with a range of peak bodies, NGOs, government and academic stakeholders to help the sector transition to the new Code of Practice. The Code of Practice resources are available on the [OCG website](#) and will be updated regularly.

- A Child Safe Communication Strategy 2024-25 was developed and launched in August 2024. As part of this, a 'Getting Started' resources and outreach campaign was rolled out in April 2025 with a dedicated webpage to support smaller organisations to put the foundations in place.
- The Child Safe Prescribed Agency Steering Committee was established, bringing together senior representatives from the prescribed agencies on a quarterly basis to facilitate cross sector engagement and support implementation, monitoring and progress reporting in relation to Child Safe Action Plans. As of June 2025, all agencies had developed a Child Safe Action Plan which are available on our website.
- The OCG worked with the NSW Department of Education to develop 6 eLearning modules tailored for early childhood educators in centre-based, family day care and out of school hours care settings, as well as a series of podcasts.
- The inaugural Child Safe Roadshow was held in November 2024 in the Hunter region with participants from sectors including sport, early childhood education and care, school education, faith and NDIS providers. A second roadshow event was held in the Illawarra region in early June 2025. This included 9 sessions over 2 days. We will continue delivering the roadshows in 2025-26.



Priority Area 3 Shaping policy and practice

- The OCG tabled a report to NSW Parliament on 29 August 2024 on the use of Alternative Care Arrangements (ACAs) Strengthening out-of-home care and the broader child protection system.
- The OCG has been a key player in national discussion around harmonisation of the WWCC. Each state and territory have some differing WWCC requirements however, overall, there is progress towards operationalising the National Standards, with alignment being just under 80%. The NSW WWCC has fully implemented the WWCC National Standards. The OCG remains a committed partner to national reforms and advocates for a future-state model that raises the bar nationally.
- The OCG has also played a key role and advocate in the design and rollout National Continuous Checking Capability (NCCC) to provide automated, continuous real-time monitoring of new police charges (including Commonwealth offences) for WWCC holders in any jurisdiction, regardless of WWCC status (cleared or barred).
- The OCG made amendments to section 36C of the *Child Protection (Working with Children) Act 2012* to require applicants and holders of WWCCs to self-disclose international offences, commenced on 3 February 2025.
- The OCG is part of the Criminal History Exchange Working Group, being led by the National Office of Child Safety involving key Commonwealth agencies and WWCC jurisdictions to further enhance access to international criminal history information for WWCC purposes.
- The OCG is working with the Commonwealth government and other states and territories to consider the potential arrangements to expand (and rebrand) NDIS worker screening to also include the screening of workers in the aged care sector.
- The OCG participates in the Child Safe and Reportable Conduct Interjurisdictional Forum with other states and territories and the National Office of Child Safety, to discuss current state, challenges and opportunities for future collaboration.
- The OCG progressed the Historical Claims Working Group and NSW Police Practice Guidelines. The guidance, along with fact sheets and eLearning are under review and will be released on 1 October 2025 to coincide with legislative changes to the Reportable Conduct Scheme under the *Children's Guardian Amendment Act 2025*.

- The OCG facilitated a Carer Supervision and Support Working Group with sector representatives throughout 2024 and produced sector resources to build capacity to support carers.
- The OCG also advised on several important governance groups including the expert advisory group overseeing the transition of Aboriginal children to ACCOs, Joint Protocol Statewide steering committee and Pathways of Care Longitudinal study.
- The OCG developed an internal Child and Youth Participation Strategy in June 2025, which outlines our short- and longer-term plans for increasing our engagement with children and young people to help inform the implementation of our regulatory schemes.



Priority Area 4 Improving First Nations outcomes

- Engaged Curijo to support the development of the new Code of Practice including adding valuable content such as 'Supporting Aboriginal Carers and Staff: Understanding Cultural Load, Pressures and Community Expectations'. Curijo also worked with OCG staff to support their assessment work with ACCOs.
- The OCG supports the transition of Aboriginal children and young people from non-Aboriginal agencies to Aboriginal Community Controlled Organisations (ACCOs) and has continued to work with and prioritise the accreditation of ACCOs as part of the government's priority.
- Engaged Yamurrah to provide cultural supervision to First Nations staff.
- Held regular case discussions to ensure that First Nations applicants are contextually considered in risk assessment decision-making for worker screening.
- Reportable Conduct visited Burrun Dalai (ACCO) to provide guidance and build capacity of staff to manage reportable conduct matters.
- Using the First Nations Policy and Your Story tool to inform WWCC assessment and ensure culturally sensitive practice, developed in consultation with Yamurrah.
- Review of a paper on Cultural Safety from the First Nations Cadets to improve the Cadet program.
- Held several On Country Cultural Awareness Days for staff across the directorates in September 2024 and May 2025.

The OCG recognises that there is a need for greater focus on this priority area, with future initiatives to be developed with First Nations staff and external stakeholders, as well as a review undertaken of the existing initiatives to continually improve and refine our practice. The Aboriginal Assistant Guardian will guide this work, with both an internal and external focus to ensure the OCG is providing the most culturally safe and responsive services for Aboriginal individuals and communities.



Priority Area 5 Enhancing internal collaborative practice

- Introduction of the Internal Information Use Guide in June 2025 to better assist staff to understand how to use information obtained from a different directorate, and how to share information with other directorates within the OCG. Directors held an engagement session with staff to socialise the new process. Directorate Protocols have subsequently been updated and implemented. Further work is required to embed practice and monitor implementation.
- The WWCC, reportable conduct and child safe managers continue to collaborate on case discussions and operations improvement to support consistent decision-making, practice and information exchange. Triage meetings between directorates were introduced to assess and discuss reports of concern received that cut across functions. This approach streamlined processes reduced time spent on coordinating concerns and reduced manual efforts.
- Work progressed to promote, align and enforce OCG's IT Governance and Security frameworks to reduce duplication and increase efficiencies. OCG's Security policy and GovConnect Cyber policy suite was updated and training modules deployed in 2025.
- Increased transparency in financial management and operational data tracking for the leadership team, which includes consistent and timely reporting.
- Implemented a corporate service business partnering framework to support each directorate.



Priority Area 6 Supporting our people

In response to the PMES results and the internal culture review report, the OCG developed a new People and Culture Strategy, which was socialised through staff information sessions. Various activities were implemented included:

- Launched myPerformance in myCareer together with a series of HR essentials workshops including meaningful conversations and PDPs.
- Quarterly showcases commenced in August 2024. Teams delivered interactive presentations to peers across OCG about their work and new projects, to facilitate information sharing and collaboration. Presentations have included the rollout of the updated OCG Information Use Guide, the introduction of the Business Plan, business continuity planning, the new OOHC code of conduct, compliance programs, reportable conduct and communications sessions. Staff feedback has been very positive.
- Introduction of the OCG recognition program (ACE Awards) and End of Year Awards, which has been running for 12 months.
- Delivered a range of initiatives throughout the year including vicarious trauma training, monthly wellbeing sessions, professional supervision, flu shots and skin checks, RU OK campaign, IT equipment cleaning.
- Introducing monthly induction sessions and a business partnering framework to more closely support directorates.
- Planning for the provision of psychological support to staff once the Ministerial Inquiry findings are released.

The People and Culture Strategy will be reviewed again in 2025-26 in line with the Inquiry recommendations. The OCG remains committed to this priority and responding to the PMES results.

Child Safe Scheme

Organisations captured under the Child Safe Scheme must implement the Child Safe Standards and be proactive about protecting children from harm.

We assess and monitor organisations' implementation of the Child Safe Standards to determine compliance with the scheme.

Building organisations' understanding of the Child Safe Standards is the foundation of the Child Safe Scheme, and we support organisations to build this capability by providing ongoing sector support, resource development and training.

In addition, certain NSW government agencies are required to develop Child Safe Action Plans that detail how they will support child safe organisations in their sectors to implement the Child Safe Standards.

We have made substantial progress in laying the groundwork for the Child Safe Scheme, but there is more to do to increase awareness in child related organisations.

Child safe assessment and monitoring

Following the commencement of Part 9A of the *Children's Guardian Act 2019* on 1 February 2023, the OCG established the Child Safe Assessment and Monitoring program (previously known as Child Safe Compliance).

The main function of this program is to monitor child safe organisations in relation to their implementation of the Child Safe Standards. The program covers all sectors covered by the Child Safe Scheme across NSW, including education, early education, sport and recreation, local government, and religious organisations.

In 2022-23, we designed a Child Safe Monitoring Assessment process relating to the exercise of our monitoring functions under Section 8V and Section 8W of the *Children's Guardian Act 2019*.

Our monitoring assessment process involves:

- reviewing an organisation's child safe systems, policies, and processes, including

any existing information about an organisation held by the Children's Guardian

- directing an organisation to complete a Child Safe Self-Assessment
- requesting that the head of a child safe organisation respond to questions and provide specific information at an assessment interview
- inspecting an organisation's premises, where applicable; and
- providing the organisation with a detailed monitoring assessment report that sets out our findings and guidance regarding how the organisation can improve child safe practice.

In 2024-25, we completed 12 monitoring assessments in response to referrals or complaints that were triaged as high risk. Referrals or complaints can be received from internal or external sources and generally identify concerns with an organisation's implementation of the Child Safe Standards.

If serious gaps are identified in the organisation's implementation of the Child Safe Standards, we make recommendations in the monitoring assessment report. Organisations are required to provide a response to these recommendations, outlining how the recommendations have been implemented within required timeframes.

After receiving the organisation's response to our recommendations, we undertake a separate follow up process to determine whether the organisation has effectively implemented the recommendations. The follow up assessment process may result in:

- an outcome letter stating that the organisation has provided a satisfactory response to the recommendations. This outcome letter may include additional guidance to support the organisation to further improve child safe practice, or
- a warning letter or escalation to enforcement measures if the organisation fails to respond to the recommendations or fails to provide a satisfactory response.

In 2024–25, we completed 20 desk-based monitoring assessments. This desk-based monitoring process was trialled in the second half of 2023-24, to increase the impact and reach of the Child Safe Assessment and Monitoring program. This process involves completion of an assessment form by the head of the organisation, together with a review of child safe policies and procedures and a phone call with the head of the organisation to discuss key risks or gaps identified.

In the second half of 2024-25, we enhanced our risk-based approach to assessment and monitoring by implementing a process to respond to matters that are triaged as low risk. This process involves meeting with the head of the organisation to seek information about how they are implementing the Child Safe Standards and a written reminder of their obligations under the Child Safe Scheme.

In 2024-25, we also trialled a process for proactive monitoring to increase awareness of obligations under the Child Safe Scheme within selected sectors. The trial focused on 21 organisations within the sport and recreation sector that were selected based on risk. The trial aimed to assess understanding of the Child Safe Standards and application of legal requirements under the Child Safe Scheme. When we engaged with organisations, we provided guidance to help them address gaps in compliance. Findings were compiled to inform future sector engagement strategies and refine approaches to strengthening compliance.

In addition to monitoring assessment activities, we completed 6 stakeholder engagement activities in 2024-25. These activities supported and promoted our child safe assessment and monitoring function.

CASE STUDY

Using the Child Safe Scheme to improve child safety in a religious body

The Child Safe Assessment and Monitoring team received information that a religious organisation had appointed a worker with a known history of failing to follow safeguarding policies, in addition to concerns that the organisation was not providing child safe training to staff.

We commenced a child safe monitoring assessment of the organisation to assess implementation of:

- Child Safe Standard 1 (child safety is embedded in institutional leadership, governance and culture)
- Child Safe Standard 5 (people working with children are suitable and supported)
- Child Safe Standard 6 (processes to respond to complaints of child sexual abuse are child-focused) and
- Child Safe Standard 7 (staff are equipped with the knowledge, skills and awareness to keep children safe through continual education and training).

We made several recommendations to assist the organisation to address gaps in their child safe practice. We recommended that they publish a statement of commitment to child safety on their website and that they create an overarching Child Safe Policy to outline their approach to creating and maintaining a safe environment for children and young people. We also recommended that the organisation develop a Child Safe Recruitment Policy and provide staff with regular child safe training.

During the assessment we identified gaps in the organisation's verification practices for WWCC so we also recommended that the organisation undertake an audit of their WWCC records by the OCG's WWCC Compliance team.

The organisation provided evidence of measures taken to respond to our recommendations and to strengthen their child safe systems to better embed the Child Safe Standards.

Child Safe Self-Assessment

In January 2023 we launched the free, web-based Child Safe Self-Assessment, which has been designed for child safe organisations to assess their implementation of the 10 Child Safe Standards.

Once the self-assessment is completed by an organisation, they are provided with a tailored Assessment and Action Report to implement to improve their child safe practices.

The self-assessment results are also provided to the OCG, giving us valuable insights to inform future areas for capability building for each sector.

As at 30 June 2025 we had received 9,983 self-assessment submissions since it launched. These numbers include multiple completions from the same organisation. The early childhood education sector had the highest number of submissions at 3,543, which makes up 35% of all submissions.

Table 1: Child Safe Self-Assessment completions 2022–23 to 2024–25 by sector

Organisation Sector*	2022–23	2023–24	2024–25
Early Childhood Education or family day care	1,035	1,456	1,052
Education	290	484	341
Services for children with disability	194	284	200
Outside of school hours care or vacation care	180	268	170
Other	167	398	228
Sport for children and young people	156	531	314
Religious services	137	204	112
Local Government	113	164	49
Out-of-home care	81	71	51
Respite or voluntary out-of-home care (SSRC)	80	55	60
Health services	56	200	74
Clubs or other bodies	46	138	81
Counselling or mental health services	32	81	45
Blank**	30	115	0
Child protection	19	37	13
Services for Aboriginal or Torres Strait Islanders	18	34	30
Justice Corrective Services	3	6	0
Total	2,637	4,526	2,820

NOTES:

*Some of these sectors overlap; for example, an organisation might identify as sport for children and young people, as well as clubs and other bodies. People completing the self-assessment can only choose 1 sector.

**Due to a data error in previous years some organisations did not display a sector. This error has been corrected for the 2024-25 financial year.

Child safe programs

The Objects of the *Children’s Guardian Act* include that we must assist child safe organisations to implement the Child Safe Standards by raising awareness and providing guidance, training and education.

During 2024-25, we have provided capability building services for organisations in NSW which aims to:

- improve understanding of the nature and dynamics of child abuse
- change behaviour to better prevent abuse and identify it when it occurs, and
- improve child safe systems, policies, and processes in organisations to maintain the safest possible environment for children.

We provide direct support to the sectors we regulate, with innovative resources, training and targeted stakeholder engagement.

We have had more than 148,000 engagements over 2024-25, an increase of 18% on 2023-24. This includes completions of our eLearning

modules, attendance at face-to-face and online training, video views and views of recorded webinars. We also continue to deliver and refine our SAFE series protective behaviours program for early education services, which will celebrate its tenth year in 2026.

All our resources and training are free and give participants practical information about how to implement the Standards to create, maintain and improve child safe practices.

In addition, we continue to provide direct support to each of the sectors that have responsibilities under the Child Safe Scheme, with a strong focus on partnership with government and non-government sectors.

Last year we reported on a combined figure for engagement and training, summarised in the table below for child safe program activities. This year, to provide a more detailed breakdown of our activities, we have separated the programs of work into summary tables under each of the following sections.

Table 2: Child Safe program activities

Child safe program activities	Face-to-face events	Online events	Number of organisations	Total people participating
Engagement and training events (percentage change on 2023-24)	159 (-22%)	191(+%22)	2,747*(+13%)	14,127(+5%)

NOTE:

*The cumulative number of organisations engaged across child safe programs is adjusted for duplication across programs.

Resource Development

We deliver a dynamic catalogue of supports for organisations to keep children safe. Our resource catalogue includes handbooks, posters, brochures, live action and animated video media, eLearning and podcast material focused on the needs of organisations. These resources help build organisations’ capability

to protect children and young people from abuse by preventing abuse, identifying it and reporting to it effectively.

In 2024-25 there were more than 59,000 downloads of our resources and more than 84,000 views of videos and recorded webinars. More than 49,000 modules of child safe eLearning were completed, a 51% increase on 2023-24.

Table 3: Child safe learning modules completed

OCG Child safe eLearning	Total modules completed
Child Safe Councils	1,597
SAFESpace eLearning – Keeping children safe in organisations in the disability sector	4,995
Child Safe eLearning – Keeping children safe in organisations (for all sectors)	9,536
Child Safe Sport	13,180
Child Safe Early Childhood Education and Care	20,123
Total	49,431

NOTE:

* Video views combines views of child safe videos and webinar recordings. Total views may include 1 person viewing a video multiple times.

CASE STUDY

Podcast for early education and care sector

We partnered with the NSW Early Childhood Education Regulatory Authority, to produce a series of podcast episodes targeted at educators and leaders in long day care, out of school hours care and family day care centres and services.

Six episodes cover child safe risks, reporting, child centred practice and the child safe standards in an ECEC context.

The series has over 1,600 downloads. Each episode includes interesting discussions between child safe experts, industry leaders and government partners.

The resource complements existing education and training and is an example of our dynamic and responsive approach to increasing awareness and building capability.

Sector engagement

Our dedicated child safe engagement officers support sectors captured by the Child Safe Scheme to:

- maintain and improve the trust stakeholders have in the OCG as an effective regulator
- be adaptive and responsive to the supports needed to implement the Standards in a range of organisations and communities; and
- sustain and improve child safe practice.

This approach aims to create tailored engagement based on each sector’s specific needs. In 2024–25, our child safe engagement officers delivered over 120 sessions to over

6,200 participants. This targeted engagement work was undertaken with organisations from health, early childhood education, faith, community services and local government organisations across NSW.

We continue to build on our engagement approach to reach new organisations across priority sectors including by:

- working with stakeholders to deliver sector-specific resources
- establishing relationships with organisations to develop trust and deliver support around some of the more complex aspects of the Child Safe Scheme

- connecting organisations within a sector through communities of practice so knowledge and experience can be shared, and new opportunities for collaboration identified; and
- supporting organisations to identify champions for change within their organisations, to help implement child safe practice.

Table 4: Number of people participating in child safe engagement events

Child safe engagement program	Face-to-face events	Online events	Number of organisations	Total people participating
Child safe engagement events	63	61	566	6,236

CASE STUDY

Child Safe Roadshow

Our inaugural Child Safe Roadshow was held in the Hunter region across 2 days in November 2024 with support from Northern NSW Football. Participants came from sectors including sport, early childhood education and care, school education, faith and NDIS providers. A second roadshow event was held in the Illawarra region in early June 2025 with support from Shellharbour City Council. This included 9 sessions over 2 days.

The sessions provided opportunities for organisations to strengthen their knowledge

by participating in workshops focused on recruitment, risk management, empowerment and participation, and applying the standards. Organisations were also offered individualised support from a child safe engagement officer to discuss their own child safe journey, their wins and their challenges.

Participant quote: "I really liked the concept that it (Child Safe) is never finished, there is always room to improve"

A third roadshow event is scheduled for western Sydney in early August 2025.

Training

Our training program is delivered by a small, dedicated team that delivers child safe skill development in-person and online. This includes travel to regional NSW to provide child safe support and information to more remote communities. In 2024-25 the training team delivered training in:

- Illawarra Shoalhaven/ Wollongong
- Sydney metro
- Hunter New England
- Murrumbidgee/Murray River

- Mid-North Coast and Northern NSW
- Central Coast and Newcastle
- Central/Western NSW.

Our protective behaviours SAFE series program was developed as a tool for early learning educators to introduce protective behaviours in a non-confrontational way to children under the age of 6. Each story includes a theme that works in conjunction with the others in the series and can be used as a way of teaching children about behaviours that will help keep them safe from harm or abuse.

Table 5: Number of people participating in the child safe training program

Child safe training program	Face-to-face events	Online events	Number of organisations	Total people participating
Child safe training	68	97	1,725	5,394
SAFE series sessions	28	33	902	2,497
Total	96	103	2,627	7,891

CASE STUDY

Delivering training in support of NSW government Child Safe Action Plans

In addition to running training for organisations, we support sector partners in delivering targeted skills-based training. In 2025 the training team delivered a 45-minute presentation on Standard 5 Child Safe Recruitment for NSW Health. The team delivered the training at the invitation of the NSW Health Child Safe Community of Practice.

Child Safe Action Plans

Under the Child Safe Scheme, the following NSW Government agencies, as ‘prescribed agencies’ are required under the *Children’s Guardian Act 2019* to prepare a Child Safe Action Plan:

- Department of Communities and Justice
- Ministry of Health
- Department of Education
- Office of Sport
- Office of Local Government
- Inspector of Custodial Services
- NSW Education Standards Authority.

A Child Safe Action Plan is a 4-year, high-level strategic document that details how the prescribed agency will raise awareness about the importance of child safety, build capability of child safe organisations to implement the Child Safe Standards, and improve the safety of children in NSW. Strategies under a Child Safe Action Plan must cover the child-related services that the agency offers, as well as any organisations they fund or regulate that fall under the scope of the Child Safe Scheme.

As of June 2025, all the above agencies have developed and made public a Child Safe

Action Plan which has been approved by the Children’s Guardian. All approved plans are linked on our website.

In 2024, the OCG established the Child Safe Prescribed Agency Steering Committee to support cross-agency collaboration and implementation of Child Safe Action Plans.

These 7 agencies are implementing their Child Safe Action Plans, with several awareness raising actions already completed or in progress. As part of the implementation process, each agency must report on their progress through their annual reports and to the Children’s Guardian on request.

In November 2024 each prescribed agency submitted a progress report to the Children’s Guardian on the first year of their Child Safe Action Plan. The first year of implementation has seen prescribed agencies make substantial progress in raising awareness of the Child Safe Standards and in building the capability of organisations to implement the Standards.

Of the 133 actions outlined across all prescribed agencies, 39 had been completed, 83 were in progress and 11 had not yet started. Many actions related to work that would

remain ongoing throughout the lifespan of each Child Safe Action Plan.

Each prescribed agency will be required to develop a second Child Safe Action Plan by 2027 and the Children's Guardian will be working with each prescribed agency on these Plans over the next year.

Working with Children Check

People who work or volunteer to provide services to children and young people in NSW are required to have a WWCC application or clearance.

The WWCC is one of a range of measures administered by the OCG to create safer organisations that work with children.

All applications and renewals undergo screening which includes a national criminal history check through the Australian Criminal Intelligence Commission, and clearances are subject to ongoing continuous monitoring by the NSW Police. Police information considered as part of the WWCC application and monitoring process includes juvenile offences, relevant offences against adults, and charges that do not result in a conviction. Relevant offences that do not involve children are considered in our decision-making because of their potential impact on children, even though a child may not have been the primary victim.

In addition to the national criminal history check, applications are checked to identify if there have been any workplace investigations reported via the Reportable Conduct Scheme, and if there have been any adverse decisions imposed by screening agencies in other states and territories.

Our connection to the National Reference System (NRS) also allows us to screen applications at the time of application and continually monitor a change in WWCC status nationally. The NRS provides information about a person who is barred from working with children in any other state or territory. The *Child Protection (Working with Children) Act 2012* was also amended to require people

who have been barred in other states or territories to undergo a risk assessment.

2,012,813 people in NSW hold a Working with Children Check clearance as of 30 June 2025.

Types of applications

A person who is in paid or volunteer child-related work must have a valid WWCC application before they commence their work. Once cleared, a WWCC is valid for 5 years. People who want to continue in child-related work as their WWCC reaches its expiry date must apply for a renewal.

In 2024-25 a total of
441,786
applications were processed.

Of these applications
207,576 (47%)
were new applications.

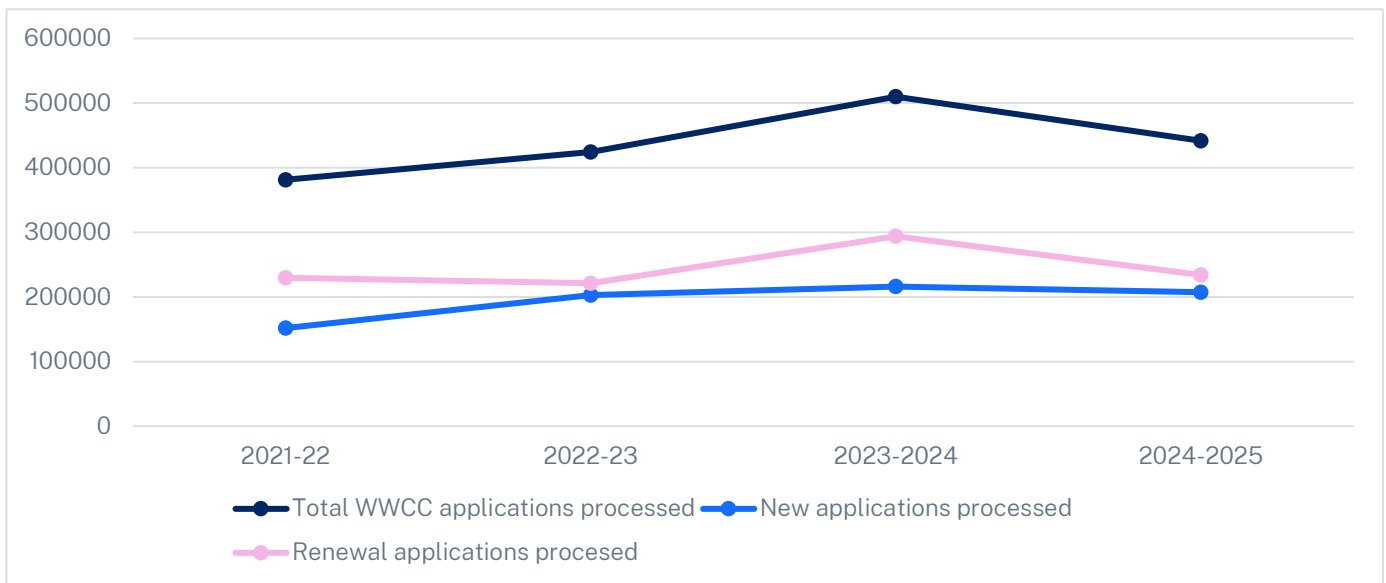
234,270 (53%)
were applications to renew.

Supporting our customers

In 2024–25, our Customer Service team answered 68,824 telephone calls with an average wait time of 1 minute 10 seconds. We responded to nearly 10,000 emails, assisting with enquiries from applicants and organisations in relation to topics including the WWCC application process, the status of an application, and verification requirements.

Our Customer Service team supported 179 people who had difficulty obtaining the required proof of identity documentation due to exceptional circumstances. This included liaising directly with Service NSW to provide timely and efficient solutions so these people could apply for their WWCC clearance and commence child-related work.

Graph 1: Working with Children Check applications processed



Continuous monitoring and information exchange

One of the key strengths of the NSW WWCC is that all WWCC applications and clearances are subject to continuous monitoring. The integrated continuous checking system, which includes continuous monitoring of police and workplace records, enables us to respond quickly to risks.

We receive notifications in relation to a WWCC clearance holder or applicant:

- if they are charged by police with certain offences in NSW
- if there is a sustained finding made about them in relation to certain types of allegations under the Reportable Conduct Scheme

- if they have an adverse outcome imposed on their WWCC clearance in another state or territory; and
- if they have an adverse outcome imposed by the NDIS Worker Check.

Another source of information relates to material shared by prescribed bodies under Chapter 16A of the *Children and Young Persons (Care and Protection) Act 1998*.

In 2024–25, we received 7,531 notifications through the continuous monitoring process. a 13.6% increase from 2023–24. These alerts enable us to promptly review the status of a person’s WWCC.

The outcome of this review may be to conduct a risk assessment (with the option to impose an interim bar if there is likely risk to the safety of children while we conduct the assessment), or if a person has records listed

under Schedule 2 of the Act, to immediately bar the person and communicate this outcome to their employer so they can remove them from child-related work.

International Criminal Records and the WWCC

Section 36C the *Child Protection (Working with Children) Amendment Bill 2022* created a duty to disclose an offence outside Australia as part of an application for a WWCC in NSW. This section commenced on 3 February 2025.

Part of the disclosure process involves applicants providing a copy of their overseas police certificate. If the certificate is in a language other than English, they will need to provide a National Accreditation Authority for Translators and Interpreters (NAATI) translation of the certificate.

Following a request by the Minister for Families and Communities the Hon. Kate Washington MP, and agreement by the Commonwealth Attorney-General the Hon. Mark Dreyfus KC, the National Office for Child Safety (National Office) within the Attorney-General's Department established the Criminal History Exchange Working Group (CHEWG). The purpose of this group was to further explore the availability of overseas records. The CHEWG is conducting a feasibility study on the exchange of international criminal history for WWCC processes. The study will be considered by government to explore further policy options to enhance the WWCC.

CASE STUDY

International offences

A person is living and working in Australia on a visa. To seek child-related employment in the education sector, they had applied for a WWCC clearance. They disclosed in their WWCC application that while holidaying in Morocco they were charged and convicted of an offence. The person provided a copy of the police record in certified translation, and this was the subject of an assessment under the *Child Protection (Working with Children) Act 2012*.

Working with Children Check outcomes

Automatic clearance

Where screening shows an individual does not have any police or workplace records, clearances are issued automatically.

75% of individuals were cleared within 1 hour of applying when there were no relevant records.

93% of individuals were cleared within 5 days of applying when there were no relevant records.

Applications requiring records review

Where screening shows an individual has police or workplace records, or has been barred in another jurisdiction, the provisions in Schedule 1 and 2 of the *Child Protection (Working with Children) Act 2012* determine how the application is dealt with.

We conduct a review to decide if the individual should be:

- automatically disqualified (due to Schedule 2 records)
- referred for risk assessment (due to Schedule 1 records or records relevant to the safety of children) or
- cleared (no records relevant to the safety of children).

In 2024–25, 53,170 applications required records review.

Automatic disqualification

Records under Schedule 2 of the *Child Protection (Working with Children) Act 2012* result in an automatic disqualification from working with children. Equivalent records from other states and territories, including offences under a law of a foreign jurisdiction, also lead

to either an automatic disqualification or a risk assessment.

In 2024–25, there were 478 applicants who were automatically disqualified from working with children due a Schedule 2 offence.

Referral to risk assessment

If a person has records that fall under Schedule 1 of the *Child Protection (Working with Children) Act 2012*, the applicant is subject to a risk assessment before a decision on the individual's WWCC status is made.

Additionally, section 15(3) of the Act permits the Children's Guardian to refer a matter for risk assessment where no Schedule 1 record is present, if the person has records considered relevant to the safety of children.

In 2024–25, 3,859 individuals were referred for risk assessment due to the presence of a record listed in Schedule 1 or other records relevant to the safety of children.

Risk assessment outcomes

When a risk assessment is required, we request further information from the applicant and other organisations, to ensure we have all relevant information before we decide to grant or refuse a clearance. We encourage applicants to participate in the process.

Risk assessment factors include:

- the applicant's conduct: including seriousness of any offences, and the applicant's conduct since the offence
- their age at the time of the offence, and their age now
- ages of the victims, vulnerability, and their relationship to the applicant, and
- the likelihood of recurrence and the impact on children.

Outcomes of risk assessment include termination due to non-response, granting a clearance or refusing or cancelling an application. In 2024–25, we finalised 3,525 applications that were referred to risk assessment.

Interim bar during risk assessment

We can impose an interim bar while the risk assessment is conducted if there is a likely risk to the safety of children. Interim bars can be imposed on an application at any point after receiving information of concern; both for new applications as well as existing WWCC clearance holders.

In 2024–25, we imposed 1,004 interim bars which is an 16% increase on the 865 interim bars in 2023–24. The increase from 2023–24 is in part due to an increase in continuous check events across the year and reflects the growing Scheme, and increased number of people in NSW with a WWCC.

Clearances granted following risk assessment

Legally, we must grant a clearance to a person who is subject to a risk assessment unless we are satisfied that the person poses a risk to the safety of children.

In 2024–25, we granted clearances to 797 individuals following a risk assessment.

Refusal or cancellation following risk assessment

We must refuse or cancel a WWCC application if we are satisfied that the person poses a real and appreciable risk to the safety of children.

In 2024–25, we refused or cancelled 228 applications following risk assessment.

Applications closed

If an applicant does not respond to a written request for information within 3 months, we can terminate applications or cancel clearances. We have worked to increase engagement in the risk assessment process by simplifying our written correspondence and phone contact and reducing identified barriers that may stop people from engaging in the risk assessment process.

In 2024–25, we closed 2,500 applications because the applicants did not provide a reasonable excuse for failing to provide us with the information we had requested. This is a 6.60% increase on last year (2,345 closed

applications in 2023–24). These individuals can make a new application if they still require a WWCC.

Table 6: Applications and bars data trends 2021 – 2025

Activity	2021-22	2022-23	2023-24	2024-25
Total WWCC applications received and processed	381,405	424,203	509,915	441,786
New WWCC applications received and processed	151,790	202,977	216,018	207,516
Risk assessments with outcomes	2,600	3,000	3,751	3,525
Individuals automatically barred due to Schedule 2 records	408	432	448	478
Individuals interim barred during risk assessment	303	481	865	1,004
Individuals barred following risk assessment	58	59	269	228
Individuals cleared following risk assessment	695	1,049	1,137	797
Applications terminated after referral to risk assessment	1,847	1,873	2,345	2,500

Table 7: Refusals for a Working with Children Check

Year	2021-22	2022-23	2023-24	2024-25
Number of barring decisions	466	491	717	706
% of barring decisions (of the total applications each year)	0.12%	0.12%	0.14%	0.16%

Litigation advice and operational support

The OCG manages litigation relating to administrative decisions made by the Children's Guardian, which primarily involve applications for reviews of WWCC decisions to the NSW Civil and Administrative Tribunal (NCAT) and the Supreme Court.

In 2023-24, there were 61 applications for review. In 2024-25, there were 98 applications for review of WWCC decisions to NCAT, comprising:

- 54 applications seeking review of the Children's Guardian's decision to refuse or cancel a WWCC clearance
- 32 applications seeking an order that the applicant is not to be treated as a disqualified person (an 'enabling order'). For these applicants, who are automatically barred from engaging in child-related work, an enabling order must be granted by NCAT before a WWCC clearance can be issued; and
- 12 applications for review of a decision of the Children's Guardian to impose an interim bar.

There was also an application to NCAT by a person recorded on the Child Protection Register seeking an exemption from, or reduction of, his reporting obligations under the *Child Protection (Offenders Registration) Act* (NSW), to which the Children's Guardian is required to be a party.

In addition, there were 3 proceedings in the Supreme Court:

- an appeal to the Supreme Court from a decision of NCAT not to grant the plaintiff an enabling order (ongoing); and
- a Summons filed by 2 plaintiffs' seeking to invoke the *parens patriae* ward jurisdiction in the interest of 2 children, arising from the suspension of the plaintiffs' carer authorisations. The OCG was the third

defendant, having imposed an interim bar on the clearances held by the 2 plaintiffs. The Summons was dismissed

- an application for costs in respect to the above-named proceedings. A costs order was made in favour of the OCG.

We use key findings from court and tribunal decisions to refine our decision-making processes.

CASE STUDY

NCAT confirms understanding of consent is critical to reasonable person test

GCN, a 56-year-old male, applied to the Tribunal in 2023 for an enabling order declaring that he is not to be treated as a disqualified person for the purpose of the *Child Protection (Working with Children) Act 2012*, as he had been refused a WWCC Clearance due to a conviction in June 1992 for sexual assault without consent in company which occurred in December 1989, when the Applicant was 22 years old and the female victim was 24 years old. The Applicant's lengthy criminal history includes a conviction in December 1985 of sexual intercourse without consent and robbery with striking, as well as multiple violent offences, with the most recent conviction for violence involving a 2007 road rage incident.

The Tribunal found the seriousness of the disqualifying offence was exacerbated due to the prior conviction of sexual intercourse without consent and held that he ought to have been aware of the seriousness of his conduct and the impact on the victim. However, the Tribunal noted that none of his offending behaviour involved children. In accepting that there had been a "marked change" in the applicant's offending as he had not been charged with an offence for 17 years, consistent with his evidence that his Christian faith had enabled him to reform his behaviour, together with evidence of a support network, the Tribunal was satisfied that GCN had rebutted the presumption that he posed a risk to children.

However, the *Child Protection (Working with Children) Act 2012* provides that the Tribunal must not make an enabling order unless it is satisfied that the 2 statutory tests under s 30(1A) of the Act are met, being the reasonable person and public interest tests. The first test is whether, a reasonable person would allow his or her child to have direct unsupervised contact with the GCN while GCN was engaged in any child-related work. When considering this test, the Tribunal found that a reasonable person would "have grave concerns about the applicant's lack of insight into the concept of consent" and referred to GCN maintaining his position that he did not have non-consensual sex with the victim of the disqualifying offence, despite having conceded that he coerced her to have sexual intercourse with him. The Tribunal also did not accept GCN's statement that he had taken responsibility for his past actions, noting that he had a history of lying to police and denying or minimising his offences, and not demonstrated he understood the meaning of consent in accordance with community standards. For these reasons, the Tribunal refused to grant the enabling order.

CASE STUDY

Updating the internal information use guide

In the course of its work, the OCG obtains a significant amount of information from a range of external sources. This includes information about individuals such as workers, children and young people, carers, complainants and alleged victims, and information about organisations such as their compliance with legislative and regulatory obligations. OCG staff often need access to information held by various directorates within the organisation to deliver its functions, and to make efficient and informed decisions.

In June 2025, the OCG updated its internal information use guide to better assist staff to understand how to use information obtained from a different directorate within the organisation, and how to share information with other directorates within the organisation. Developed by the Executive Office of the OCG and the General Counsel's Directorate in cooperation, the Guide clarifies the parameters for information use within the OCG. It sets out a clear process for information sharing, relevant legislative provisions and factors to be considered to ensure that information is used lawfully, decision-making is consistent and risks to the OCG are managed.

The Guide is also supported by a due diligence tool for staff to ensure that the OCG meets its obligation with regards to checking the accuracy of personal information before use under section 16 of the *Privacy and Personal Information Protection Act 1998*. This tool will assist staff to ensure any information which they intend to use or rely on in decision-making is relevant, accurate, up to date, complete and not misleading.

Working with Children Check compliance

The *Child Protection (Working with Children) Act 2012* and the *Child Protection (Working with Children) Regulation 2013* establish legal obligations for employers that provide services to children and engage paid or volunteer workers in child-related work.

To be compliant, employers have a legal responsibility to:

- register as an employer in the WWCC system
- verify the WWCC details of all workers in child-related roles
- remove any barred or unauthorised individuals from child-related work, and
- maintain up-to-date records confirming that WWCCs have been verified.

Verification enables the employer to confirm that a worker has been cleared to work with children, and it creates a vital link between our office and the worker's employer. This

connection enables the OCG to swiftly contact employers in circumstances where their worker must no longer engage in child-related work.

We monitor employer and individual compliance with legal requirements both proactively and reactively.

As a proactive compliance measure, we target our WWCC audits towards high-risk organisations guided by intelligence from the WWCC system and trend-based data collated through previous compliance activity.

Reactively, we respond to matters arising from WWCC application processing, risk assessments, employer registrations, referrals, and 'reports of concern' submitted by organisations, government agencies, the public, and other areas within the OCG.

Issuing fines is one component of our WWCC compliance program. In line with the recommendations of the Royal Commission into Institutional Responses to Child Sexual Abuse, we apply a responsive regulatory

model that prioritises voluntary compliance. Where organisations or individuals fail to meet their obligations under WWCC laws, the compliance team may issue either compliance notices or fines, depending on the level of culpability and the assessed potential risk of harm to children.

Our monitoring work continues to highlight a need for substantial improvement in employers' compliance with obligations under the WWCC scheme, particularly in relation to verifying worker's WWCCs. In response, we are actively exploring improvements to the systems that support verification, with the aim of strengthening employer accountability and enhancing child safety across NSW.

New employer registrations

Employers are required to register in the WWCC online system to verify their workers' status. We contact employers that have recently registered but have not verified the WWCC status of their workers to provide information on how to comply with their WWCC obligations.

In 2024-25:

3,654 new organisations registered in the WWCC system.

While this number includes some duplicate entries and registrations from organisations not actively engaged in child-related work, it demonstrates ongoing engagement across the sector.

39,436

active employer registrations in the system as of 30 June 2025.

To improve consistency and data integrity, previously reported metrics, such as duplicate registrations, verification status at the time of

registration, and follow-up communications, have been discontinued. These figures were manually compiled and are no longer considered accurate or sustainable for annual reporting. Going forward, reporting will focus on verified system-based data to ensure accurate data reporting.

Targeted audits

In 2024-25, we targeted our audits to focus on behaviour rather than on specific sectors. Compliance efforts prioritised employers that had not verified any workers over a 3-5-year period. This enabled us to address barriers to compliance across a range of sectors and organisations including raising awareness, engagement and capability building. While many audits were selected proactively, some were initiated following reports of concern, reflecting our responsive approach to identified risks. The employers chosen for audit were assessed on their compliance with the *Child Protection (Working with Children) Act 2012*.

In total, we audited 78 organisations which is a decrease from the 280 audits completed in the last financial year. This reduction was influenced by several factors, including staffing shortages, and changes in management and team structure. Additionally, competing operational priorities and the transition to new systems and processes impacted the team's capacity to conduct audits at previous levels. Despite these challenges, the compliance team continued to prioritise high-risk cases through targeted engagement. Our audit activities focus on ensuring employers are:

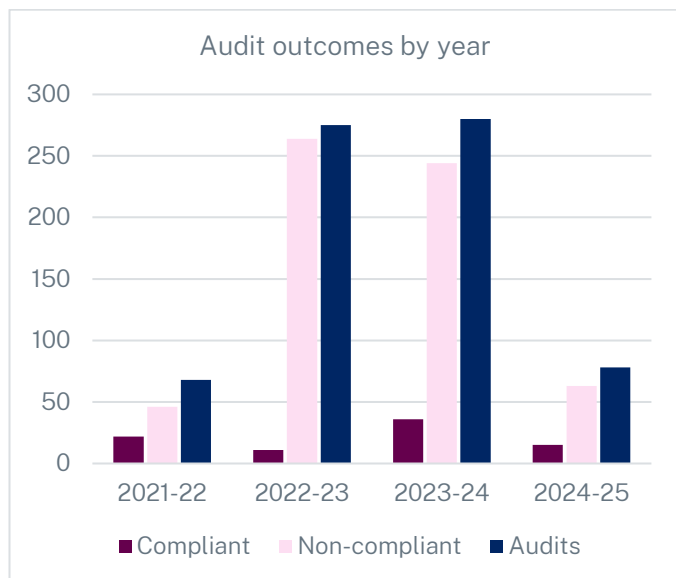
- registered in the WWCC system.
- verifying workers engaged in child-related work
- not engaging barred workers in child-related roles, and
- maintaining proper records.

Of the 78 organisations audited, 63 or 81% of cases audited were not compliant with the legislation. The main breach identified was that workers' checks had not been verified prior to commencement of child-related work, or checks were not re-verified when they were renewed. This is consistent with the main breaches identified last year. Reminders about legal obligations or warning letters were issued in the majority of these cases.

Verification is a critical child safety tool, as it connects the worker with the employer so that the OCG knows who to contact should the worker become barred from working with children. Of the 63 organisations which were found to be in breach:

- 61 were issued with a reminder or warning notification, and
- 2 fines were issued to 2 employers (totalling \$3,750) in instances where there was greater culpability and potential risk of harm to children.

Graph 2: Number of targeted audits, including rate of compliance compared to non-compliance, 2020-21 to 204-25



The OCG is planning to conduct a targeted outreach campaign and embed compliance

messages through existing communication channels to improve WWCC verification rates. The OCG will also continue with the ECEC to strengthen the regulation of childcare workers and organisations. This will be a priority for 2025-26.

Notifications for change in WWCC status

The OCG is required to contact employers when:

- an applicant is barred, or an interim bar is imposed, or
- where an application for a WWCC is closed prior to it being finalised.

Barred applicants

In 2024-25, 1,710 individuals who applied for a WWCC were barred or received an interim bar pending a risk assessment¹. This represents a 5% increase from 2023-24, which can in part be attributed to an increase in continuous check events across the year and reflects the growing Scheme, and increased number of people in NSW with a WWCC.

Of the total number of barred and interim barred workers in 2024-25, the percentage who had not been verified by an employer slightly decreased from 50% in 2023-24 to 49% in 2024-25.

The process of employer verification of a worker's WWCC is critical as it provides the OCG with the employer's details so that we can contact them should a person become interim barred or barred from working with children. If a barred person has not been verified by an employer, we rely on information obtained during the risk assessment process to determine if the barred person is employed in child-related work. Any employers that are identified as engaging a worker in child-related work are informed that they must remove the worker from any child related work. Compliance action may also be

¹ Noting that 1 barred person can have multiple employers.

taken against the employer for failing to verify.

In 2024-25 the OCG contacted 1,844 employers to establish if the applicant was working with children. This is a 3.5% increase from 1,812 in 2024-25.

We issued 452 notices to employers about their employee's change in status, requiring them to remove the worker from child-related work.

Closed applications

An application is considered closed:

- when an applicant requests to withdraw their application, which requires the approval of the Children's Guardian
- when an applicant surrenders their clearance with the approval of the Children's Guardian
- if a person subject to a risk assessment has failed to provide further information within 3 months of our request without a reasonable excuse; and
- if a person has provided incorrect or incomplete information on their application.

When an application is closed, the applicant must not commence or continue in child-related work. When this happens, employers are contacted to advise that the worker is not permitted to work with children.

Employers are not required to respond if:

- they do not currently engage the person in child-related work; or
- they have verified a new WWCC number for the person who will commence their employment at a later date.

In 2024-25 we issued:

- 2,795 notices to employers who had verified an applicant whose application was closed because they did not participate in the risk assessment process. This number is consistent with the last financial year

- 1,337 notices to employers due to administrative closures, such as the applicant providing incorrect information or not disclosing an alias name. 33 people were removed from child-related work when the employer was notified.

Reports of concern

The OCG reviews instances of alleged non-compliance with the *Child Protection (Working with Children) Act 2012* and the *Child Protection (Working with Children) Regulation 2013*. Allegations are received from many sources including from other government agencies, internal referrals and from concerned members of the public, via the Report of Concern portal.

In 2023-24 the process of submitting and receiving reports of concern was streamlined and integrated into our case management system to manage workflow.

In 2024-25 we received 518 reports of concern that were triaged, assessed, prioritised and actioned by the Investigations team. This represents a 62% increase compared to last financial year.

Reports of concern that are assessed as posing a high risk of harm to the safety, health, and wellbeing of children are allocated as a priority and investigated. Of the 518 reports of concern, 52 were allocated for further investigation resulting in:

- 25 found to be compliant
- 3 reminders issued
- 9 warnings issued
- 3 fine issued
- 7 considered outside the OCG's jurisdiction
- 5 did not have enough information to proceed.

The remaining 383 reports of concern were triaged, assessed and were either referred to other teams, other government agencies, or

closed, where there was insufficient information to proceed.

Matters finalised due to insufficient information include circumstances when the reporter does not respond to follow up enquiries or reports anonymously.

Investigations

Some instances of alleged non-compliance with the *Child Protection (Working with Children) Act 2012* involve a high risk to children. These include allegations that a barred worker or an individual without a WWCC has been engaged in child-related work or allegations that an employer has repeatedly failed to verify their employees' WWCCs.

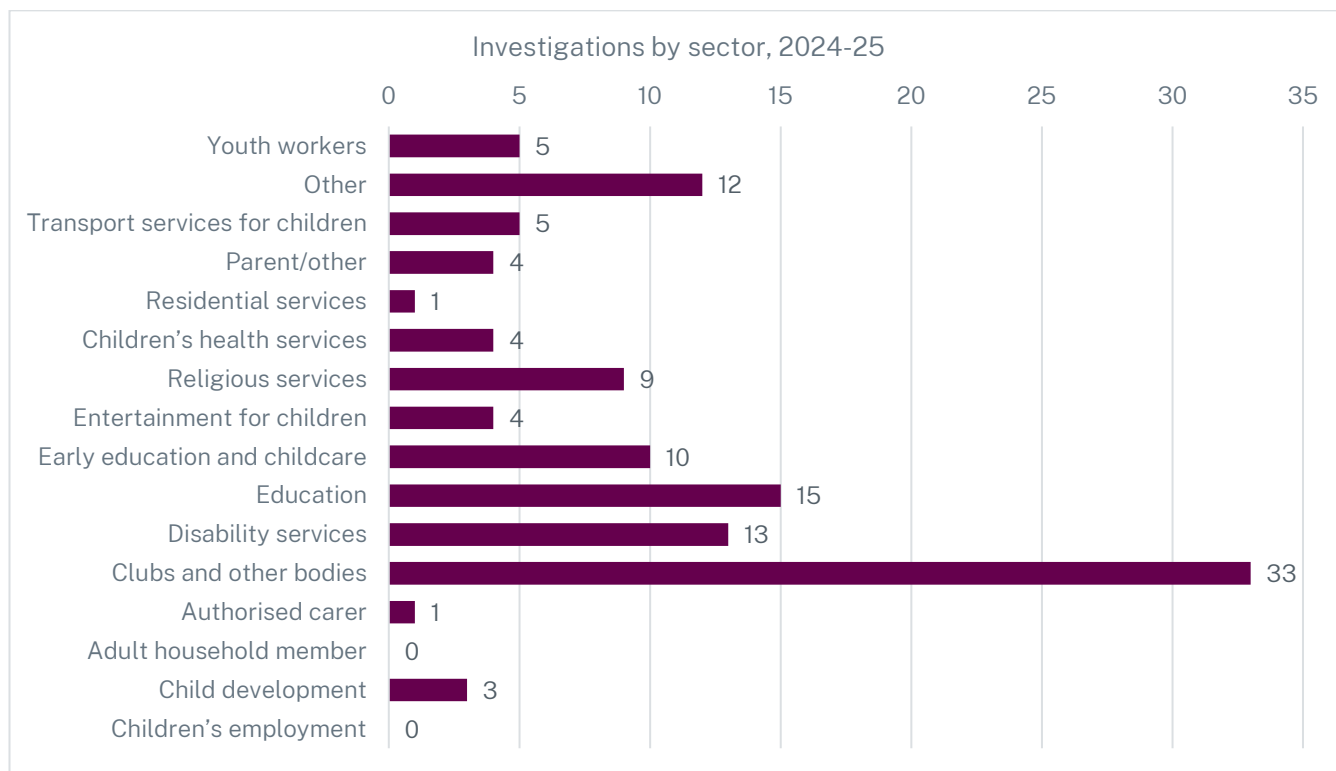
In 2024-25 we completed 119 investigations into alleged breaches of the *Child Protection (Working with Children) Act 2012*, a 17% decrease compared to last financial year. This decline in the number of investigations conducted is largely attributed to a reduction

in staffing and changes in team management. Additionally, the number of investigations conducted in 2023-24 included data from the unverified bar program. The unverified bar program was introduced in 2023-24 as a trial and aimed to identify if barred individuals were working with children without verification. A review of the trial found that most individuals identified through this process were not engaged in child-related work and did not require compliance action. The findings, combined with an increase in reports of concern, influenced the decision to discontinue the program in October 2024.

As part of the investigative process, we identify the child-related sector that the worker or employer works within. This data helps us identify high-risk sectors that may need further assistance in achieving compliance.

The OCG will prioritise addressing non-compliance in these high-risk sectors in 2025-26.

Graph 3: Investigations by sector 2024-25



The high number of investigations in the ‘clubs and other bodies providing services to children’ sector may be due to the scope and scale of the subsectors that make up this sector, including sports and recreational services.

To address non-compliance, we have a range of enforcement remedies available under the Act and Regulation. We use enforcement as a key tool for addressing conduct which involves directly or indirectly putting children at risk of harm or shows a blatant or persistent disregard for the law. We may use one, or several actions to address employer behaviour to achieve our compliance and enforcement objectives.

Administrative enforcement can include reminders and warning letters to caution an

employer or individual about their legislative obligations and what they need to do to be compliant in future.

Where we have identified that the employers’ degree of culpability or the potential risk to children created by the alleged breaches is significant, we may issue fines. As a result of the investigations conducted in 2024–25, we issued 19 fines to 7 organisations, totalling \$19,000, for failing to comply with the *Child Protection (Working with Children) Act 2012*.

Graph 4: Outcomes of investigations completed 2023-24 to 2024-25



CASE STUDY

Failing to verify

The Investigations Team received a report of concern alleging that a disability support worker was engaged in child-related work while under the influence of drugs and alcohol. The individual was employed to support children with highly complex needs, including overnight respite care.

Preliminary checks of the WWCC system revealed that:

- the named employer was not registered and was therefore not verifying the WWCC details of workers
- the business was linked to a National Disability Insurance Scheme (NDIS) registration
- the OCG had previously been in contact with the owner, and
- the worker was found to be the holder of a current WWCC.

Due to the seriousness of the allegations and the nature of the services being provided to vulnerable children, an investigation into the organisation's compliance with WWCC requirements commenced. The employer consistently failed to provide adequate responses to information requests and resisted attempts to clarify compliance concerns. The employer was asked to participate in a formal record of interview as part of the investigation process. It was identified through this process that none of the staff engaged in child-related work had been verified on the WWCC system.

Throughout the investigation, the employer failed to respond to multiple information requests, was evasive, and provided inconsistent or incorrect worker details. Despite receiving detailed guidance, the employer did not register with the WWCC system in a timely manner and failed to take reasonable steps to understand and meet their obligations. These factors were considered in determining enforcement action. The employer was fined for 100% of the identified non-compliance.

In addition to the financial penalty, the investigator recommended that the employer attend WWCC training and participate in a follow-up audit within 12 to 24 months.

This case highlights the risks posed by non-compliance in the disability support sector and the importance of robust enforcement and education to protect vulnerable children.

Reportable Conduct Scheme

The primary functions under the Scheme are:

- providing oversight and guidance on reportable conduct investigations
- conducting investigations and inquiries into reportable allegations and convictions and the response to, and handling of these matters by relevant entities
- ensuring appropriate action is taken by a relevant entity
- monitoring a relevant entity’s systems for preventing, detecting and dealing with reportable conduct and reportable convictions
- providing advice and education
- reporting relevant entities’ sustained findings of sexual offences, sexual misconduct and serious physical assaults to our WWCC Directorate, and
- referring information about people who pose a real and appreciable risk to children during an investigation to the WWCC Directorate.

Relevant entities must notify us of reportable allegations and reportable convictions against their employees within 7 days of becoming aware of them unless they have a reasonable excuse for not doing so. Relevant entities have additional reporting obligations at 30 days and on completion of their reportable conduct investigation. About 15,000 organisations across NSW have these obligations – see below, “Number of notifications received by relevant entity type”, for the industries that are captured by the Scheme.

Under the Scheme, ‘employee’ is defined broadly to include contractors, volunteers and people otherwise engaged by the relevant entity to provide services to children.

The Children’s Guardian has broad powers to require information from relevant entities about reportable conduct matters, whether in response to a notification, following a complaint or of the Children’s Guardian’s own motion. The Children’s Guardian may also exempt a relevant entity from investigating a reportable allegation.

Key Performance Statistics



We monitor the most serious and complex investigations, or those from first-time notifiers, to provide enhanced scrutiny and guidance to the relevant entity, where doing so would add the most value to the objectives of the Scheme.

The increased inquiries reflect a greater level of proactive oversight over a portion of cases part of our risk-based oversight strategy.

In determining whether there is a public interest in the Children’s Guardian monitoring a relevant entity’s reportable conduct investigation under section 43 of the Act, the paramount consideration is the safety, welfare and wellbeing of children. In reportable conduct matters, this paramount consideration is best met when reportable allegations are thoroughly and fairly responded to.

The Children’s Guardian weighs a number of factors in this decision-making, including but not limited to the seriousness of the alleged conduct, any known relevant history about the subject employee, the relevant entity’s capability and risk management, and the involvement of third parties such as police.

Notifications and trends

During 2024-25, 5,032 matters were reported under the Scheme.

- We received 2,836 notifications – this was an 18% increase on last financial year and represents a cumulative increase in notifications of 69% over the past 3 financial years.
- Enquiries increased by 11%, to 2,126. This constitutes a 34% increase in Enquiries over 2 years.
- There was an increase of 32% in complaints about relevant entities, with 70 complaints received over the financial year. The complaints related most to non-government designated OOHC agencies (31%, 22), independent schools (16%, 11) and approved early education and care services (13%, 9).

The OCG was able to finalise slightly more notifications than received during the year and maintain timeliness of investigation assessments (at 39 days compared with 37 days last financial year) despite the significant cumulative increase. However, this was only

achieved through increasing reliance on exemptions. In this regard, the exponential increases in notifications year-on-year have required the OCG to modify its risk-based oversight model to focus resources on the most relatively serious and complex notifications. Over the year, we exempted relevant entities from commencing or conducting a reportable conduct investigation in 563 cases. See – see below, “Outcomes” for an explanation of exemptions. In addition to exempting 563 matters from investigation, we exempted relevant entities from providing their reportable conduct investigation to us for assessment in 135 cases.

Increased notifications

The relationship between notifications and prevalence is nuanced, and an increase in notifications does not necessarily equate to an increased prevalence of child abuse. Child abuse allegations are known generally to be significantly underreported, meaning that increased reporting can be a positive sign of an increased awareness of child safety and reporting obligations, and of improved systems for supporting victims to disclose. Further, disclosures are not always contemporaneous – approximately 17% of notifications finalised last financial year related to alleged abuse occurring more than a year prior to being reported, with 8% (202) relating to alleged abuse occurring more than 10 years prior to reporting:

Table 8: Number of historic alleged abuse notifications

Alleged Abuse is historic: closed notifications 2024-25	Count
Historic - 1 to 5 years	187
Historic - 6 to 10 years	49
Historic - 11 to 15 years	40
Historic - 16 to 20 years	36
Historic - 21+ years	126
Historic - unknown	23
Not Historic	2,096
Grand Total	2,557

Notifications by relevant entity type

Table 9: Number of notifications received by relevant entity type

Type of relevant entity	2021-22*	2022-23	2023-24	2024-25
Agency providing substitute residential care***	19	12	9	9
Approved education and care service	211	267	372	567
Department of Communities and Justice	299	369	319	375
Department of Education	228	360	376	379
Health organisations****	33	37	49	54
Non-government school	103	178	271	302
Non-government designated agency*****	519	619	723	865
Other public authorities	57	80	146	147
Religious body	48	86	95	93
Agency providing specialised substitute residential care*****	15	50	38	34
TAFE	6	5	10	8
Agency not in jurisdiction	0	2	2	3
Grand Total	1,538	2,065	2,410	2,836

NOTES:

*Figures for 2021-24 have been updated.

**Includes Ministry of Health, Local Health Districts, statutory health corporations, affiliated health services and Ambulance Service of NSW.

The biggest increase in notifications by relevant entity type were from:

- approved early childhood education and care services (+52%, following a 38% increase the previous financial year)
- non-government designated agencies (+20%, following a 17% increase in the last financial year)
- independent schools (+20%, following a 52% increase in the last financial year).

The data relating to notifications from these sectors is explored in more depth below.

Notifications by primary allegation type

Table 10: Number of notifications received by primary allegation type

Primary allegation	2021-22*	2022-23*	2023-24	2024-25
Assault	502	680	731	790
Behaviour that causes significant emotional or psychological harm to a child	18	42	35	62
Ill treatment	140	205	247	284
Neglect	215	230	308	384
Offence under section 43B or 316A of the <i>Crimes Act 1900</i>	7	10	6	17
Reportable conviction	1	7	4	2
Sexual misconduct	137	206	240	292
Sexual offence	290	383	464	548
Not in jurisdiction	228	302	375	457
Total	1,538	2,065	2,410	2,836

The increase in notifications was spread across reportable conduct categories, with pronounced increases in allegations of conduct causing significant emotional or psychological harm to a child and offences under sections 316A/43B of the *Crimes Act 1900*.

- 19% (12) of the psychological harm notifications were from independent schools and 18% (11) were from non-government designated OOHC agencies.
- 47% of the s316A/s43B offence notifications were from early childhood education and care services. These criminal offences relate to failures to report and to mitigate risk to a child or children and have very high evidentiary thresholds.
- Neglect allegations rose by 25%, notified primarily by designated OOHC agencies (64%, 246).
- Sexual misconduct notifications rose by 22%, with 51% (149) of notifications being from schools.
- Sexual offence notifications rose by 18%, notified largely by schools (54%, 297).

Notifications from the approved early childhood education and care sector

The substantial increase in notifications from approved early childhood education and care services over the past 2 years follows widespread public scrutiny about abuse by educators in the sector and significant capability work undertaken by the OCG in collaboration with the Early Childhood Education and Care Regulatory Authority. As a result, a portion of increased notifications from the sector may be attributed to improved awareness and reporting. There has also been an understandably risk-averse approach by services in making notifications, with 34% (190) of the notifications from this sector over the last financial year being assessed as not meeting the threshold for notification under the Scheme. That is not to say that the allegations were not serious or did not warrant investigation under the service's misconduct processes. However, once notified, the OCG

has a role to play in responding to the not-in-jurisdiction notifications by processing and assessing the documentation, providing advice and guidance to the service and making referrals internally or to other bodies where appropriate, such that they consume significant resources despite being wrongly notified.

The notifications from this sector came primarily from Early Education Services (90%, 508), with 9% (51) from Out of School Hours Care services and 1% (7) from Family Day Care providers. The relative lack of visibility in family day care services is a factor contributing to low reporting rates from those services, given that a significant proportion of notifications from this sector arise from a report by an employee witness. In this regard, last financial year, employee reports accounted for 34% (192/566) of the notifications from this sector, with employees being the source of the report in 49% of assaults cases, 48% of ill-treatment notifications, and 68% of neglect matters. However, only 10% of sexual offences and 18% of sexual misconduct allegations were reported by employees, with these allegations being primarily disclosed by the alleged victim directly to the service or through their parent or family member (73%).

Of the notifications in jurisdiction from this sector over the last financial year, the biggest proportionate increases were in the reportable conduct categories of section 316A/s43B offences, neglect and behaviour causing significant emotional or psychological harm, while assault made up 24% of the in-jurisdiction notifications, neglect 15% and ill treatment 10%.

Table 11: Notifications received from approved education care services

Primary Issue	2020-21	2021-22	2022-23	2023-24	2024-25
Assault	73	65	81	126	134
Behaviour that causes significant emotional or psychological harm to a child	0	1	2	6	14
Ill treatment	25	22	23	36	58
Neglect	33	35	22	30	87
Offence under s316A or s43B of the <i>Crimes Act 1900</i>	0	1	1	0	8
Sexual misconduct	4	3	7	21	33
Sexual offence	18	25	19	28	42
Not in jurisdiction	110	59	112	122	190
Total	263	211	267	369	566

Notifications from designated agencies

Similar to previous years, the majority of notifications from designated agencies involved allegations against foster carers (70% - 811), however there was an increase in notifications involving employees in residential care services, at 29% (340) of notifications from this sector, more than doubling over the past 2 financial years.

Across the non-government subsector, which saw markedly increased notifications:

- assault was the most-notified category, constituting 35% of notifications from the sector, and these notifications increased by 24% on the last financial year (246 to 304)
- notifications of ill-treatment increased by 31% (104 to 136), comprising 16% of all notifications from this sector
- 18% of the notifications involve primary allegations of neglect, and these allegations increased over the reporting period by 19% (135 to 160)
- while sexual misconduct notifications decreased by 16% (61 to 51), sexual offence allegations increased by 16% (61 to 71).

Many of the alleged victims in these notifications have disability and/or are

Aboriginal or Torres Strait Islander children – see below, “Alleged victims”.

The increases in the residential care subsector (government and non-government) are primarily in the reportable conduct categories of:

- sexual offences: +91% (22 to 42)
- assault: +72% (57 to 98)
- neglect: +52% (56 to 85).

Notifications from schools

In the school sector, notification rates remained steady across government and Catholic systemic schools, while notifications from independent schools continued to increase:

Table 12: Notifications by school subsector

School Subsector	2022-22	2023-24	2024-25
Department of Education	360	376	379
Non-government schools - Independent	75	145	179
Non-government schools - Catholic Systemic	103	126	123

Similar to previous years, the majority of notifications from schools (65%, 446/681) involved allegations of a sexual nature, and the vast majority of these (90%) involved the alleged conduct occurring in connection with the employee's work.

The notifications of a sexual nature from schools comprised of:

- 212 sexual offence and 55 sexual misconduct allegations from government schools, with sexual offence allegations accounting for 56% of notifications from the Department of Education
- 42 notifications by Catholic systemic schools in each category of sexual offence and sexual misconduct, each constituting 34% of notifications from that subsector
- 43 sexual offence and 52 sexual misconduct allegations from independent schools, with sexual misconduct notifications accounting for 29% of notifications from the sector.

While a portion of these matters relate to historical alleged conduct, the majority are contemporaneous and reflect that better identification of and response to early indicators of grooming by employees in schools is necessary to prevent boundary breaching behaviours from escalating to a sexual offence.

Reporting rates in other sectors

Despite a focus on capability building and awareness raising in the following sectors, notifications remain low relative to sector size and – in the case of Specialised Substitute Residential Care (SSRC), in particular – the vulnerability of children accessing their services, with:

- 93 notifications from religious bodies which, similar to previous years, predominantly relate to alleged sexual offences, at 62% (58)
- 54 notifications from the Health sector, relating primarily to assault, at 35% (19), and 17% (9) in each of the categories of sexual offences and behaviour causing significant emotional or psychological harm to a child
- 34 notifications from the SSRC sector, with the majority involving assault (32%, 11), sexual offences (24% 8) and neglect (15%, 5).

Source of reportable allegations (notifications in jurisdiction)

In 2024-25, similar to last financial year, the largest percentage of reports resulting in notifications in jurisdiction (2,382) were made by agencies which are external to where the person who is the subject of the alleged conduct works (such as DCJ or NSW Police), at 25% (600/2,382).

The relatively high proportion of allegations made by alleged victims and their families reinforces the importance of organisations having robust child safe complaint practices that provide known, trusted and reliable pathways for raising concerns. In this regard:

- 22% (519/2,382) of notifications arose from direct disclosures and reports by the alleged victim to the relevant entity; and
- 18% (434/2,382) arose from complaints made by the alleged victim's family, carer or advocate.

Employee reports, including employee witnesses and employee self-reports, accounted for 19% (448/2,382) of all reportable allegations.

Five per cent (117) of notifications involved civil claims, while 3% (74) arose from claims under the National Redress Scheme. The majority of notifications arising from civil claims and redress claims were from the school sector, at 76% (89) and (80%, 59), respectively.

Employees the subject of reportable allegations

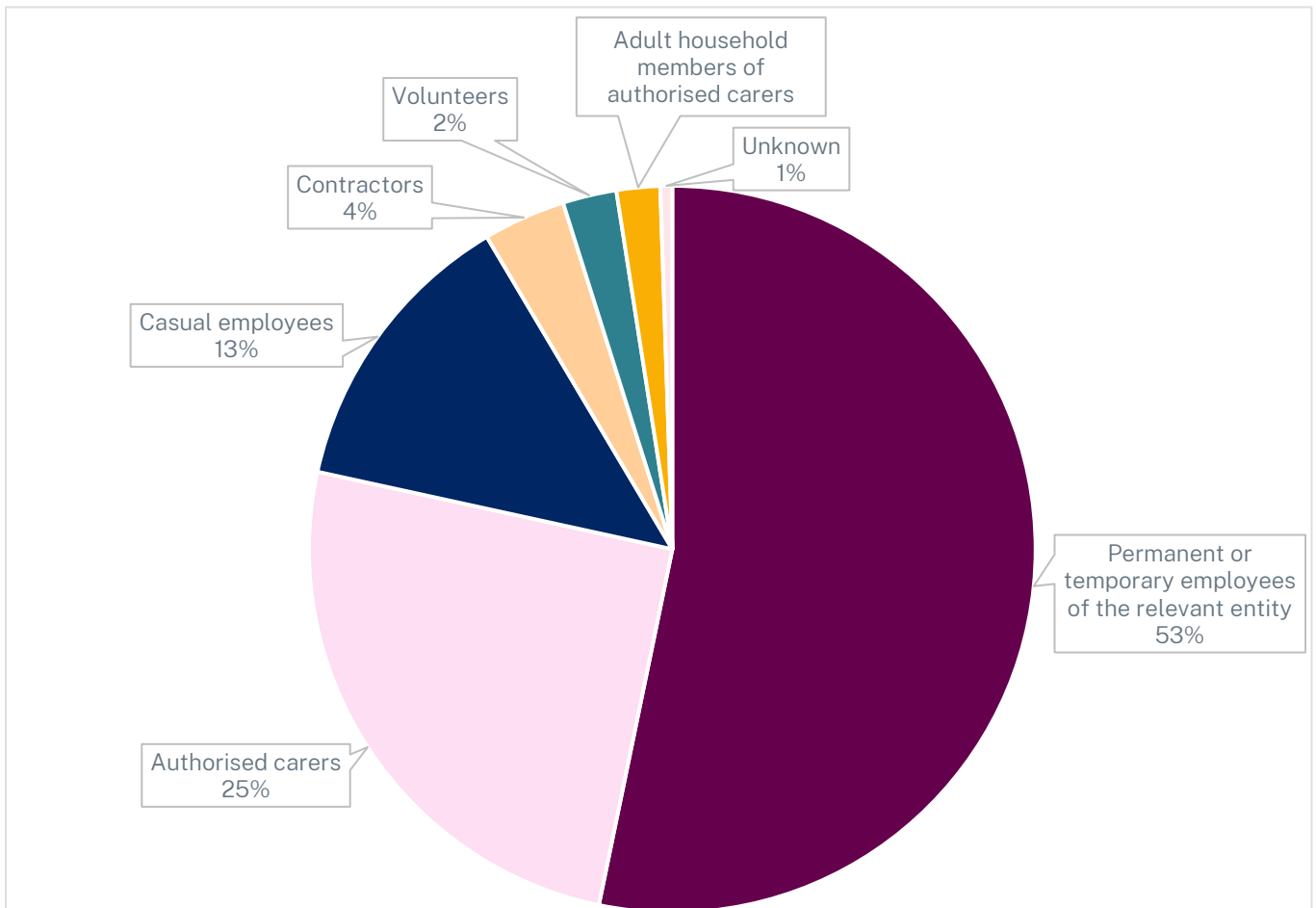
Gender

As in previous years, male and female employees were the subject of reportable allegations in even numbers; however, with different reporting patterns. The trends are consistent with previous years:

- Female employees were notified primarily for assault (30%, 433/1,441), neglect (20%, 285/1,441) and ill-treatment (13%, 189/1,441)
- Almost half (48%, 650/1,360) of notifications involving male employees involved allegations of a sexual nature, comprised of sexual offences (33%, 444/1,360) and sexual misconduct (15%, 206/1,360).

Employment type

The following pie chart depicts the proportion of matters notified by employee status:



Connection to the workplace

Consistent with previous years, the vast majority (90%, 2,555/2,836) of notifications in 2024-25 relate to an employee's alleged conduct occurring in, or connected to, the employee's place of employment. Outside-of-work allegations primarily involved alleged criminal offences by employees towards children, with 35% (67/193) that were in jurisdiction involving alleged assaults and 32% (61/193) involving alleged sexual offences.

Alleged victims

Notifications in jurisdiction received over the reporting period involved 3,260 alleged victims – noting that 17% (481/2,836) of notifications involved more than 1 alleged victim. The data below relates to these alleged victims.

Aboriginal or Torres Strait Islander alleged victims

Approximately 28% (902/3,260) of alleged victims were reported to be Aboriginal or Torres Strait Islander children. In total, 637 notifications involved at least 1 alleged victim reported to be Aboriginal or Torres Strait Islander, with 42% (266/637) involving allegations of assault, 21% (136/637) involving allegations of neglect and 21% (134/637) involving allegations of a sexual nature. The vast majority (76%, 485/637) of these were notified by designated out of home care (OOHC) agencies, in contrast to only 16% (100/637) of the notifications coming from the education sector (including early childhood education and care services). Aboriginal and Torres Strait Islander children constituted almost half (46%, 728/1,581) of alleged victims in OOHC. This data is largely consistent with the data from last financial year.

Alleged victims with disability

Almost a quarter (789/3,260 = 24%) of the alleged victims were reported to have disability. In total, 681 notifications involved at least 1 victim with at least 1 disability. Of

those, 74% (507/681) were notified by designated OOHC agencies and 21% (140/681) from the education sector (including early childhood education and care services). Of all notifications in 2024–25, children with disability were the alleged victims in:

- 39% of allegations of assaults (306/790)
- 36% of allegations of ill-treatment (101/284)
- 34% of allegations of neglect (130/384)
- 15% of allegations of a sexual nature (126/840).

Table 13: Alleged victim – types of disability

Disability Category	Count
Cognitive	506
Physical	74
Sensory	156
Social/emotional	513
Unknown	27
Total	1,276

NOTES:

*Alleged victim might have 1 or more disability type.

Alleged victim gender

The gender of alleged victims was unknown in 4% (118/3,260) of matters at the time of reporting. Many of these matters involve offences relating to child abuse material, in which the victim's gender may not be identified.

Of the 3,142 alleged victims where the gender is known, 17 alleged victims identify as non-binary and of the remaining alleged victims, 52% (1,643/3,142) are male and 47% (1,482/3,142) female.

In the reported matters over the year, males were more likely than females to be the alleged victims of assault (60%), while females were more likely than males to be the alleged victims of sexual misconduct (67%). Assault was the dominant category of reportable conduct type involving male alleged victims, followed by neglect.

Table 14: Notifications received 2024–25 (excluding not in jurisdiction) by primary issue and the alleged victim’s gender

Primary allegation	Non-binary	Female	Male	Unknown	Total
Assault	1	425	650	16	1,092
Behaviour that causes significant emotional or psychological harm to a child	0	36	44	5	85
Ill treatment	5	177	229	6	417
Neglect	6	289	291	8	594
NJ	0	3	2	0	5
Offence under section 316A of the <i>Crimes Act 1900</i>	0	7	8	1	16
Offence under section 43B of the <i>Crimes Act 1900</i>	0	1	1	0	2
Reportable conviction	0	1	0	1	2
Sexual misconduct	1	284	118	20	423
Sexual offence	4	259	300	61	624
Total	17	1,482	1,643	118	3,260

Alleged victims by age

Alleged victims of different age groups were represented in notifications in jurisdiction as follows, with the distribution largely consistent with previous years:

- 16 and 17 years: 16% (449/2,880) of notifications, 40% (179/449) of these involving allegations of a sexual nature
- 13 to 15 years: 24% (678/2,880) of notifications, most involving allegations of a sexual nature (41%, 275/678) and assault (29%, 197/678)
- 10 to 12 years: 19% (547/2,880) of notifications, comprising allegations of assault (41%, 224/547), sexual in nature (32%, 177/547), neglect (14%, 79/547) and ill-treatment (10%, 56/547)
- 7 to 9 years: 14% (393/2,880) of notifications, the majority involving allegations of assault (42%, 165/393) and ill-treatment (19%, 73/393)
- 1 to 6 years: 27% (774/2,880) of notifications, primarily involving allegations of assault (36%, 281/774), followed by neglect (28%, 218/774)

- younger than 12 months: 1% of notifications, primarily involving allegations of assault and neglect.

Table 15: Notifications received 2024–25 (excluding not in jurisdiction) by primary issue and the alleged victim's age

Primary issue	<12 months	1-6 years	7-9 years	10-12 years	13-15 years	16-17 years	Not in jurisdiction not child at time	Unknown	Grand total
Assault	13	281	165	224	197	125	4	83	1,092
Behaviour that causes significant emotional or psychological harm to a child	0	31	11	9	12	11	1	10	85
Ill treatment	0	112	73	56	76	47	4	49	417
Neglect	12	218	69	79	112	81	3	20	594
Offence under section 316A of the <i>Crimes Act 1900</i>	0	5	1	1	2	5	0	2	16
Offence under section 43B of the <i>Crimes Act 1900</i>	0	1	0	1	0	0	0	0	2
Reportable conviction	0	0	0	0	1	0	0	1	2
Sexual misconduct	0	49	13	59	128	104	1	69	423
Sexual offence	1	76	61	118	147	75	0	146	624
Total	26	774	393	547	678	449	13	380	3,260

Time taken to investigate

Under the *Children's Guardian Act 2019*, we are required to report on the number of investigations or determinations in relation to reportable allegations or reportable convictions that have not been completed by a relevant entity or the Children's Guardian within 6 months after the commencement of the investigation or determination.

Finalised matters

Of the 1894 entity investigations that were finalised over 2024-25, 51% (972) took more than 6 months to investigate, compared with 52% (1,059) last financial year. Of the finalised matters, 34% (651/1,894) had been deferred or suspended for a period of time. The average period of deferral for all finalised matters was

190 days, while the average period for matters finalised after 6 months was 269 days.

A deferral or suspension is a key reason a reportable conduct investigation will take much longer than 6 months. Reportable conduct investigations are typically deferred or suspended when a third-party investigation is underway, for example by police, or when the matter is the subject of criminal proceedings. There are other legitimate reasons for suspending an investigation, including health concerns for the alleged victim or the employee about whom the allegation was made.

Other factors can also impact the investigation time. Of matters closed during the reporting period which took more than 6 months to investigate, the following factors

were most typically present (as a percentage of matters recorded): complexity (19%), suspended due to third party involvement, such as police, (17%), resourcing 19%, difficulty or delay obtaining third party information (10%), difficulty locating witnesses (5%), inexperience (4%) and victim or employee wellbeing (3%).

Active matters

As at 30 June 2025, we had 1,551 open notification cases with entity investigation reports pending, of which 52% (800) have been active for more than 6 months, a reduction of 4% (865) from last financial year. Many of these matters (670 of 1,551, which is 43%) have been the subject of a deferral or suspension of investigation decision.

Outcomes

In 2024-25 we finalised 2,557 cases. A portion of these finalised matters did not result in findings, primarily because we exempted the relevant entity under section 31 of the *Children's Guardian Act 2019* from commencing or continuing its investigation.

Reasons for section 31 exemptions include:

- dual employer notifications, whereby one employer leads the investigation and the other is exempted
- the involvement of vulnerable parties and a risk to these individuals should the reportable conduct investigation proceed
- that commencing or continuing a reportable conduct investigation may compromise a future police investigation
- that the objectives of the Scheme will be better met through a response that focuses on risk management; or
- that the objectives of the Scheme have otherwise been met through parallel processes, such as a statutory child protection or a misconduct response.

When an entity is exempted from commencing or continuing an investigation, it is not necessarily relieved of all obligations in relation to the allegations. In many cases we work with relevant entities to ensure that alleged victims and their families are properly informed about the steps taken in response to their disclosure or report and reasons the investigation has not proceeded; identify whether any systemic shortcomings exist and ways to remedy them; and ensure the entity undertakes a risk assessment and introduces appropriate risk management strategies.

The following outcomes relate to matters investigated to completion (finding).

Findings

Over the year, 31% of matters investigated to finding and finalised were sustained (24% as reportable conduct).

Sustained findings of serious physical assault, sexual misconduct and sexual offences must be reported by the Reportable Conduct Directorate to the WWCC Directorate. These reports trigger an assessment of the employee's suitability to continue holding a clearance to work with children.

The *Children's Guardian Act 2019* states that heads of relevant entities must make a finding of reportable conduct if satisfied, on the balance of probabilities, that the case against the employee has been proved.

The sustained rate for reportable allegations that constituted criminal offences or sexual misconduct was lower (15% for sexual offences, 23% for assaults and 21% for sexual misconduct) than non-criminal reportable allegations and those not requiring a referral to the WWCC unit (38% for neglect and 40% for ill-treatment).

As part of our oversight, we scrutinise findings to ensure that they are logical and evidence-based. It is inevitable that some decision-makers will be more cautious with their findings than others. Our role is to ensure that

the finding they make is open to them on the evidence and that an appropriate assessment of risk is undertaken at the conclusion of the investigation, regardless of the finding (see below- Action at the conclusion of reportable conduct investigations).

Over the year, we found relevant entities' handling of reportable allegations to have an unsatisfactory element in 9.61% of finalised matters, which may include deficient investigation planning, documentation, procedural fairness, or victim support. In these cases, the deficiencies could not be remedied and instead we provided detailed feedback to the entity for capability-building purposes. We assessed that 2% of finalised matters were unsatisfactory overall. These all involved unreasonable findings. We may request that an entity review its finding if an unreasonable finding has serious implications for either the subject employee or for managing risks to children. This informal approach generally results in deficiencies being remedied. Occasionally, we need to escalate our involvement.

Action at the conclusion of reportable conduct investigations

While 76% of finalised investigations did not result in a sustained reportable conduct finding, 72% of all finalised matters resulted in the relevant entity taking disciplinary, remedial or systems-related action at the conclusion of the investigation. This reflects 2 important preventative elements of the scheme.

Firstly, in many reportable conduct matters, the available evidence may not be sufficient to satisfy the decision-maker that the alleged conduct occurred, but it may be sufficient to give rise to concern for the head of relevant entity that the subject employee may pose a risk to children that requires management.

Secondly, reportable conduct investigations often uncover evidence of systemic failings or areas for system improvement. In this regard, 10% of investigations finalised over the reporting period resulted in the entity making changes to their policies, procedures or systems, and in 91% of those cases, the

changes were to improve implementation of the Child Safe Standards.

Complaints about responding to reportable allegations

Under the *Children's Guardian Act 2019*, any person can make a complaint about the way relevant entities respond to reportable allegations and can also raise reportable allegations about heads of relevant entities directly with the Children's Guardian. We received 70 complaints over the reporting period, most of which were from employees or alleged victims (or people acting on behalf of alleged victims).

This year, 41% (29/70) of the complaints we received were assessed as not meeting the threshold of a reportable conduct complaint. However, the majority of these were assessed to fall within the broader jurisdiction of the OCG and the information was shared internally for further action.

Exemptions under section 30

Under the *Children's Guardian Act 2019*, we are required to provide details of any exemptions from notification given to a class or kind of conduct of employees of a relevant entity. The OCG has not granted any exemptions in 2024–25, however, did finalise Regulations to provide for such exemptions and commence consultations with relevant stakeholders.

Evaluation of responses

The *Children's Guardian Act 2019* requires us to report an evaluation of the response of relevant entities to the recommendations of the Children's Guardian. The Children's Guardian only makes recommendations (as opposed to giving best-practice guidance and making suggestions as part of our oversight role) following the use of our formal investigation powers and completion of an investigation report. We completed compliance monitoring of 1 formal investigation over the reporting period, with the entity the subject of the investigation demonstrating full compliance with our recommendations.

Out-of-Home Care and Adoption

The OCG regulates and monitors statutory out-of-home care and adoption services in NSW.

Our 2 main functions are to accredit agencies and monitor standards of care.

We assess organisations seeking accreditation for the first time and assess those seeking to renew their accreditation. We also monitor agencies to ensure they meet their responsibilities throughout their period of accreditation.

New service providers

Two new statutory out-of-home care providers were accredited in the past year, 1 of which is an Aboriginal Community Controlled Organisation (ACCO).

Given the significant over-representation of Aboriginal children in statutory out-of-home care, we encourage and continue to prioritise applications from ACCOs. There are 24 accredited ACCOs: 16 accredited to provide foster care; 1 is accredited to provide residential care; and 7 are accredited to provide both service types.

During 2024-25, 1 ACCO already accredited to provide foster care services, applied for and was accredited to also provide residential care services. During this reporting period, 1 ACCO made the decision to surrender its provisional accreditation in order to concentrate resources on its Aboriginal medical services.

Designated and adoption agencies are accredited after they have demonstrated they meet the requirements in the NSW Child Safe Standards for Permanent Care. Designated agencies have responsibilities under the *Children's Guardian Act 2019* and regulation, and the *Children and Young Persons (Care and Protection) Act 1998* and regulation. Adoption agencies must also comply with the *Adoption Act 2000* and regulation.

Agencies applying for accreditation may be granted provisional accreditation or full accreditation. Provisional accreditation is granted where an agency has not provided statutory out-of-home care or adoption services in the 12 months prior to making an application for accreditation. Most agencies with provisional accreditation are agencies that are providing services for the first time. When a new provider first commences service provision, the agency must notify the Children's Guardian and assessors visit the agency every 4 months over the course of the agency's accreditation period, to monitor practice and compliance with accreditation criteria.

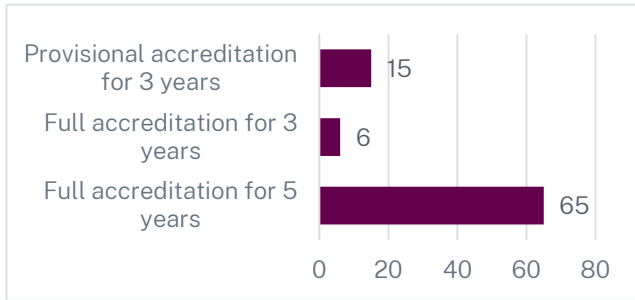
When an agency has provided statutory out-of-home care or adoption services for 12 months, they may apply for full accreditation.

Designated agencies and adoption service providers are required to comply with the standards throughout the period of their accreditation. A Notice of Conditions of Accreditation is issued to each accredited agency. It sets out the services the agency can provide and any other requirements the agency must meet.

The Children's Guardian can shorten or cancel an agency's accreditation if it fails to comply with any of the conditions or fails to meet accreditation criteria over time. Information about agencies' accreditation periods and conditions of accreditation are published on our website.

Designated agencies

On 30 June 2025, there were 86 designated agencies accredited to provide statutory out-of-home care in NSW. They include non-government providers and NSW Department of Communities and Justice:



NSW Department of Communities and Justice

Each of the 16 Department of Communities and Justice (DCJ) districts are accredited as individual designated agencies and we undertake regular monitoring of each district's compliance with the standards. The focus and timing of our monitoring activities depends on where each district is in its accreditation cycle.

In 2024–25, we undertook assessment and monitoring activities in DCJ districts for different purposes:

- we undertook accreditation renewal assessments for 4 DCJ districts
- we undertook monitoring of 6 districts, which are part-way through their accreditation cycles. The purpose of this monitoring was to ensure the districts continue to comply with the standards.

We completed a total of 14 monitoring assessments in 12 DCJ districts during this reporting period. This included monitoring across districts regarding practices in arranging special out-of-home care. Special out-of-home care can be arranged by the Secretary for DCJ where a child has complex disability or medical needs. Special out-of-home care placements are often provided by disability service providers.

In 2022–23, the Children's Guardian imposed a condition on the accreditation of DCJ districts regarding the way they arrange special out-of-home care for children and young people. The condition on the accreditation of DCJ districts required the submission of policies and procedures for the arrangement of special out-of-home care and periodic progress reports on the implementation of its special out-of-home care action plan.

Our review of special care arrangements found improved practice following implementation of a new practice mandate across the Department. As a result of these practice improvements, the condition of accreditation was removed in September 2024.

Adoption

If a designated agency seeks to provide adoption services, it is required to comply with legislative requirements and demonstrate that it meets the standards as they apply to adoption. When an agency is accredited by the Children's Guardian, it can provide adoption services for children and young people in NSW.

On 30 June 2025, there were 6 non-government designated agencies that are also accredited to provide domestic adoption services in NSW. Five of these agencies hold full accreditation and 1 has provisional accreditation. This agency is participating in a direct evidence program towards full accreditation.

DCJ also provides domestic and inter-country adoption services in NSW. These services are due for continued monitoring next year.

Monitoring out-of-home care agencies for compliance

Each year, we assess designated agencies and adoption service providers to monitor their compliance with the standards. This year, we have continued onsite monitoring and, in some circumstances, have included a hybrid

approach of both onsite and remote assessments. The outcome of these assessments provides feedback to the agency on areas for improvement and also informs the Children's Guardian's decision on whether to accredit the agency.

Monitoring assessments include discussions with key staff and a review of documentation about individual children and young people and their carers, to check if the agency has systems to promote their safety and wellbeing. We assess compliance with child protection requirements, suitability of placements and care environments as well as authorised carer assessments and ongoing carer suitability and support. In addition, the monitoring assessments review the administration of the Carers and Residential Care Workers Registers to ensure carers and workers are appropriately authorised with mandatory probity, suitability checks and authorisation documentation is recorded on agency files and informs the authorisation decision and ongoing supervision and support needs.

This year, we conducted assessments of 48 agencies, of which 13 were DCJ out-of-home care programs. In all, we conducted 64 assessments of direct evidence this year.

These assessments involved agencies that were new providers, those working on practice improvements and agencies applying to renew accreditation.

Our assessors may spend several days or weeks monitoring an agency, and some agencies are visited several times over a 12-month period to monitor practice improvements.

Non-compliance with accreditation criteria

To achieve and maintain accreditation, designated agencies and adoption service providers must demonstrate compliance with accreditation criteria, the NSW Child Safe Standards for Permanent Care (November 2015) and children's care legislation. Where an

agency does not comply with these requirements, the Children's Guardian may decide to:

- refuse to grant accreditation
- defer a decision on an application for accreditation and require an action plan to address non-compliance
- impose a condition on the accreditation
- shorten or cancel the period of accreditation.

When considering any of these actions, the Children's Guardian advises the agency of the compliance concerns and the steps the agency must take to address these. In deciding what actions to take, the Children's Guardian considers the degree of risk to children as a result of non-compliance.

Conditions of accreditation imposed by the Children's Guardian

All designated agencies and adoption service providers are subject to general conditions of accreditation, set out in the Children's Guardian Regulation 2022.

In addition to general conditions of accreditation that apply to all agencies, the Children's Guardian may also impose further conditions on an agency's accreditation to address a particular area of concern.

When assessment of an accredited agency identifies areas of significant non-compliance, the Children's Guardian may impose specific conditions of accreditation requiring the agency to take urgent remedial action to address areas of concern. Such conditions may also require the agency to prepare an action plan and periodically report to our office on progress against the action plan or place a restriction on the agency's placement of children and young people.

Examples of conditions that the Children's Guardian may impose on an agency's accreditation include:

- preventing the agency from accepting further placements until a compliance concern is addressed
- requiring the agency to engage a person with child protection or other expertise to provide training to staff
- preventing the agency from accepting referrals for placements of children with complex needs until an area of concern is addressed
- requiring an agency to report on its progress in addressing compliance concerns.

Conditions imposed by the Children’s Guardian relating to a specific issue or concern in an agency may be varied or lifted by the Children’s Guardian. Failure to comply with a condition of accreditation may result in the Children’s Guardian finding that the agency is not suitable to be accredited.

As at 30 June 2025 9 agencies had specific conditions of accreditation requiring urgent remedial action. Of these, 7 are non-government agencies and 2 are DCJ districts.

Shortening or cancelling accreditation

The Children’s Guardian may shorten or cancel an agency’s accreditation if the agency is not suitable to be accredited or the accreditation was granted in error.

An agency is not suitable to be accredited if it:

- is disqualified from being accredited
- does not wholly or substantially meet the accreditation criteria.

The Children’s Guardian may also find that an agency is not suitable to be accredited where:

- the agency, or principal officer of the agency, failed to comply with the children’s care legislation
- the agency failed to comply with a condition of its accreditation

- the agency, or principal officer of the agency, made a statement or gave information in connection with the administration of the children’s care legislation knowing the statement or information was false or misleading in a material particular.

The Children’s Guardian may consider shortening or cancelling an agency’s accreditation where there is persistent non-compliance with accreditation criteria or children’s care legislation, and where the safety, welfare or wellbeing of children is at risk.

Where the Children’s Guardian decides to shorten or cancel an agency’s accreditation, the agency is advised of the decision in writing, including the grounds for the decision and the time and date on which the decision takes effect.

When an agency’s accreditation is cancelled, it is disqualified from being accredited for a period of 2 years. Wherever an agency is not accredited, it must not provide nor seek to provide statutory out-of-home care or adoption services.

Deferral of a decision on accreditation

When an agency applies for accreditation (including an application to renew accreditation), the agency must demonstrate that it wholly or substantially complies with accreditation criteria. Where an agency does not demonstrate compliance, the Children’s Guardian may refuse to grant accreditation or may defer making a decision on the agency’s application.

The Children’s Guardian may defer making a decision on an application for accreditation where the agency has submitted an action plan setting out how it will become compliant with accreditation criteria, and the Children’s Guardian is satisfied with the action plan. We visit these agencies regularly to monitor progress towards complying with the

standards and any concerns about individual children and young people are referred to DCJ.

An agency with a deferred decision on its application for accreditation continues to be accredited but must cooperate with a monitoring program and comply with any conditions imposed by the Children's Guardian. The maximum length of time an agency may have a deferred decision on its accreditation is 24 months. If the agency cannot meet the requirements of accreditation criteria in that time, its application for accreditation is refused.

At 30 June 2025, decisions on 2 applications for accreditation were deferred.

Information sharing protocol with the Department of Communities and Justice

The OCG and the Department of Communities and Justice both have an oversight role in the out-of-home care and adoption sector, for different purposes. Agencies must give information to the Department as their contractor and our office as the regulator - where our work overlaps, we work together to share information to make the process easier for agencies.

The Minister for Community Services holds parental responsibility for children and young people in statutory out-of-home care and the Department contracts non-government agencies to deliver services on its behalf. The Children's Guardian accredits these organisations and monitors how well they meet the required standards.

Under the law, our office and the Department share information to protect children's safety and wellbeing.

We meet with the Department every 3 months to share important information about the organisations we regulate. This includes information such as:

- information about an agency that might affect its accreditation

- concerns about an agency that is not meeting its accreditation requirements
- information about individual children or young people if there are concerns about their safety.

Where the Children's Guardian has imposed a condition on an agency's accreditation, and where the Department has a performance improvement plan in place, we work with the Department to avoid unnecessary duplication in reporting requirements.

We always let an agency know when we are sharing information with the Department.

Transition to the Code of Practice

Between 2021-24 we consulted the sector on a proposal to bring statutory out-of-home care and adoption service providers into the Child Safe Scheme by replacing the current accreditation criteria, the NSW Child Safe Standards for Permanent Care with a Code of Practice.

The Code of Practice was developed in consultation with the out-of-home care and adoption sector and commences on 1 October 2025.

The Code of Practice does 4 key things:

- promotes the safety, welfare, wellbeing and rights of children and young people in out-of-home care and adoption arrangements
- helps out-of-home care and adoption service providers comply with the 10 Child Safe Standards
- sets out important practices specific to the out-of-home care and adoption sector
- sets out the steps agencies must take to achieve and maintain accreditation.

In 2024-25 we have been developing a suite of resources to help the sector transition to the new Code of Practice. These resources are designed to help the sector understand how we will assess the Code of Practice. The

resources are available on our website and will be updated regularly.

We are grateful to the following organisations that have provided invaluable feedback as we have built these resources:

- AbSec NSW
- ACWA
- NSW Advocate for Children and Young People
- NSW Ageing and Disability Commission
- The Centre for Relational Care
- Create Foundation
- Curijo
- NSW Department of Communities and Justice
- Monash University
- Associate Professor Tim Moore and Dr Mary Ann Powell of the Australian Catholic University
- Pathfinders Ltd
- Uniting (NSW.ACT)
- Wesley Community Services Ltd.

In developing these resources, we have heard from agencies about the creative work they are doing to support the meaningful participation of children and young people and their families, which is a key requirement in the Code of Practice. We will continue to share examples of innovative practice, through the resources.

CASE STUDY

Innovative practice to support meaningful participation

Orange Aboriginal Medical Service (Yiriyirimbang) played a pivotal role in supporting a family with the care of their baby while the matter was under court consideration. The agency's approach involved close collaboration with the foster carers, the baby's grandmother, and both birth parents, all working toward the shared goal of restoration.

During this time, the baby's mother expressed a strong desire to continue breastfeeding, viewing it as vital to maintaining her connection and attachment with her child. Despite concerns stemming from her history of drug and alcohol misuse, the agency remained committed to honouring her wishes. Caseworkers undertook thorough research to identify the safest and most appropriate way to support this family's values. They consulted with the Australian Breastfeeding Association and the Infectious Diseases Unit, resulting in the development of a comprehensive set of policies and protocols.

To ensure the baby's safety, the mother participated in mandatory screenings 3 times weekly, which included testing both her urine and expressed breast milk prior to feeding. Additionally, caseworkers worked collaboratively with both parents, the foster carers and grandmother, to educate them on the safe expressing, handling and storage of breast milk.

This case study highlights exemplary practice aligned with several principles of the Code of Practice, including preserving cultural identity, encouraging family involvement, safeguarding the child's wellbeing and proactive casework to support restoration.

Notable practices we identified include:

- supporting the baby's bonding and attachment
- prioritising the health benefits of breastfeeding
- facilitating and empowering the mother's wish to breastfeed
- conducting thorough research to ensure safe breastfeeding practices
- establishing detailed protocols to support the baby, mother, carer and grandmother
- arranging shared care with kin
- applying Aboriginal and Torres Strait Islander Placement Principles through active restorative casework
- promoting genuine family participation
- honouring First Nations people's right to self-determination.

Yiriyirimbang demonstrated deep commitment to the mother's wish to breastfeed. Their dedicated and innovative approach ensured safe practices while providing meaningful support to the mother, father, foster carer and grandmother throughout the process.

Monitoring to renewal program

The Code of Practice is the final step in bringing the out-of-home care and adoption sector into the Child Safe Scheme. The Code of Practice will be implemented through the monitoring to renewal program.

Under the monitoring to renewal program, we check-in with accredited agencies on an annual basis to review compliance with accreditation requirements. In some years, this check-in is in the form of a written update provided by the agency, about the continuous practice improvements it is focusing on that year. We then visit the agency to confirm that these improvements are being put into practice.

This regulatory approach gives us important information about whether agencies are able to maintain good practice over the course of an accreditation cycle, and whether they have systems that help them to identify risks or gaps in practice and manage these.

Under this approach, we can tailor our accreditation assessments to the circumstances of each agency, rather than taking a one-size-fits-all approach to accreditation. This means that agencies with a good history of compliance do not need to undergo a full accreditation assessment, and we can direct our resources to agencies where there is greater risk of poor compliance.

CASE STUDY

Abridged accreditation assessment under the monitoring to renewal program

In July 2024 the Children's Guardian renewed accreditation for South Coast Medical Service Aboriginal Corporation, using an abridged accreditation pathway.

In 2022 and 2023 we undertook annual check-ins with the agency to review its compliance with accreditation requirements. These check-ins showed that the agency was maintaining good practice and was also implementing continuous improvement initiatives.

When the agency applied to renew its accreditation in 2024, we already had information about how the agency had performed over the course of its accreditation cycle and so we were able to undertake a brief review of the agency's practices in mid-2024.

In making a decision to renew the agency's accreditation, the Children's Guardian also considered other information that we hold about the agency, in the WWCC compliance team and reportable conduct directorate. The Children's Guardian also considered other accreditations held by the agency.

This approach meant that the agency was not required to go through an intensive assessment for accreditation renewal and we could reallocate our resources to provide more oversight of newly emerging agencies.

Information reported to the Office of the Children's Guardian

Agencies are required to notify us when a child or young person dies while in statutory out-of-home care and when a child under 12 years old is placed into residential care. Agencies are also required to notify reportable allegations to the OCG under the Reportable Conduct Scheme. When we receive a notification, we carefully assess the information to determine whether the agency

is meeting its legislative requirements. We may decide to make additional inquiries and use the information to inform our monitoring decisions.

During 2024-25, we received notifications relating to 182 children under 12 years whose placements commenced in residential care, with 29 designated agencies. Some children may be placed in residential care on more than 1 occasion. We received notification of 237

placements of children under 12 years in residential care.

In this reporting period, our Reportable Conduct Directorate received 538 notifications of allegations relating to 583 children and young people in statutory out-of-home care where the primary allegation was assault, sexual misconduct or sexual offence. Of these, 227 children and young people were placed with DCJ and 356 were placed with non-government designated agencies.

We received notification of 4 deaths of a child or young person in statutory out-of-home care during 2024–25: 2 child deaths related to unintentional injury and will be the subject of coronial inquest, another 2 child deaths are under police investigation.

Table 16: Information reported relating to children in statutory out-of-home care in 2024-25

Information reported	NGOs	Dept Communities and Justice	Total
Allegations of sexual misconduct, sexual offences and assault by staff, carers and volunteers	373	165	538
Death of a child or young person in statutory out-of-home care	2	2	4
Number of children under 12 years old placed in residential care	177	5	182

NSW Carers Register

The Carers Register records information about carer applications, authorised carers and their household members providing out-of-home care. It is a licensing tool to assist designated agencies in the selection and probity assessments of carers.

The Carers Register requires designated agencies to share information about carers, prospective carers and their household members. It is designed so that only individuals who have met minimum mandatory suitability and probity checks are able to provide out-of-home care to children and young people.

At June 30 2025, 15,396 carers were authorised to provide out-of-home care to children and young people in NSW. Of these, 2,533 identified as Aboriginal and/or Torres Strait Islander.

There were 53 designated agencies accredited to provide statutory out-of-home care that are required to use the Carers Register to authorise carers and their household members.

The main activities we undertake to operate the Carers Register are:

- monitoring and compliance to check agencies are meeting Carers Register requirements.
- checking data integrity and undertaking remediation so the information recorded is current and accurate.

Capability building

Capability building activities to support designated agencies to meet the requirements of the Carers Register included training and online, phone and email support. Additionally, we produce business intelligence reports to support designated agencies' data management and quality assurance.

2 training sessions were presented in 2024-25 providing information and skills to 120 new and existing Carers Register users. Sessions are tailored to assist newly accredited agencies and agencies that have had significant staff changes. A refresher session was also presented to Carers Register users looking build on their skills and knowledge. A range of resources to support agency knowledge are available on the OCG website,

including training modules, guidelines and fact sheets.

2 sector workshops were facilitated in 2024-25 with a focus on support provided to foster carers and building agency capability. With overwhelming interest in the project, 14 agencies joined the group to consider how authorised carers can be better supported in their complex role.

The purpose of the working group was to discuss challenges, showcase existing practice and share or develop tools to guide the sector's carer support and supervision practices.

One-to-one advice and guidance were provided to agency staff on a range of individual matters throughout 2024-25.

Monitoring agencies

39 Carers Register reviews have been completed this year. Reviews were conducted onsite at the agency, remote and a hybrid version of onsite and remote and form part of Carers Register compliance activities. Reviews focus on monitoring all aspects of carer assessment and authorisation, including carer and household member probity, ongoing carer support and ensuring the Carers Register is updated accurately. Carers reviews confirm that the requirements of the NSW Child Safe Standards for Permanent Care are met (Standard 19: Assessment and selection of carers, guardians and adoptive parents).

Data integrity

Carers Register data is audited to check its reliability and integrity and to create reports, some of which require action from designated agencies. We monitor the integrity of the data to ensure it is a reliable source of information and it also informs compliance actions. Reports are also generated to assist agencies to inform their own quality assurance processes and confirm data accuracy.

Overview of carer households

In 2024-25 there were 15,396 authorised carers. The total number of authorisations has decreased compared to last year's figure.

In 2024-25 there were 9,922 carer households. The total number of carer households has decreased by 382 households compared to last year's figure. The decrease in carer numbers is associated to carers leaving the sector, however the information recorded in the Carers Register does not provide information on the carers placement history, capacity to care or whether the carer was authorised for a known child or general foster care.

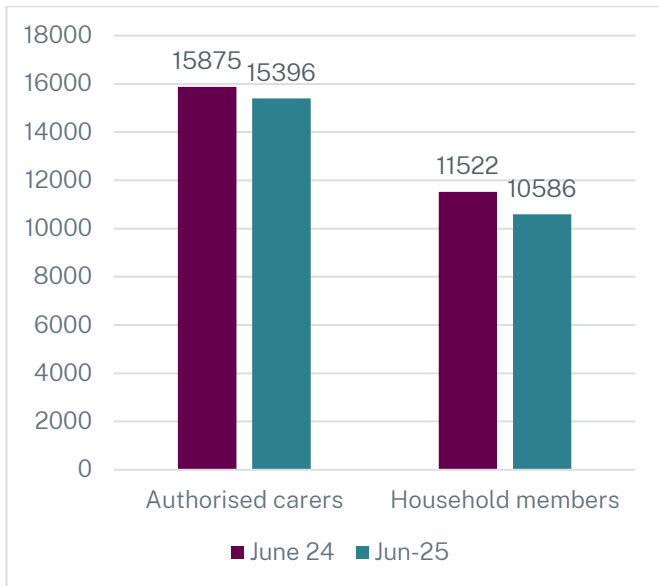
- 16% of authorised carers identify as Aboriginal and/or Torres Strait Islander, this number has increased since last year
- 63% of authorised carers are female, 37% are male and 0.1% identify as gender X
- 48% of household members are female, 51% are male and 0.14% identify as gender X
- 49% of household members are over 18 years and require a WWCC, this number has increased slightly over the past year
- 45% of households are being managed by the Department of Communities and Justice with an increase in non-government organisations, to 55%.

Carers Register key statistics 2024-25

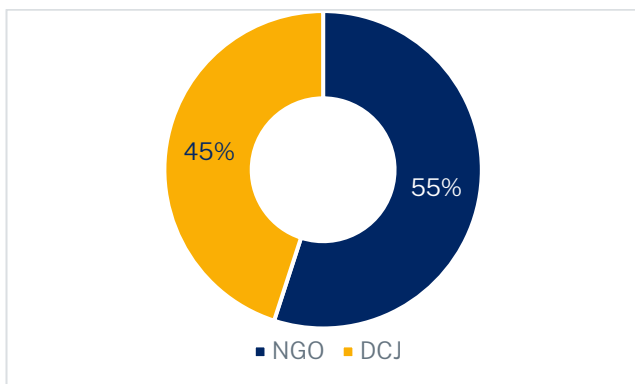
Table 17: Authorised carers

Authorised carers (NB. Some carers may be authorised by multiple agencies)	
DCJ	6,730
Statutory foster care	1,026
Other care (relative/kin/supported care)	5,704
NGO	8,666
Statutory foster care	7,404
Other care (relative/kin/supported care)	1,262

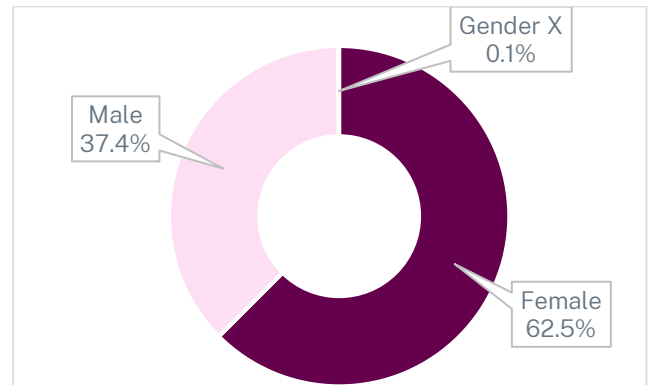
Graph 5: Number of Authorised Carers & Household Members



Graph 6: Household authorisations



Graph 7: Authorised Carers by Gender



16% of carers on the register identify as Aboriginal or Torres Strait Islander.

49.3%

of household members are 18 or over and require a Working with Children Check.

Table 18: Reportable Allegations 2024-25

Reportable allegations lodged 2024-25	
Current	386
Finalised – contact agency	79
Finalised – no record	235

Table 19: Carer applications

Current carer applications at 30 June 2025	
# of household applications	1,094
# of carer applicants	1,694

During 2024-25, 456 carer applications have either been refused or withdrawn due to concerns. This number has decreased 22% compared with last year.

Table 20: Carer refused or withdrawn

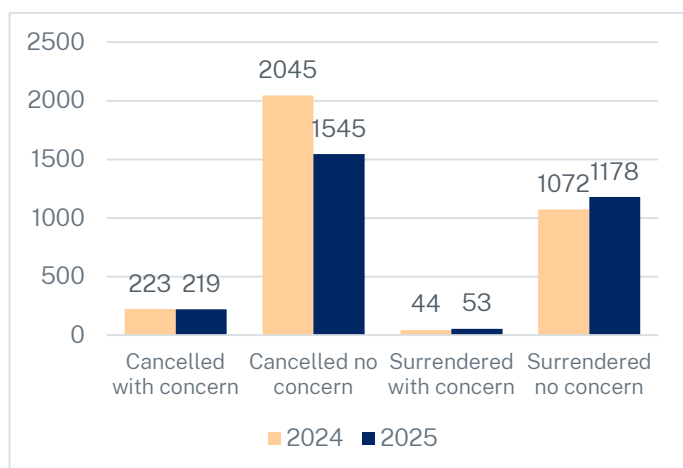
Carer applications refused or withdrawn		
Status	2024	2025
Refused	371	277
Withdrawn no concerns	2,120	1,412
Withdrawn with concerns	215	179

Carer authorisation outcomes

219 carer authorisations were cancelled with concerns this year and 53 were surrendered with concerns. The total number has decreased 2% since last year.

Carers that are cancelled or surrendered with concerns are flagged on the Carers Register. If these individuals were to apply to another agency to become a carer, the concerns would be shared between agencies.

Graph x: Authorised carers cancelled/surrendered



Working with Children Check bars and interim bars of carers and household members

A total of 730 carers or their household members have had their WWCC clearance cancelled since the Carers Register began in 2015 and are no longer legally allowed to care

for children and young people in out-of-home care.

Table 21: Working with Children Check bars (cumulative) relating to carers and household members

	At 30 June 2023	At 30 June 2024	At 30 June 2025
WWCC bars			
Authorised carers	210	243	267
Household members	131	143	149
Interim bars			
Authorised carers	120	167	199
Household members	91	116	145

NOTES:

Individuals may have a carer and a household member role – the total is a distinct individual count

Carer authorisations are automatically cancelled if the person no longer has a WWCC or is subject to a bar or interim bar.

Carer authorisations are automatically suspended if a household member no longer has a WWCC or is subject to a bar or interim bar.

The relevant designated agency must, within 48 hours of becoming aware of a cancellation or suspension, ensure that children or young people in out-of-home care are no longer placed in a household where a person with a WWCC bar or interim bar resides.

CASE STUDY

The NSW Carers Register 10 years on

The NSW Carers Register was developed and rolled out in 2015 in response to the Royal Commission into Institutional Responses to Child Sexual Abuse. NSW was the first jurisdiction to address all recommendations set out in the [Royal Commission recommendations - Carers Register 8.17 – 8.23](#), through the Register and supporting legislation.

The Register is a restricted access, centralised database of persons who are authorised, or who apply for authorisation (and their household members), to provide statutory or supported out-of-home care in NSW. The aim of the Register is to promote the safety, welfare and wellbeing of children in statutory or supported out-of-home care by supporting appropriate authorisation of carers.

With **53** designated agencies using the Register to record information about carer applicants and authorised carers, there continues to be overwhelming support for the Register. It continues to address the Royal Commission recommendations, preventing inappropriate carers, applicants and household members from moving across agencies without the agencies sharing relevant information to help determine a person's suitability. Lessons learned from the development and ongoing use of the Carers Register informed the development and roll out of the Residential Care Workers Register in 2023. This included the need for genuine sector consultation, clear guidelines, register useability, and ongoing monitoring to ensure data integrity.

Carers Register data

Below is a snapshot of the trends in Carers Register data over the last 10 years.

- In 2015, 10,857 back capture authorised households were added to the register.
- Within those households were 15,822 individual authorised carers.
- In 2025, 9,922 households are currently authorised.
- Within those households, there are 15,396 individual authorised carers.
- There are 2,351 back capture households still authorised in 2025, with some carers having been authorised for over 20 years.

The Carers Register key statistics are available on the [OCG website](#).

Interest from the UK

In late 2024, the Department of Education UK contacted the Office of the Children's Guardian to seek information on the NSW Carers Register. The UK Department is considering the introduction of a national foster carer register in England and were looking for international examples. A meeting was held to share background information on the development of the Register, including the purpose, functionalities, data captured, maintenance, strengths, challenges and lessons learned. Following the meeting, the UK representatives from England, Scotland and Wales had specific questions about the Register and its impact on information sharing in NSW. The areas where they were seeking further detail included information about the benefits and consequences of the Register, the other agency check and information that was shared between agencies, uptake and feedback from the sector, planned improvements, security considerations, resourcing requirements to maintain and oversight the Register, administrative burden, impact on recruitment and retention of foster carers, including the movement of unsuitable carers. It was very positive to be able to support the planning and development of a national foster care register in the UK and share our insights from a decade of experience administering the carers register in NSW.

Residential Care Workers Register

The Royal Commission into Institutional Responses to Child Sexual Abuse recommended that each jurisdiction in Australia should establish a register of residential care workers to improve the safety of children and young people in out-of-home care. The *Children's Guardian Act 2019* provided the legislative power to the OCG to establish a register of residential care workers.

The NSW Residential Care Workers Register (Residential Register) and the Children's Guardian Regulation 2022 commenced on 18 July 2022. The provisions within the Regulation support the register's operation.

The Residential Register provides a mechanism for designated agencies to exchange information about an individual, where this is relevant to the safety, welfare or wellbeing of children and young people. This supports agencies to decide if an individual is suitable to provide care to children and young people in residential care and helps prevent unsuitable workers moving from one agency to another.

The Residential Register is a secure, restricted-access database which holds information about those individuals who have reached the final stages of the recruitment process and those who have been engaged as residential care workers. This assists designated agencies in the selection and probity assessments of residential care workers. It is designed so that only applicants who have met minimum mandatory suitability and probity checks are able to provide out-of-home care to children and young people in a residential setting.

The main activities we undertake to operate the Residential Register are:

- monitoring and compliance to check agencies are meeting Residential Register requirements
- checking data integrity and undertaking data remediation, so the information recorded is current and accurate.

CASE STUDY

Improved agency planning to ensure adequate residential care workers are available

Agencies are required to record workers on the Residential Register and engage them prior to their working in residential care. The only exception to this is where, in an emergency, a worker who has not yet been recorded on the Register or not yet had their recruitment finalised, is identified and required to work as a residential care worker. In such a case, a one-off, short-term exemption can be applied by the designated agency, allowing the individual to provide residential care for up to 72 hours. The most common scenarios where this arises are in response to the need for overnight care to a child or young person as a result of a placement breakdown, or where staff in an ITC placement call in sick at late notice and no other existing staff are available.

Prior to the Residential Register's commencement, designated agencies would generally call upon external labour hire agencies to refer a worker in these scenarios. This meant reduced oversight by the accredited agency, and a reliance on the external non-accredited agency to determine a worker's suitability.

The introduction of the Residential Register has called on designated agencies to be more prepared for the need for residential care workers at short notice or in an emergency. This is in part due to the one-off nature of the emergency exemption that can be applied, therefore removing the ability to engage the same worker in this way more than once. It is also due to a better understanding of how the Residential Register provides visibility of worker associations across the sector and the promotion of information sharing between agencies.

During the first 18 months following the Register's commencement, the emergency exemption was applied nearly 300 times across the sector, by 20 different agencies. This has reduced since then, from 118 in the first 6 months, to 35 in the 6 months ending 30 June 2025, by only 8 different agencies.

Discussions with individual agencies has evidenced improved planning in this area, where agencies monitor the need for residential care workers at short notice or in an emergency. Practice has evidenced that designated agencies are now more proactive and generally aim to ensure they have an adequate pool of approved staff who have been recorded on the Residential Register. This has meant a reduction in the application of the emergency exemption and resulted in more workers undergoing full recruitment and probity checking prior to providing care to children and young people in residential care

Capability building

In 2024-25, we have continued to have a strong focus on capacity building with designated agencies, to support them to meet the requirements of the Residential Register. This has included meeting one-on-one with agencies to discuss progress and review practice, providing clarification and updates to guidance materials available, as well as online, phone and email support.

The Residential Register provides agencies with the ability to produce business intelligence reports to support their own

internal data management and quality assurance.

Monitoring agencies

The Residential Register was introduced in 2022-23 as a practice requirement for all designated agencies. We support agencies to understand their obligations and have continued active monitoring of each agency's practice to ensure these obligations are being met, as prescribed by legislation. This includes meeting with agencies to discuss their progress and reviewing data held on the Residential Register to confirm accuracy and

currency. 45 agencies were assessed as part of this process.

Agencies are required to develop policies and procedures to support their practice in meeting the Residential Register requirements. 70 of the 71 agencies registered have finalised documentation, with the remaining agency working with us to complete these in the near future.

Data integrity

Residential Register data is audited periodically to check its reliability and integrity so it can be used to create reports that provide details of the residential care workforce. If a report highlights errors or other practices that do not align with obligations relating to the Register, monitoring is scheduled to ensure the designated agency takes action to remediate the information. There is a continued focus on ensuring only those workers defined by legislation are entered into the system, and that records, including currency of employment and completion of mandatory probity checking is within the scope of legislative requirements.

Overview of residential care workforce

At the time of the commencement of the Register, any individual already working as a residential care worker was required to be recorded on the Residential Register. This is referred to as 'back capture'. Any new applicants since the commencement of the Residential Register are to be recorded and all of the relevant information must be provided and reviewed before they are approved to provide care to children and young people.

As of 30 June 2025, 8,905 individuals were recorded on the register as being engaged as a residential care worker, with 1,221 of these working for more than 1 agency at the same time. There was a total of 10,960 engagements across the sector. Of the total number of individuals, 850 identified as Aboriginal or Torres Strait Islander.

As at 30 June 2025, there were 71 designated agencies registered to use the Residential Register. These agencies are required to

record workers and authorise those providing residential care to children and young people. One agency is government (DCJ) and the remaining 70 are non-government organisations (NGOs).

A focus at the commencement of the register was to add all current engagements into the new system. 18% of current engagements are back capture entries (those engagements which had already commenced prior to the Register starting). This has reduced from 26% at end of the previous year and can be explained by back capture workers exiting the workforce and new workers entering.

Residential Register key statistics 2024-25



The shift to NGOs managing the majority of engagements is a result of a reduction in engagements by DCJ. This coincided with the Ministerial ban on ACAs from 1 April 2025, which resulted in a large number of engagements being ended by DCJ, almost all of whom were labour hire workers, who DCJ relied on to support ACAs.

- 22% of current arrangements are staff sourced from labour hire agencies
- 14% of those are currently engaged in work for more than 1 agency at the same time

- 9.5% of currently engaged individuals identify as Aboriginal and Torres Strait Islander
- 32% of these are engaged with ACCOs.
- 61.1% of currently engaged individuals identify as female, 38.8% identify as male and 0.1% as gender x.

Reportable allegations

During 2024-25, reportable allegation records on the Residential Register indicated that:

- 85 were being investigated
- 145 had been finalised and a decision made that there was no information indicating a risk posed by the individual
- 61 had been finalised and the agency had determined that it had information relevant to the safety, welfare or wellbeing of children which should be shared with others in the future.

Reportable conduct flags

The *Children's Guardian Act 2019* requires that we report the number of people on the Residential Care Workers Register who have a Reportable Conduct flag noted (which means there is a current allegation). As at 30 June 2025, there were 105 people on the Residential Register who have a reportable conduct flag noted under these circumstances. Of these, 85 had an investigation that commenced during the 2024-25 reporting period.

New residential care worker engagements

During 2024-25, there were 5,955 new worker engagements. The majority of these were in the NGO sector. Of these, 5,600 were workers who had been engaged as residential care workers for the first time and 355 were workers who had previously worked as a residential care worker and had been re-engaged by the agency, to commence this work again.

During 2024-25, 6,726 worker engagements ended. The reasons for this include that an individual resigned, moved to a new position

within the agency or had their employment terminated.

Table 22: New worker engagements

	30 Jun 2023	30 Jun 2024	30 Jun 2025
New engagements (total)	6,837	7,105	5,955
Department of Communities and Justice	543	533	189
Non-government organisations	6,294	6,572	5,766

Where an agency has ended a worker's engagement, they are required to make a decision about whether they hold information about the individual that is relevant to the safety, welfare or wellbeing of children. This is added to the Residential Register as either a 'yes' or 'no' outcome. If an agency holds relevant information, the register facilitates information exchange between relevant agencies, including potential future employers.

The exchange of relevant information does not preclude an individual from obtaining future employment. Instead, it assists agencies in identifying and managing any risk to children and young people by supporting the recruitment of suitable workers. This process maintains the safety of children as the paramount consideration in the delivery of out-of-home care services.

Table 23: Ended residential care worker engagements

	30 Jun 2023	30 Jun 2024	30 Jun 2025
Ended engagements (total)	2,352	4,407	6,726
Contact Agency - Yes	85	93	201
Contact Agency - No	2,267	4,314	6,525

Specialised substitute residential care

Specialised substitute residential care (SSRC) is an arrangement between a parent and an organisation for a child to receive care away from their usual home for 3 or more nights in any 7-day period. The care must be for respite or behaviour support or funded by the National Disability Insurance Scheme.

Some children in SSRC are funded by the National Disability Insurance Scheme under the *National Disability Insurance Scheme Act 2013*, as they have complex needs. The majority of placements are arranged for children and young people with disability. SSRC arrangements for children with disability are a particularly high-risk area of our work due to the vulnerability of clients receiving these services.

Strengthening Oversight of Specialised Substitute Residential Care

The SSRC scheme, which replaced Voluntary Out-of-Home Care on 1 September 2022, continues to grow. All entities providing SSRC must comply with the SSRC Code of Practice, and new providers are required to complete the online Child Safe Self-Assessment. SSRC providers must also record all overnight care arrangements for children and young people in their care.

As at 30 June 2025, there were 463 providers actively registered under the SSRC scheme. This is an increase from 383 in 2023-24, and 272 in 2022-23. The continued growth in provider participation is due to greater publicity for the scheme and streamlined entry pathways, including changes that allow registration through self-assessment. The increase in provider registrations has improved the regulatory reach of the scheme and allows the OCG to better target capability building activities. Through active monitoring, the OCG can respond when concerns arise, as demonstrated in the case study *'Improving Risk Management and Compliance in Centre-Based Care'*.

Table 24: Number of SSRC providers registered

	2022-23	2023-24	2024-25
SSRC providers registered	272	383	463

Compliance and Monitoring Activity

Through 2024-25 the OCG conducted 12 monitoring assessments of organisations where significant risks were identified. These assessments involved a review of documentation and interviews with the service provider to assess compliance with the SSRC Code of Practice and 10 Child Safe Standards and ensure the safety and wellbeing of children. Assessment reports provide enforceable and monitored recommendations and feedback to assist with improvement. The OCG also issued 38 warning letters to address identified non-compliance or breaches of the SSRC Code of Practice and Child Safe Scheme by providers.

The SSRC team continued to work closely with SSRC providers and the supervising agency to ensure that children in longer-term arrangements had the appropriate levels of support and case planning in place. In addition, where children remained in residential placements for over 3 months, these placements were flagged with the Official Community Visitors Scheme to ensure face-to-face visits were completed.

Engagement and Capability Building

In 2024-25, we continued our focus on onboarding new providers and building their capability. As part of the onboarding process, we offered meetings with newly registered providers to introduce SSRC obligations, share training resources, identify early risks and support compliance with SSRC Code of Practice and other relevant legislation.

Quarterly newsletters were sent to registered providers with updates on compliance requirements, changes to the SSRC Register Portal and practical tips to support implementation of the Child Safe Standards and the SSRC Code of Practice. They also included reminders about reporting

obligations, and links to new resources we developed

A tailored risk management webinar was delivered for the sector in December 2024. The webinar focused on embedding a risk aware culture within day-to-day operations as well as identifying and managing risks during placement matching, recognising early warning signs of child safety concerns and implementing appropriate supervision practice, ensuring worker screening checks, including WWCC, are completed and verified.

Improve the SSRC Register Portal

Throughout 2024–25, the SSRC Team worked with Service NSW to improve the user experience of the SSRC Register Portal. In April 2025, the updated SSRC Register Portal was officially launched.

Following a successful pilot, the enhanced portal now includes enhanced data security features, mobile device capability and an improved user experience allowing SSRC principal officers to self-manage their organisation accounts. These improvements have been positively received by providers and have supported more efficient, secure, and user-friendly interactions with the SSRC Register.

Children using specialised substitute residential care

In 2024–25, 1,042 children and young people accessed SSRC. This is an increase from 898 children and young people in 2023–24 and 803 children and young people in 2022–23. 809 (77%) were children with disability.

Table 25: Number of children accessing SSRC

	2022–23	2023–24	2024–25
Children accessing SSRC	803	898	1042

Care episodes

The OCG monitors care placements and identifies high risk placements. One care

placement relates to each time a child receives SSRC, which could involve a short placement of only a few nights, or a longer-term respite stay. 4,329 placements were recorded during 2024–25 by SSRC providers, compared to 4,452 placements during 2023–24.

Supervision by a designated agency is required when a child or young person’s overnight care runs for a cumulative period of 90 days in a year (even when more than 1 registered agency has provided that care), to ensure correct supports and planning are in place for the child. At the end of 2024–25, there were 33 active supervision arrangements, with an additional 16 that ceased over the course of the year. This represents a significant decrease from the 88 supervision arrangements recorded in 2023–24. The reduction may reflect fewer children and young people residing in longer-term care arrangements. In 2025–26 we will be investigating this trend to understand it better.

The OCG also monitors children and young people who are approaching 180 days in care within a 12-month period. Under SSRC, children must have a case plan in place that is supervised by a designated agency by the time they reach 180 days in care. As at 30 June 2025 there were 25 active case plans, with an additional 21 case plans ceased during the period. In total, 46 case plans were active during in 2024–25, which represents a 45% decrease in the number of children who required a case plan (from 84 in 2023–24 to 46 in 2024–25). In most cases, case plans are ceased when the children either returned home, turned 18 years of age, or entered statutory care.

CASE STUDY

Improving risk management and compliance in centre-based care

The SSRC team assessed a provider offering centre-based care for children and young people with complex needs. The assessment focused on reviewing risk assessments and placement arrangements for 4 children who were living together in the same setting.

The review was initiated following a report of concern regarding the complex needs of the children and the suitability of a mixed-age group placement, in addition to some incidents of concern around children accessing social media while unsupervised.

The review focused on how the provider was implementing requirements of the SSRC Code of Practice, particularly in relation to placement matching and physical and online risk management. Specific attention was given to the age-appropriate placement requirements, which state that placement must be suitable for the ages of the children and young people involved and requires consent from parents. The SSRC team found that the provider was demonstrating good practice in relation to:

- having detailed plans to manage individual risks for each child
- considering children's sensory and communication needs
- having clear staff roles and good staff supervision processes
- responding to feedback from the Office of the Children's Guardian and carefully reviewing placement decisions to reduce risks related to age and developmental differences, and
- demonstrating understanding of children's medical and behavioural support needs.

The SSRC team identified the following areas of improvement for the provider:

- risk assessments not being reviewed promptly after any changes in a child's situation or placement, or reviewed by senior management
- staff not being provided with ongoing training on behaviour support plans, restrictive practices, and trauma care
- restrictive practices not being adequately checked and monitored, and
- poor policies around risks in online environments.

Following the assessment, the provider relocated 2 children to a different property that was more appropriate for their age and developmental needs. This meant the provider could deliver tailored services for the children involved, particularly those with complex needs and individual support requirements. They put a plan in place to improve in the areas of risk management, staff training, reviewing and managing restrictive practices, placement reviews and involving key stakeholders. The provider also developed an online risk management strategy and issued new procedures and training for staff to address online safety for children and young people in their care. These actions, supported by the SSRC team, improved child safety across the service, and staff confidence in managing risks.

Employing Children

The OCG monitors organisations that employ children who are under 15 and who work in the entertainment industry, as well as those children under 16 working in the modelling industry. There is a Code of Practice that sets out the minimum required standards when employing children in these industries.

We issue employers with an authority to employ children in the categories of entertainment and exhibition, still photography and student productions. Through this process, employers register their intention to employ children in NSW with our office. This regulatory requirement allows us to monitor the conditions for young employees working in these industries and educate employers regarding their legal obligations in keeping children safe.

In 2024–25, we received 577 applications for an authority to employ children within NSW, a slight decrease of 5% compared to the previous year. 6-month authority applications a notable decrease of 60% (from 25 in 2023–24 to 10 in 2024–25).

Table 26: Authority to employ children

Authority length	Number of applications
1 week	391
3 months	27
6 months	10
12 months	149
Total	577

Productions

Employers holding an authority must notify the OCG of the details of children’s work in each production, the risks associated with the work and their risk management strategies.

In 2024-25, we received 1,207 notifications across a range of productions employing children, an increase of 10% from the previous year. While the categories have changed from previous years, the data provides insight into key areas of industry activity and reflect strong industry engagement:

- film production – 457 notifications

- fashion - 327 notifications
- advertising - 212 notifications
- products and services – 105 notifications
- drama – 95 notifications.

The sharp increase in film and television notifications (a 290% increase from 117 in 2023-24) suggests a significant rise in screen-based productions involving children.

Compliance

We undertake a range of compliance activities to ensure that employers adhere to the requirements for employing children and young people. Compliance checks are targeted at high-risk organisations or productions, based on intelligence received during our monitoring and historical compliance activities.

During 2024–25, we completed 40 desk-based compliance checks. This is a decrease of 61% from 102 in 2023–24. This reduction reflects a reduction in staffing and a change in strategic direction, including some staff being reallocated to other priority areas across the Directorate.

Of the employers checked, 21 were compliant and 19 were in breach of the legislation.

Breaches included not providing the OCG with the required 7-day notification, or appropriate notice of risks, insufficient supervision, not maintaining proper records and not providing parents with the code of practice. Depending on the seriousness of the offence, employers may receive an informal caution, formal warning letter with an invitation to participate in an education session, or fines.

As a result of the compliance checks:

- 11 formal warnings were issued to employers
- 7 reminders were issued to employers for breaches to the *Children’s Guardian Act 2019*
- 1 employer issued 2 fines, totalling \$2,000, for breaches of the *Child Protection (Working with Children) Act 2012*.

Identifying and addressing non-compliance will be a focus for the OCG in 2025-26.

NDIS Worker Check

The National Disability Insurance Scheme (NDIS) Worker Check commenced in NSW on 1 February 2021. It is part of the national quality and safeguarding arrangements for NDIS participants and includes a nationally consistent approach to worker screening for NDIS workers. In this regard, all states and territories are operating an equivalent worker screening check that is recognised by the Commonwealth Government.

In NSW, the scheme operates under the *National Disability Insurance Scheme (Worker Checks) Act 2018* and the *National Disability Insurance Scheme (Worker Checks) Regulation 2020*. The Regulation prescribes

the disqualifying and presumptively disqualifying offences, and the corresponding laws to support national information sharing.

The Commonwealth Government sets the requirements for NDIS worker screening. It is a requirement placed upon providers regarding which workers need a clearance to work.

The Commonwealth Government also administers the NDIS Worker Screening Database which allows employers to verify an application and keeps a national list of clearances and exclusions.

CASE STUDY

NDIS Worker Check exclusion

A person with a schizophrenia diagnosis sought a clearance for an NDIS Worker Check following a psychotic episode in 2022. During this episode, the applicant made hoax bomb threats.

The person was initially convicted for the bomb threat. However, their recorded conviction was later overturned on appeal, leading to a good behaviour order. This order imposed strict conditions for the person's mental health treatment. Since the order was made, the person had complied with their medication and therapy, along with other conditions, which included supervision and restricted work hours.

The NDIS Worker Check conducted a risk assessment of the person. The assessment acknowledged the person's current stability. However, the assessment also attributed weight to their history of psychotic episodes and distinct lack of insight and proactive self-management. The NDIS Worker Check concluded that the person posed a real and appreciable risk of harm to the health, safety, and well-being of people with disability. This determination was based on the potential for NDIS participants to be vulnerable, the potential for unsupervised in-home NDIS work, and concerns the person's past conduct indicated a potential for relapse if unsupported.

The person was issued an NDIS Worker Check exclusion, prohibiting them for 5 years from engaging in NDIS work requiring a clearance.

The person appealed this decision to the NSW Civil and Administrative Tribunal (NCAT). NCAT largely concurred with the NDIS Worker Check's assessment. NCAT acknowledged the person's current stability but found it was primarily maintained under compulsory orders. They concluded the person remained "untested" in their ability to sustain compliance voluntarily and still exhibited an "overly confident" view of their own well-being, coupled with insufficient acknowledgment of the seriousness of their past actions. As a result, NCAT upheld the NDIS Worker Check's decision, noting that while the person could reapply in the future, it would likely require demonstrating continued stability after their mandated conditions expire.

Table 27. Key statistics NDIS Worker Check, 2020-21 to 2024-25

	2020-21	2021-22	2022-23	2023-24	2024-25
Applications received	37,567	93,267	93,752	84,173	71,930
Decisions made:					
Clearances	32,984	91,219	89,339	79,037	66,658
Exclusions	2	70	211	343	492

Table 28. Cumulative NDIS Worker Check clearances and exclusions 2020-21 to 2024-25

	2020-21	2021-22	2022-23	2023-24	2024-25
Clearance holders	32,984	124,157	213,381	292,151	358,463
Exclusion holders	1	69	271	601	1,078

CASE STUDY

NDIS Worker Check appeal dismissed

A person was issued an NDIS Worker Check exclusion due to a fraud conviction from 2012 involving a vulnerable victim. This made the person a presumptively disqualified person. That is, they are presumed to pose a risk of harm to people with disability.

The NDIS Worker Check decision outlined the applicant's rights to internal review within 28 days and subsequent appeal to the NSW Civil and Administrative Tribunal (NCAT) if they were unsatisfied with the outcome of the internal review.

The person failed to apply for an internal review but lodged an application to NCAT 230 days outside the prescribed time limit. They claimed their employer initially advised the check was not needed for their role. Later, the person discovered the clearance was necessary for their employment and subsequently lost their job. However, they still delayed several months before lodging their NCAT application.

NCAT heard the person's request for a time extension. To proceed, NCAT needed to be satisfied that an extension was warranted, that dealing with the application was necessary to protect the person's interests, and that it was filed within a reasonable timeframe.

NCAT found that the 230-day delay was substantial and that the applicant's reasons for the delay were unsatisfactory. Their claim of ignorance about review rights was dismissed, as the NDIS Worker Check decision was clear. NCAT also found their apparent reliance on their employer's advice was insufficient, given the obvious potential for future job changes. NCAT also noted the person's significant delay even after realising the check was needed.

NCAT found that while the applicant had an arguable case on the merits, this was outweighed by other factors. NCAT found no public interest in extending time, particularly as the person could make a new NDIS Worker Check application in 2028 (5 years after the original decision). NCAT concluded that strictly following the rules would not cause injustice, given this future option.

NCAT refused the time extension and, consequently, dismissed the review application for lack of jurisdiction.

Child Sex Offender Counsellor Accreditation Scheme

The Child Sex Offender Counsellor Accreditation Scheme was originally established to improve the service quality of practitioners providing expert opinion to the courts.

The scheme previously accredited counsellors working with adults who sexually offend against children, and children and young people with harmful sexual behaviours.

A review in 2019 identified that the majority of accredited counsellors worked with the latter cohort and made a number of recommendations to improve and refine the scheme. The scheme was suspended in March 2020 to allow for the development of a new approach with more robust assessment of the clinical competency of counsellors accredited under the scheme.

We are working closely with NSW Health and DCJ to respond to the recommended improvements, with a view to developing a new sustainable model.

Official Community Visitors Scheme

Official Community Visitors are independent statutory appointees of the Minister for Families and Communities and Minister for Disability Services.

The child-related function of the Official Community Visitors Scheme transferred to the OCG with the implementation of the *Children's Guardian Act 2019*. However, as the Official Visitors Scheme covers both child and non-child related functions, the Scheme has been operated by the Ageing and Disability Commission.

In particular, the OCG and the Ageing and Disability Commission developed an agreement under section 146 of the *Children's Guardian Act 2019*, that enables the Ageing and Disability Commission to oversee and support the Official Community Visitors

Scheme on a day-to-day basis. It also enables information to be exchanged between both agencies.

The Official Community Visitors Scheme provides our OOHRC Regulation Directorate with quarterly data which identifies issues raised during visits to designated residential care providers by Official Community Visitors. This information is used to plan our monitoring visits and accreditation renewal assessments.

Any serious concerns raised following a visit to a designated agency by an Official Community Visitor are referred directly to our Director, OOHRC Regulation, who writes to the agency's Principal Officer, requesting information about how the matter will be dealt with.

Designated residential agencies are required to respond to Official Community Visitor reports which outline issues identified during their visit. During our monitoring and accreditation assessments, we review these reports and the agency's response. This information forms part of the overall evidence gathered during our assessments of whether the agency is meeting the NSW Child Safe Standards for Permanent Care.

The Official Community Visitors Scheme produces a stand-alone Annual Report which includes information on the child-related functions, as allowed under the *Children's Guardian Act 2019*. It is available on the Ageing and Disability Commission website and our website.

Additional matters

Australian and New Zealand Children's Commissioners and Guardians and Advocates

The Children's Guardian continues as a member of the Australian and New Zealand Children's Commissioners, Guardians and Advocates group (ANZCCGA).

The ANZCCGA identifies common issues and works to promote and protect the safety,

wellbeing and rights of children and young people across Australia and New Zealand.

Key priorities for the ANZCCGA during 2024-25 were:

- promoting the rights of children and young people
- advocating for the right of children and young people to participate in decisions that impact them
- giving voice to the views of, and encouraging direct consultation with, children and young people on matters that affect them
- sharing the observations and perspectives obtained through members' varied functions and roles to make sure these drive improvements for children and young people across Australia and New Zealand
- making sure the best interests of children and young people are considered in the development of policies and programs
- encouraging systemic improvement informed by evidence-based research in areas that impact on the rights, interests and wellbeing of children and young people, including issues such as child poverty, child protection, education and employment, housing and homelessness, health and mental health, poverty and inequality, safety and cultural identity and youth justice.

4

Management and accountability

Summary of our management
and accountability structures.
Information about our human
resources and legislation.

Human Resources

At 30 June 2025, the OCG employed 270 people (executives, award employees and seconded) on either a full-time or part-time basis.

Table 29: Number of employees by employment category by financial year

	30 June 2021	30 June 2022	30 June 2023	30 June 2024	30 June 2025
Ongoing	181	205	238	236	239
Temporary	26	11	15	21	15
Casual	3	3	3	3	0
Seconded In			2	4	4
Senior Executive	9	10	8	13	12*
TOTAL	219	229	266	277	270

NOTES:

Table does not include contractors and employees seconded out of the OCG but does include employees on unpaid leave and seconded into the OCG.

*12 refers to 10 directors, 1 Children's Guardian and 1 Acting Children's Guardian as at 30 June 2025.

Policies and practices

The OCG has comprehensive policies, procedures and other guidance materials which provide a framework for the appropriate management of employees and business risks. Policy changes incorporate any new legislative changes and Public Service Commission requirements.

In 2024–25, we released a new Code of Ethics and Conduct aligned to the Public Sector Commissioner's new Code of Ethics and Conduct for NSW government sector employees (the new Code). The updated Code of Ethics and Conduct is based on the Public Sector and OCG values and sets out the minimum expected standards of behaviour we must meet.

We continue to review and update all internal policies and procedures against best practice and to incorporate current legislative requirements.

Industrial relations

The OCG conducts quarterly state-wide Joint Consultative Committee meetings with the Public Service Association.

Exceptional movement in wages, salaries and allowances

There were no exceptional movements in wages, salaries or allowances during 2024–25.

Overseas visits

There were no overseas visits during 2024–25.

Number and remuneration of senior executives

The tables below include all executives who were employed at any time during 2024–25 and includes the Children’s Guardian, although this is a statutory position.

Numbers and remuneration of senior executives

Table 30: Number of Public Service Senior Executives employed in each band from 2021–22 to 2023–24

PSSE Band	2022-23	2023-24	2024-25
Band 3	1 male	1 male	1 male 1 female (acting)
Band 2			
Band 1	4 female 5 male	8 female 4 male	7 female 3 male

Table 31: Average remuneration of senior executives in each band

Remuneration level	Average remuneration 2023-24	Range 2024-25	Average remuneration 2024-25
Band 3*	\$415,171	\$361,301 – \$509,250	\$415,171
Band 2**	N/A	\$287,201 – \$361,300	0
Band 1	\$242,062	\$201,350 – \$287,200	\$241,724

NOTES:

*There are no PSSEs employed in the Band 3 level. The Children’s Guardian is a statutory appointment and the remuneration disclosed is as per the current incumbent’s employment contract. The remuneration for the A/Children’s Guardian position is not managed by the OCG.

**There are no PSSEs employed in the Band 2 level. The Aboriginal Assistant Guardian is a statutory appointment, and the role has been vacant from February 2023.

Table 32: Percentage of total employee-related expenditure relating to senior executives

Year	Percentage
2022-23	6.35
2023-24	6.53
2024-25	8.26

Consultants

OCG engages consultants with specialist expertise as required to provide recommendations or professional advice to assist OCG achieve our objectives.

During 2024-25, OCG engaged the following consultancies.

Consultancies to or over \$50,000

There were no consultants engaged in this category.

Consultancies under \$50,000

Table 33: Consultancies under \$50,000

Category	Number of engagements	Amount
Elizabeth Bennett Phillippa Kelly William Phillips	Combined engagement of 3 barristers to review the adequacy and effectiveness of how we apply legal principles in the exercise of our key functions	\$44,690
Curjio Pty Ltd	Cultural review and adaptation of Child Safe Standards LMS resources	\$37,300
Noble Shore Pty Ltd	Performance and management services	\$12,670
Weir Consulting	Performance and management services	\$9,684

Research and development

In 2024-25 there were no research and development projects.

Law reform

Children's Guardian Amendment Bill 2025

As required by section 183(2) of the *Children's*

Guardian Act 2019, a statutory review of the *Children's Guardian Act 2019* commenced on 1 March 2022.

Following a period of public and targeted consultation from July to October 2022, a report of the statutory review was tabled in Parliament in December 2024.

The report found that the policy objectives of the Act remain valid and made 23 recommendations to improve the Act's operation and facilitate the functions of the OCG.

The *Children's Guardian Amendment Bill 2025* was introduced in the Legislative Council on 27 May 2025 to implement the recommendations from the Statutory Review as well as the supported recommendations of the parliamentary joint Committee on Children and Young People 2024 review of the annual reports and other matters of the OCG.

Among other things, the *Children's Guardian Amendment Bill 2025* amends the Act by:

- providing that a guiding principle of the Act is the need to consult with the Aboriginal and Torres Strait Islander community on policies and practices that impact Aboriginal and Torres Strait Islander children
- bringing private health facilities that provide health services to children within the Reportable Conduct scheme from 1 October 2026
- bringing into the Reportable Conduct Scheme agencies that provide substitute residential care or specialised substitute residential care where any overnight care is provided, rather than only if they provide overnight care for more than 2 nights in any period of 7 days as is currently the case
- ensuring employees who are the subject of a reportable allegation or reportable conviction against a child are treated consistently with the principle of procedural fairness
- ensuring children employed in the entertainment and exhibition industries fall

within the scope of the child employment provisions of the Act, and

- extending the oversight jurisdiction by the Committee for Children and Young People over all the functions of the Children's Guardian.

The *Children's Guardian Amendment Bill 2025* passed through both houses of parliament on 6 August 2025.

Amendments to the Children's Guardian Regulation 2022 and the Child Protection (Working with Children) Regulation 2013

New code of practice for designated agencies and adoption service providers

In September 2024, the Children's Guardian Regulation 2022 was amended to introduce a new code of practice for designated agencies and adoption service providers.

The code of practice, like the Child Safe Standards for Permanent Care, sets the criteria to be met by designated agencies and adoption service providers to obtain and maintain accreditation under the *Children's Guardian Act 2019*.

The Code of Practice was developed from the OCG's review of the Child Safe Standards for Permanent Care and informed by public consultation in October to November 2022, and feedback received from a Consultation Draft of the Regulation released between February and April 2024.

The new Code of Practice will commence on 1 October 2025. A Code of Practice Implementation Handbook was published in March 2025 to assist designated agencies and adoption service providers to prepare for and implement the Code of Practice.

Changes to probity check requirements for residential care workers

The Children's Guardian Regulation 2022 was also amended in September 2024 to ensure consistent checking of the register and improve the exchange of safety related information concerning certain residential care workers.

These changes commenced on 1 July 2025 and:

- align probity checking requirements for workers currently engaged by another provider, with the requirement for workers previously engaged by another provider
- mandate checks with another residential care provider for a worker seeking to be re-engaged within 12 months of ceasing work, in circumstances where if the other provider has indicated on the Residential Register that they hold relevant information; and
- require providers to ensure that the Residential Register is up to date regarding whether they have relevant information to disclose about a worker.

New penalty notice offences

On 20 September 2024, additional offences in the *Children's Guardian Act 2019*, the Children's Guardian Regulation 2022 and the *Child Protection (Working with Children) Act 2012* were prescribed as penalty notice offences, including for the offence of engaging in child-related work without a WWCC clearance or a current application for one, and the offence of employing a person in child-related work without a WWCC clearance or a current application for one. This means that fines can be issued for breaches of those offences, and a person may pay the fine if they do not wish to have the matter determined by a court.

Review of the Child Protection (Working with Children) Act 2012

Work is underway on a review of the *Child Protection (Working with Children) Act 2012*, with the proposed release of discussion paper later in 2025. The discussion paper will consider matters of broad public interest relating to the WWCC scheme.

The repeal of the Child Protection (Working with Children) Regulation 2013 has been postponed to 1 September 2026. The postponement enables the OCG to first thoroughly review the *Child Protection (Working with Children) Act 2012*. Work on the new regulation will commence following public consultation on the review of the *Child*

Protection (Working with Children) Act 2012.

Government Information (Public Access) Act 2009

Public access to NSW government information

The OCG holds a range of documents and information. The production of some of these documents may require an application under the *Government Information (Public Access) Act 2009*, the *Privacy and Personal Information Protection Act 1998* or the *Health Records and Information Privacy Act 2002*.

Right to information requests

To promote open, accountable, fair and effective government in NSW, members of the public have the right to access government information. This right is restricted only when there is an overriding public interest against disclosing that information.

Formal requests made under the *Government Information (Public Access) Act 2009* for access to documents held by the Office of the Children's Guardian should be directed to:

Right to Information Officer
Office of the Children's Guardian
Locked Bag 5100
Strawberry Hills NSW 2012
Telephone enquiries: (02) 8219 3600
Email: legal@ocg.nsw.gov.au

Further information can be found on our website: www.ocg.nsw.gov.au

Statistics about Government Information (Public Access) Act 2009 applications

Under section 7 of the *Government Information*

(Public Access) Act 2009, agencies must review their programs for the release of government information to identify the kinds of information that can be made publicly available. This review must be undertaken at least once every 12 months.

The OCG's Agency Information Guide, which is available on our website, provides a list of information that we proactively release.

We proactively release information on our website regarding key statistics on the Carers Register and Residential Care Workers register.

In August 2024, we also released a report 'Strengthening out-of-home care and the broader child protection system', which is available on our website.

During the 2024-25 reporting year, the OCG updated several corporate policies which are available on our website including:

- Agency Information Guide – November 2024
- Business Ethics Statement – November 2024
- Code of Ethics and Conduct - November 2024
- Data Breach Policy – May 2025
- Fraud and Corruption Control Policy – March 2025
- Gifts and Benefits Policy – December 2024
- Public Interest Disclosures Policy – November 2024.

The following series of tables provides data on GIPA applications for the 2024-25 reporting period.

Table 34: Data for clauses 8(b) and 8(c) of the GIPA Regulation 2018

Data type	Number of applications
Total number of access applications received by the OCG (including withdrawn applications but not including invalid applications)	10
Total number of access applications that the OCG refused, either wholly or partly, because the application was for the disclosure of information referred to in Schedule 1 of the <i>GIPA Act</i> (info for which there is a conclusive presumption of overriding public interest against disclosure)	Refused wholly: 0 Refused partly: 2**

NOTES:

GIPA access applications relating to reportable conduct matters under Part 4 of the *Children's Guardian Act 2019* are "excluded information", pursuant to Schedule 2, clause 2 of the *GIPA Act*. According to section 43(2) of the *GIPA Act*, an application is not a valid access application to the extent that it seeks access to excluded information.

* The total number of applications includes:

- one application that was "partially invalid", that is, the application was invalid under s.43 of the *GIPA Act* to the extent that it sought access to the excluded information of the OCG.
- one application that was invalid under s.43 of the *GIPA Act*, but was valid by virtue of the operation of s.46 of the *Child Protection (Working with Children) Act 2012* ("WWC Act") which meant that the applicant was entitled to apply for access under the *GIPA Act* to any information about a finding referred to in Schedule 1, clause 2 of the *WWC Act*.

The total number of applications does NOT include four access applications that were wholly invalid and did not subsequently become valid – 2 were invalid under s.41 of the *GIPA Act*, and 2 were wholly invalid under s.43 of the *GIPA Act*.

**The number recorded comprises of 2 access applications that were received prior to 1 July 2024 and were finalised within the reporting period.

Table 35: GIPA applications by type of applicant and outcome

Type	Access granted in full	Access granted in part	Access refused in full	Information not held	Information already available	Refuse to deal with application	Refuse to confirm/deny whether information is held	Application withdrawn
Media	1	1	-	1	-	-	-	-
Members of Parliament	-	-	-	-	-	-	-	-
Private sector business	-	-	-	-	-	-	-	-
Not-for-profit organisations or community groups	-	-	-	-	-	-	-	-
Members of the public (application by legal representative)	2	-	2	3	-	-	-	-
Members of the public (other)	3	4	2	1	-	-	-	-

NOTES:

This table refers to decisions made between 1 July 2024 and 30 June 2025 about finalised formal access applications. Therefore, this table includes the outcomes of four access applications that were received prior to 1 July 2024 and were finalised within the reporting period.

The number of decisions recorded in this table may be different from the total number of applications received, as more than 1 decision can be recorded in relation to a single access application. Where the same decision has been made multiple times in relation to a single access application, that decision is counted once in the table.

Table 36: GIPA applications by type of application and outcome

Application type	Access granted in full	Access granted in part	Access refused in full	Information not held	Information already available	Refusal to deal with application	Refusal to confirm / deny whether information is held	Application withdrawn
Personal information applications*	5	4	4	4	-	-	-	-
Access applications (other than personal information applications)	1	1	-	2	-	-	-	-
Access applications that are partly personal information applications and partly other	-	-	-	-	-	-	-	-

*A personal information application is an access application for personal information (as defined in clause 4 of Schedule 4 to the Act) about the applicant (the applicant being an individual).

NOTES:

This table refers to decisions made between 1 July 2024 and 30 June 2025 about finalised formal access applications. Therefore, this table includes the outcomes of four access applications that were received prior to 1 July 2024 and were finalised within the reporting period.

The number of decisions recorded in this table may be different from the total number of applications received, as more than 1 decision can be recorded in relation to a single access application. Where the same decision has been made multiple times in relation to a single access application, that decision is counted once in the table.

Table 37: Invalid applications

Reason for invalidity	Number of applications
Application does not comply with formal requirements (section 41 of the Act)	4
Application is for excluded information of the agency (section 43 of the Act)	4
Application contravenes restraint order (section 110 of the Act)	0
Total number of invalid applications received	8
Invalid applications that subsequently became valid applications	4

NOTES:

GIPA access applications relating to reportable conduct matters under Part 4 of the *Children's Guardian Act 2019* are excluded information, pursuant to Schedule 2, clause 2 of the *GIPA Act*. According to section 43(2) of the *GIPA Act*, an application is not a valid access application to the extent that it seeks access to excluded information. The total number of invalid applications includes:

- three applications that were wholly invalid under s.43 of the *GIPA Act*
- one application that was “partially invalid”, that is, the application was invalid under s.43 of the *GIPA Act* to the extent that it sought the “excluded information” of the OCG
- four access applications that were invalid under s.41 of the *GIPA Act*.

The number of invalid applications that subsequently became valid applications comprises of:

- one “partially invalid” application that subsequently became a valid application because part of the application sought information that was not excluded information
- two applications that was initially invalid under s.41 of the *GIPA Act* but became valid when the formal requirement was satisfied
- one application that was wholly invalid under s.43 of the *GIPA Act* but was a valid application by virtue of the operation of s.46 of the *WWC Act* which meant that the applicant was entitled to apply for access under the *GIPA Act* to any information about a finding referred to in Schedule 1, clause 2 of the *WWC Act*.

Table 38: Conclusive presumption of overriding public interest against disclosure: matters listed in Schedule 1 to the *GIPA Act*

Interest consideration	Number of times consideration used*
Overriding secrecy laws	-
Cabinet information	-
Executive Council information	-
Contempt	-
Legal professional privilege	-
Excluded information	2*
Documents affecting law enforcement and public safety	-
Transport safety	-
Adoption	-
Care and protection of children	-
Ministerial code of conduct	-
Aboriginal and environment heritage	-
Information about complaints to Judicial Commission	-
Information about authorised transactions under <i>Electricity Network Assets (Authorised Transactions) Act 2013</i>	-
Information about authorised transactions under <i>Land and Property Information NSW (Authorised Transaction) Act 2016</i>	-

NOTES:

*The number recorded comprises of three access applications that were received prior to 1 July 2024 and were finalised within the reporting period.

Table 39: Other public interest considerations against disclosure: matters listed in table to section 14 of the *GIPA Act*

Public interest consideration	Number of occasions when application not successful
Responsible and effective government	6*
Law enforcement and security	1
Individual rights, judicial processes and natural justice	5**
Business interests of agencies and other persons	-
Environment, culture, economy and general matters	-
Security provisions	1
Exempt documents under interstate Freedom of Information legislation	1

NOTES:

* There were three access applications where information was withheld in full, but other requested information was released.

** There were three access application where information was withheld in full, but other requested information was released.

The other access applications recorded in this table are matters where the applicant was provided access to a copy of documents with redactions applied to the information that was subject to an overriding public interest against disclosure (OPIAD).

Table 40: Timeliness of GIPA decisions

Time period	Number of applications
Decided within the statutory timeframe (20 days plus any extensions)	13*
Decided after 35 days (by agreements with applicant)	3**
Not decided within time (deemed refusal)	-
Total	16

NOTES:

*The number of applications includes:

- three wholly invalid applications received during the reporting period
- four access applications that were received prior to 1 July 2024 and were finalised within the reporting period (including one wholly invalid application)

** One access application was received prior to 1 July 2024 and finalised within the reporting period.

Table 41: GIPA applications reviewed under Part 5 of the Act

Type of review	Decision varied	Decision upheld	Total
Internal review	0	0	0
Review by Information Commissioner	0	0	0
Internal review following recommendation under section 93 of Act	0	0	0
Review by the NSW Civil and Administrative Tribunal	0	0	0
Total	0	0	0

Table 42: GIPA applications for review under Part 5 of the Act

Type of application	Number of applications for review
Applications by access applicants	0
Applications by person to whom information the subject of access application relates (s. 54 of the Act)	0

Table 43: Applications transferred to other agencies under Division 2 of Part 4 of the Act

Type of transfer	Number of applications transferred
Agency-initiated transfer	0
Applicant-initiated transfer	0

Public interest disclosure

There were 3 public interest disclosures during the 2024–25 reporting year.

Risk management and insurance activities

The OCG maintains several management disciplines to comply with the NSW Treasury Internal Audit and Risk Management Policy for the General Government Sector (TPP 20-08). The following management disciplines are complementary and constitute the foundation of the OCG's resilience.

Fraud control and corruption prevention

The OCG has a Fraud and Corruption Control Policy that is based on Standards Australia AS8001-2021: Fraud and Corruption Control.

The OCG's Fraud and Corruption Control System (FCCS) establishes the foundations for effective fraud and corruption control, and outlines the measures in place for prevention, early detection and effective response. The FCCS includes the key risk management activities and internal controls, responsibilities, timeframes for action and information on review mechanisms.

Internal audit

In 2024–25 the OCG continued to review its risk profile. The information contained in our risk register informs the focus of our ongoing Internal Audit Plan.

The Audit and Risk Committee received and reviewed reports and management responses on:

- OCG's compliance with NSW Cyber Security policies
- Penetration testing of the WWCC system and NDIS Worker Check system
- People and Culture internal audit.

Planning for the NDISWC internal audit, which commenced in June 2025.

The internal audit and risk management attestation statement is on page 88.

Audit and Risk Committee

The OCG has an independent Audit and Risk Committee.

As part of compliance with TPP 20-08 Internal Audit and Risk Management Policy for the General Government Sector, the Committee continued its advisory role in assisting the Children's Guardian with relevant and timely advice on the office's governance, risk and control activities and external accountability obligations.

Collectively, the Committee members have the experience, knowledge and qualifications to effectively discharge their responsibilities as outlined in the Audit and Risk Committee Charter and TPP 20-08.

Six regular and 2 special Audit and Risk Committee meetings were held in 2024–25, with the number of meetings each independent member attended as follows:

Jan McClelland AM (Independent Chair): 8

Wayne Evans (Independent Member): 8

The late Helen Freeland (Independent Member): 5

Belinda Lawn (Independent Member): 1

Kara Nicholls (Independent Member): 1

Insurance activities

Insurance is provided for all major assets and significant risks through the NSW Government self-insurance scheme (NSW Treasury Management Fund). This includes full workers compensation, motor vehicle, property, public liability and miscellaneous insurance cover

Internal Audit and Risk Management Attestation Statement for the 2024–2025 Financial Year for the Office of the Children’s Guardian

I, Rachael Ward, am of the opinion that the Office of the Children’s Guardian has internal audit and risk management processes in operation that are compliant with the 7 Core Requirements set out in the Internal Audit and Risk Management Policy for the General Government Sector, specifically:

Core requirements		For each requirement, please specify whether compliant, non-compliant or in transition
Risk Management Framework		
1.1	The Accountable Authority shall accept ultimate responsibility and accountability for risk management in the agency.	Compliant
1.2	The Accountable Authority shall establish and maintain a risk management framework that is appropriate for the agency. The Accountable Authority shall ensure the framework is consistent with AS ISO 31000:2018.	Compliant
Internal Audit Function		
2.1	The Accountable Authority shall establish and maintain an internal audit function that is appropriate for the agency and fit for purpose.	Compliant
2.2	The Accountable Authority shall ensure the internal audit function operates consistent with the International Standards for Professional Practice for Internal Auditing.	Compliant
2.3	The Accountable Authority shall ensure the agency has an Internal Audit Charter that is consistent with the content of the ‘model charter’.	Compliant
Audit and Risk Committee		
3.1	The Accountable Authority shall establish and maintain efficient and effective arrangements for independent Audit and Risk Committee oversight to provide advice and guidance to the Accountable Authority on the agency’s governance processes, risk management and control frameworks, and its external accountability obligations.	Compliant
3.2	The Accountable Authority shall ensure the Audit and Risk Committee has a Charter that is consistent with the content of the ‘model charter’.	Compliant

Membership

The independent chair and members of the Audit and Risk Committee:

- Independent Chair, Jan McClelland AM, 1 May 2021 to 30 April 2025
- Independent Member, Wayne Evans, 1 September 2021 to 31 August 2025
- Independent Member, the late Helen Freeland, 1 August 2022 to January 2025
- Independent Member, Belinda Lawn, 30 June 2025 to 30 June 2026
- Independent Member, Kara Nicholls, 30 June 2025 to 30 June 2026

Rachael W.

Rachael Ward

Acting Children’s Guardian

25 September 2025



Ada Leung

Director Corporate Services

Privacy and personal information

The *Government Sector Finance Act 2018 (GSF Act)* requires a statement of action taken by the OCG in complying with the requirements of the *Privacy and Personal Information Protection Act 1998* and details of any reviews conducted by or on behalf of the OCG under Part 5 of the Act.

We have a Privacy Management Plan and we continue to comply with the *Privacy and Personal Information Protection Act 1998*, including the Information Protection Principles.

Consumer response

There were 8 formal complaints received during the reporting year.

In 2024-25, the OCG changed the process of receiving complaints, updating our Complaints Policy and website to easily direct stakeholders to the appropriate channels. A centralised intake mailbox receives and tracks complaints.

The OCG's Complaints Management Policy and Procedures is publicly available on our website. It outlines who complaints should be made, how a complaint will be dealt with, and what outcomes can be expected. The Policy also provides information about how to seek an external review if a complainant is not satisfied with the outcome of the investigation by the OCG. The Policy is reviewed at least every 2 years to ensure continuous improvement.

Annual report preparation

This annual report was prepared in accordance with Premier's Memorandum M2013-09 Production costs of annual reports. There were minimal production costs for copywriting, design or printing outside existing allocation.

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Sustainability

Summary of key sustainability risks and opportunities, and overall sustainability performance.

Work health and safety

There were no notifiable incidents reported in 2024–25.

There were 2 workers compensation claims lodged in 2024–25.

Regular reviews were undertaken with the WHS insurer to monitor the progress of claims and coordinate a safe and sustainable return to work for our injured workers.

OCG complies with the consultative requirements of the *Work Health and Safety Act 2011*. We continue to run the Work Health and Safety Committee and offer our Employee Assistance Program to all employees. We helped raise awareness about safety by supporting initiatives such as Movember, Mental Health Week, Women’s Health Week and National Safety Month.

Key initiatives for 2024–25 included:

- free influenza vaccinations, health checks and skin checks for all employees
- promoting myWellbeing; a tool via myCareer to support wellbeing
- promoting monthly wellbeing webinars
- organising learning session on managing vicarious trauma
- professional supervision for nominated employees; and
- recruiting Health Safety Representatives and First Aid Officers.

Next year we will continue promoting these resources and are developing a plan with a more holistic approach to supporting wellbeing at OCG.

Workforce diversity

OCG is committed to maintaining and progressing a diverse workforce and aims to increase its workforce diversity every reporting year. We value the principles of equity and diversity and are committed to building a workplace culture that values and

understands the benefits of a diverse workforce that is reflective of the wider community.

We support diversity, equity and inclusion in the workplace through various activities and events through the year, driven by the People and Culture team and the employee-led Diversity and Inclusion Working Group. A range of diversity and inclusion initiatives to promote inclusion and support diversity in 2024–25 included:

- ‘On Country Cultural Awareness Day’ to build cultural awareness and cross-cultural competence, improve inclusivity and increase knowledge of First Nations histories and culture
- promoting job opportunities in appropriate channels to increase our reach to Aboriginal and Torres Strait Islander communities
- ongoing promotion of myDiversity, a tool for promoting diversity, inclusion and belonging in the workplace
- continuing our membership with the Australian Network on Disability to build awareness of programs and support.

To increase and maintain awareness and engagement with our First Nations peoples and with our community engagement work with our First Nations stakeholders, all employees are required to complete Aboriginal cultural competency training ‘Everyone’s Business’. This has been incorporated into our employee’s mandatory training.

Throughout the year, OCG has acknowledged and celebrated diversity and inclusion initiatives, tied to various community events such as International Women’s Day, Harmony Week, NAIDOC week, Pride Month, Reconciliation Week, RU OK Day and International Day of People with Disability. As well, culturally diverse and significant dates such as Chinese New Year, Easter, Diwali and Ramadan were marked. During these periods, activities were undertaken to increase

awareness, engagement, and celebration of the NSW community and our workforce.

Next year we will continue promoting diversity and inclusion across OCG with a focus on developing new overarching multicultural and disability action plans.

Table 44: Workforce diversity groups (shown as percentages) *

Workforce diversity group	Benchmark	2022-23	2023-24	2024-2025
Women	50.0	72.3	76.4	78.0
Aboriginal people and Torres Strait Islander people	3.0	5.5	3.1	2.6
People whose first language spoken as a child was not English	20.2	23.5	22.6	17.8
People with a disability	2.7	1.4	1.4	1.5
People with a disability requiring work-related adjustment	N/A	0.5	0.5	0.5

NOTE:

*Data from NSW Public Sector and Workforce Profile Reports 2024.

Table 45: Distribution index for workforce diversity groups*

Workforce diversity group	Benchmark	2022-23	2023-24	2024-25
Women	100	98	101	111
Aboriginal people and Torres Strait Islander people	100	N/A	N/A	N/A
People whose first language spoken as a child was not English	100	94	93	83
People with a disability	100	N/A	N/A	N/A
People with a disability requiring work-related adjustment	100	N/A	N/A	N/A

NOTE:

A Distribution Index score of 100 indicates that the distribution of members of the Workforce Diversity group across salary bands is equivalent to that of the rest of the workforce. A score less than 100 means that members of the Workforce Diversity group tend to be more concentrated at lower salary bands than is the case for other staff. The more pronounced this tendency is, the lower the score will be. In some cases, the index may be more than 100, indicating that members of the Workforce Diversity group tend to be more concentrated at higher salary bands than is the case for other staff.

The Distribution Index is not calculated when the number of employees in the Workforce Diversity group is less than 20 or when the number of other employees is less than 20.

Modern Slavery Act 2018 (NSW)

No issues were brought to OCG's attention, and no correspondence was received from the Anti-Slavery Commissioner requiring an agency response during the financial year. We continue to monitor and assess modern slavery risks as part of ongoing day-to-day processes.

We use NSW procurement approved providers wherever possible to ensure that goods and services procured by and for the OCG were not the product of modern slavery within the meaning of the *Modern Slavery Act 2018*.

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Financial performance

Financial statements for the period
ended 30 June 2025.

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Independent Auditor's Report



INDEPENDENT AUDITOR'S REPORT

Office of the Children's Guardian

To Members of the New South Wales Parliament

Opinion

I have audited the accompanying financial statements of Office of the Children's Guardian (the Office), which comprise the Statement by the Children's Guardian, the Statement of Comprehensive Income for the year ended 30 June 2025, the Statement of Financial Position as at 30 June 2025, the Statement of Changes in Equity and the Statement of Cash Flows, for the year then ended, and notes to the financial statements, including a Statement of Material Accounting Policy Information and other explanatory information.

In my opinion, the financial statements:

- have been prepared in accordance with Australian Accounting Standards and the applicable financial reporting requirements of the *Government Sector Finance Act 2018* (GSF Act), the *Government Sector Finance Regulation 2024* (GSF Regulation) and the Treasurer's Directions
- presents fairly the Office's financial position, financial performance and cash flows.

My opinion should be read in conjunction with the rest of this report.

Basis for Opinion

I conducted my audit in accordance with Australian Auditing Standards. My responsibilities under the standards are described in the 'Auditor's Responsibilities for the Audit of the Financial Statements' section of my report.

I am independent of the Office in accordance with the requirements of the:

- Australian Auditing Standards
- Accounting Professional and Ethical Standards Board's APES 110 'Code of Ethics for Professional Accountants (including Independence Standards)' (APES 110).

Parliament promotes independence by ensuring the Auditor-General and the Audit Office of New South Wales are not compromised in their roles by:

- providing that only Parliament, and not the executive government, can remove an Auditor-General
- mandating the Auditor-General as auditor of public sector agencies
- precluding the Auditor-General from providing non-audit services.

I have fulfilled my other ethical responsibilities in accordance with APES 110.

I believe the audit evidence I have obtained is sufficient and appropriate to provide a basis for my audit opinion.

The Acting Children's Guardian's Responsibilities for the Financial Statements

The Acting Children's Guardian is responsible for the preparation and fair presentation of the financial statements in accordance with Australian Accounting Standards, the GSF Act, GSF Regulation and Treasurer's Directions. The Acting Children's Guardian's responsibility also includes such internal control as the Acting Children's Guardian determines is necessary to enable the preparation and fair presentation of the financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Acting Children's Guardian is responsible for assessing the Office's ability to continue as a going concern, disclosing as applicable, matters related to going concern and using the going concern basis of accounting.

Auditor's Responsibilities for the Audit of the Financial Statements

My objectives are to:

- obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error
- issue an Independent Auditor's Report including my opinion.

Reasonable assurance is a high level of assurance, but does not guarantee an audit conducted in accordance with Australian Auditing Standards will always detect material misstatements. Misstatements can arise from fraud or error. Misstatements are considered material if, individually or in aggregate, they could reasonably be expected to influence the economic decisions users take based on the financial statements.

A description of my responsibilities for the audit of the financial statements is located at the Auditing and Assurance Standards Board website at: www.auasb.gov.au/auditors_responsibilities/ar4.pdf. The description forms part of my auditor's report.

The scope of my audit does not include, nor provide assurance:

- that the Office carried out its activities effectively, efficiently and economically
- on the budget figures disclosed in the financial statements
- about the security and controls over the electronic publication of the audited financial statements on any website where they may be presented
- about any other information which may have been hyperlinked to/from the financial statements.



Jan-Michael Perez
Director, Financial Audit

Delegate of the Auditor-General for New South Wales

2 October 2025
SYDNEY

Statement by the Children’s Guardian

Pursuant to Division 7.2, section 7.6(4) of the *Government Sector Finance Act 2018 (GSF Act)*, I state that to the best of my knowledge and belief:

- a) the accompanying financial statements in respect of the period ended 30 June 2025 have been prepared in accordance with applicable Australian Accounting Standards (which include Australian Accounting Interpretations), the *Government Sector Finance Act 2018*, *Government Sector Finance Regulation 2024* and mandatory NSW Treasury accounting publications or the Treasurer’s directions.
- b) the financial statements present fairly the financial position, financial performance and cash flows of the Office of the Children’s Guardian for the year ended 30 June 2025.

Rachael W.

Rachael Ward

Acting Children’s Guardian

25 September 2025

Statement of comprehensive income

for the period ended 30 June 2025

	Notes	Budget 2025 \$'000	Actual 2025 \$'000	Actual 2024 \$'000
Continuing operations				
Expenses excluding losses				
Employee related expenses	2(a)	39,930	40,630	38,006
Other operating expenses	2(b)	20,785	26,133	27,914
Depreciation and amortisation expenses	2(c)	1,848	1,381	1,746
Grants and subsidies	2(d)	1,080	1,007	1,003
Finance costs		-	18	20
Total expenses excluding losses		63,643	69,169	68,689
Revenue				
Appropriation	3(a)	22,784	25,784	27,321
Sale of goods and services from contracts with customers	3(b)	37,764	35,709	33,750
Grants and contributions income	3(c)	321	218	217
Acceptance by the Crown of employee benefits and other liabilities		1,133	1,230	1,480
Other	3(d)	-	1,250	-
Total revenue		62,002	64,191	62,768
Operating result		(1,641)	(4,978)	(5,921)
Gains / (losses) on disposal		-	(2)	(5)
Net result from continuing operations		(1,641)	(4,980)	(5,926)
TOTAL COMPREHENSIVE INCOME / (LOSS)		(1,641)	(4,980)	(5,926)

The accompanying notes form part of these financial statements.

Statement of financial position

for the period ended 30 June 2025

	Notes	Budget 2025 \$'000	Actual 2025 \$'000	Actual 2024 \$'000
ASSETS				
Current Assets				
Cash and cash equivalents	4	6,335	3,315	8,806
Receivables	5	5,076	2,666	2,814
Total Current Assets		11,411	5,981	11,620
Non-Current Assets				
Property, plant and equipment	6	336	391	389
Intangible assets	7	1,834	989	2,065
Total Non-Current Assets		2,170	1,380	2,454
Total Assets		13,581	7,361	14,074
LIABILITIES				
Current Liabilities				
Payables	8	7,344	3,125	4,014
Provisions	9	4,104	5,650	5,226
Contract liabilities and deferred revenue	10	-	17	1,282
Total Current Liabilities		11,448	8,792	10,522
Non-Current Liabilities				
Provisions	9	588	551	554
Total Non-Current Liabilities		588	551	554
Total Liabilities		12,036	9,343	11,076
Net Assets / (Liabilities)		1,545	(1,982)	2,998
EQUITY				
Accumulated funds		1,545	(1,982)	2,998
Total Equity		1,545	(1,982)	2,998

The accompanying notes form part of these financial statements.

Statement of changes in equity

for the period ended 30 June 2025

	Notes	Accumulated Funds \$'000	Total \$'000
Balance at 1 July 2024		2,998	2,998
Net result for the year		(4,980)	(4,980)
Total comprehensive loss for the year		(4,980)	(4,980)
Balance at 30 June 2025		(1,982)	(1,982)
Balance at 1 July 2023		8,924	8,924
Net result for the year		(5,926)	(5,926)
Total comprehensive loss for the year		(5,926)	(5,926)
Balance at 30 June 2024		2,998	2,998

The accompanying notes form part of these financial statements.

Statement of cash flows

for the period ended 30 June 2025

	Notes	Budget 2025 \$'000	Actual 2025 \$'000	Actual 2024 \$'000
CASH FLOWS FROM OPERATING ACTIVITIES				
Payments				
Employee related		(38,797)	(38,925)	(35,656)
Suppliers for goods and services		(20,785)	(28,691)	(29,954)
Grant and subsidies		(1,080)	(1,007)	(1,003)
Finance costs		-	(18)	(20)
Total Payments		(60,662)	(68,641)	(66,633)
Receipts				
Appropriations		22,784	25,784	28,571
Sale of goods and services		37,764	35,686	33,647
Grants and contributions		321	218	217
Other		-	1,698	2,241
Total Receipts		60,869	63,386	64,676
NET CASH FLOWS FROM /(TO) OPERATING ACTIVITIES	12	207	(5,255)	(1,957)
CASH FLOWS FROM INVESTING ACTIVITIES				
Purchases of property, plant and equipment		(189)	(86)	(107)
Purchases of intangible assets		(1,250)	(150)	(6)
NET CASH FLOWS FROM INVESTING ACTIVITIES		(1,439)	(236)	(113)
NET INCREASE/(DECREASE) IN CASH AND CASH EQUIVALENTS		(1,232)	(5,491)	(2,070)
Opening cash and cash equivalents		7,567	8,806	10,876
CLOSING CASH AND CASH EQUIVALENTS	4	6,335	3,315	8,806

The accompanying notes form part of these financial statements.

Notes to the financial statements

for the period ended 30 June 2025

1. Statement of Material Accounting Policy Information

(a) Reporting entity

The Office of the Children's Guardian (the Office), is a NSW government entity and is controlled by the State of New South Wales, which is the ultimate parent. The Office is a not-for-profit entity (as profit is not its principal objective) and it has no cash generating units.

Schedule 1 of the Government Sector Employment Act 2013 (GSE Act) establishes the Office as a separate agency. The Office is responsible to the Minister for Families and Communities, and Minister for Disability Inclusion, and the Joint Parliamentary Committee on Children and Young People.

The financial statements for the year ended 30 June 2025 have been authorised for issue by the Children's Guardian and signed as per statement by the Children's Guardian on 25 September 2025.

(b) Basis of preparation

The Office's financial statements are general purpose financial statements which have been prepared on an accrual basis and in accordance with:

- applicable Australian Accounting Standards (AAS) (which include Australian Accounting Interpretations)
- the requirements of the Government Sector Finance Act 2018 (GSF Act) and Government Sector Finance Regulation 2024
- Treasurer's Directions issued under the GSF Act

Other financial statement line items are prepared in accordance with the historical cost convention except where specified otherwise.

Judgements, key assumptions and estimations management has made are disclosed in the relevant notes to the financial statements.

All amounts are rounded to the nearest one thousand dollars and are expressed in Australian currency, which is the entity's presentation and functional currency.

If an amount presented in the financial statements is immaterial in amount and nature, no accounting policy information is required to be disclosed, in accordance to AASB 101.

The financial statements for the year ended 30 June 2025 are prepared on a going concern basis. This year, there is an excess of current liabilities over current assets of \$2.8 million and a negative net cash flow from operating activities of \$5.3 million. The Office is primarily a budget-dependent agency, funded by the NSW Treasury based on the Appropriation Act which is drawn down according to internal cash flow forecasts and does not solely rely on its current assets to pay creditors and other liabilities.

(c) Statement of compliance

The financial statements and notes comply with Australian Accounting Standards, which include Australian Accounting Interpretations.

1. Statement of Material Accounting Policy Information (cont'd)

(d) Accounting for the Goods and Services Tax (GST)

Income, expenses and assets are recognised net of the amount of goods and services tax (GST), except that the:

- The amount of GST incurred by the Office as a purchaser that is not recoverable from the Australian Taxation Office (ATO) is recognised as part of an asset's cost of acquisition or as part of an item of expense and
- Receivables and payables are stated with the amount of GST included.

Cash flows are included in the Statement of Cash Flows on a gross basis. However, the GST components of cash flows arising from investing and financing activities which is recoverable from, or payable to, the Australian Taxation Office are classified as operating cash flows.

(e) Equity

Accumulated Funds include all current and prior year retained funds.

(f) Comparative information

Except when an Australian Accounting Standard permits or requires otherwise, comparative information is presented in respect of the previous period for all amounts reported in the financial statements.

(g) Budgeted amounts

The budgeted amounts are drawn from the original budgeted financial statements presented to Parliament in respect of the reporting period. Subsequent amendments to the original budget (e.g. adjustments for transfer of functions between entities as a result of Administrative Arrangements Orders) are not reflected in the budgeted amounts. Major variances between the original budgeted amounts and the actual amounts disclosed in the primary financial statements are explained in Note 13.

(h) Changes in accounting policies, including new or revised AAS

i. Effective for the first time in 2024-25

The accounting policies applied in 2024-25 are consistent with those of the previous financial year except as a result of the following new or revised AAS that have been applied for the first time in 2024-25. Management has assessed all new or revised accounting standards (including those issued but not yet effective) and has concluded these do not have a material impact on the financial statements of the Office of the Children's Guardian.

- AASB 2020-1 Amendments to Australian Accounting Standards – Classification of Liabilities as Current or Non-current
- AASB 2022-6 Amendments to Australian Accounting Standards – Non-current Liabilities with Covenants
- AASB 2022-10 Amendments to Australian Accounting Standards – Fair Value Measurement of Non-Financial Assets of Not-for-Profit Public Sector Entities

No other new accounting standards or interpretations that applied to the Office for the first time in 2024-25 had any material impact on the recognition and measurement of financial statement transactions and balances for the year ended 30 June 2025.

1. Statement of Material Accounting Policy Information (cont'd)

ii. Issued but not yet effective

New South Wales public sector entities are not permitted to early adopt new Australian Accounting Standards unless NSW Treasury determines otherwise, in accordance with NSW Treasury mandate (NSW Treasury Policy and Guidelines TPG25- 02). There are no issued but not yet effective AASs that are likely to have a material impact on the financial statements in the period of their initial application.

(i) Impact of Climate-related matters on Financial Reporting for 2024-25

The Office has not been materially affected by any climate change related event in FY 2024-25. Further:

- no adjustments to the carrying value of assets or liabilities were recognised during the financial year as a result of climate- related risks impacting current accounting estimates and judgments.
- no other transactions have been recognised during the financial year specifically due to climate-related risks impacting the Office.

2. Expenses excluding losses

(a) Employee related expenses	2025	2024
	\$'000	\$'000
Salaries and wages (including annual leave)	33,636	30,922
Superannuation - defined benefits plans	25	1
Superannuation - defined contribution plans	3,414	3,087
Long service leave	1,242	1,618
Workers' compensation insurance	235	172
Payroll tax and fringe benefits tax	2,034	1,937
Redundancy payments	107	-
Paid Parental Leave	(63)*	269
	40,630	38,006

Nil employee related costs have been capitalised as an asset and therefore excluded from the above (2024: Nil). Refer to Note 9 for further details on recognition and measurement of employee related expenses.

*The paid parental leave expense is in credit balance due to write back of provisions.

(b) Other operating expenses include the following:	2025	2024
	\$'000	\$'000
Employment Screening *	18,243	18,927
Building occupancy arrangement	1,039	1,013
Corporate and shared services	2,181	2,162
Contractors	865	1,143
Consultancy Costs	107	305
Telephony	37	60
Printing and Program costs	140	218
Information and Technology costs	2,020	2,642
Travel	277	260
Auditor's remuneration - audit of the financial statements	55	66
Community education	113	107
Committee meetings	44	37
Training	237	338
Electricity and cleaning	73	66
Maintenance expenses	14	27
Other	688	543
Total other operating expenses	26,133	27,914

2. Expenses excluding losses (cont'd)

Recognition and Measurement

Lease expense

The Office does not have any contractual agreements that meet the definition of a lease for AASB 16 Leases accounting purposes.

Building occupancy expenditure consists of payments for office accommodation under non-lease arrangements with Property NSW who have retained substantive substitution rights over the assets used under this agreement. Payments are expensed as incurred and categorised within the building occupancy arrangement expense line item.

Employee screening: This is the cost incurred for the services provided by Service NSW and Australian Criminal Intelligence Commission for Working with Children Check and NDIS Worker Check applications.

(c) Depreciation and amortisation expense	2025 \$'000	2024 \$'000
Depreciation		
Office equipment	23	23
Computer hardware	125	120
Office Fixtures and Fittings	7	7
	155	150
Amortisation		
Intangibles	1,226	1,596
Total depreciation and amortisation	1,381	1,746

Refer to Note 6 Property, plant and equipment and Note 7 intangible assets for recognition and measurement policies on depreciation and amortisation.

(d) Grants and subsidies	2025 \$'000	2024 \$'000
Grants		
Australian Criminal Intelligence Commission (Commonwealth)	117	117
NSW Department of Communities and Justice	672	669
Department of Social Services (Commonwealth)	218	217
	1,007	1,003

3. Revenue

(a) Appropriations and transfers to the Crown	2025 \$'000	2024 \$'000
Summary of compliance		
Amount Appropriated per Appropriation Act	22,784	30,680
Standing or Special Appropriations		
Variations to appropriations during this financial year		
- Changes to Appropriation		(2,109)
- Special Appropriation (per Section 39(2)(b)(i) of the Appropriation Act)	4,000 ¹	-
Total spending authority from parliamentary appropriations, other than deemed appropriations	26,784²	28,571
Add:		
The spending authority from deemed appropriations during the current year	37,602	36,105
The unutilised spending authority from deemed appropriations from prior years	8,806	10,876
Total	73,192	75,552
Less: total expenditure out of Consolidated Fund	(68,877)	(66,746)
Variance	4,315	8,806
Less:		
The spending authority from appropriations lapsed on 30 June	-	-
Deemed appropriations balance carried forward to following years	4,315	8,806

NOTES:

1. During FY24-25, OCG received the delegated authority to spend additional special appropriation of \$4 million to meet its expense obligations. The funding was delegated to Minister for Families and Communities under s 22(2) (a) and s22(1) of the Appropriation Act 2024(the Act) and then subsequently this was subdelegated under section 39(3) of the Act.

2. During FY 24-25, OCG submitted a \$1 million change to appropriation related to capital carry forward. This reduction is reflected in OCG's administrative appropriation limit, not in the legal limit, and is not shown in the deemed appropriation table in this note. However, the administrative appropriation limit has affected OCG's overall drawdown capacity, resulting in a total drawdown of \$25.8 million, as reflected in the Statement of Comprehensive Income and Statement of Cashflows.

Recognition and measurement

Income recognition

The *Appropriation Act 2024* (Appropriations Act) (and the subsequent variations, if applicable) appropriates the sum of \$26.8 million to the Minister for Families and Communities, and Disability Inclusion out of the Consolidated Fund for the services of the Office for the year 2024-25.

3. Revenue (cont'd)

As a result, the lead Minister for the Office, being the Minister for Families and Communities, and Disability Inclusion is taken to have been given an appropriation out of the Consolidated Fund under the authority of section 4.7 of the GSF Act, at the time the Office receives or recovers any deemed appropriation money, for an amount equivalent to the money that is received or recovered by the Office. These deemed appropriations are taken to have been given for the services of the Office.

In addition, government money that the Office receives or recovers from another GSF agency, of a kind prescribed by the GSF regulation that forms part of the Consolidated Fund, is now capable of giving rise to deemed appropriations.

The spending authority of the Minister for Families and Communities, and Disability Inclusion for the services of the Office, from the Appropriations Act and deemed appropriation money, has been delegated/sub-delegated to officers of the Office.

The summary of compliance has been prepared by aggregating the spending authorities for the Minister for Families and Communities, and Disability Inclusion for the services of the Office. It reflects the status at the point in time this disclosure statement is being made.

Recognition and measurement

Income from appropriations, other than deemed appropriations (of which the accounting treatment is based on the underlying transaction), does not contain enforceable and sufficiently specific performance obligations as defined by AASB15. Therefore, except as specified below, appropriations (other than deemed appropriations) are recognised as income when the Office obtains control over the assets comprising the appropriations. Control over appropriations is normally obtained upon the receipt of cash.

Deemed appropriations

Deemed appropriations is a legal concept under the GSF Act, that does not have a corresponding financial statement line item. Instead, deemed appropriations may come from various sources of the Office, such as rendering of sales, and the corresponding revenue is disclosed in the relevant sections of these items in the financial statements.

The summary of compliance includes deemed appropriations. It is based on the assumption that annual appropriations monies are spent first (except where otherwise identified or prescribed).

(b) Sale of goods and services from contracts with customers / Sale of goods and services		
	2025	2024
Rendering of Services	\$'000	\$'000
- Working With Children Check fee	29,142	27,366
- NDIS Worker Check fee	6,193	5,885
- Children's employment authority fee	366	401
- Other	8	98
	35,709	33,750

3. Revenue (cont'd)

Recognition and measurement

Rendering of services

Revenue from the rendering of services is recognised as or when the Office satisfies the performance obligation by transferring the promised services. The majority of the revenue comes from the paid applications for the Working with Children Check (WWCC) and the National Disability Insurance Scheme (NDIS) worker check. Both licenses meet the definition of a low value license. Therefore, the Office has elected to recognise the revenue when the applicant pays for their application rather than when the license is issued. This is not expected to lead to any material differences as all applications for paid applicants are processed within 30 days.

(c) Grants and contributions income	2025 \$'000	2024 \$'000
Other grants without sufficiently specific performance obligations		
- The Crown in right of the State of New South Wales	218	217
	218	217

Recognition and measurement

Revenue is recognised in accordance with the requirements of AASB 1058 Income of Not-for-Profit Entities.

Revenue from grants without sufficiently specific performance obligations is recognised when the Office obtains control over the granted assets (e.g. cash).

(d) Other	2025 \$'000	2024 \$'000
Other	1,250	-
	1,250	-

Other Income relates to the correction of a prior year misstatement. During FY 2023-24, the Office received capital appropriation of \$1.25 million which should be recognised as income instead of deferred revenue, as per AASB 1058 Income of Not-for-Profit-Entities. The purpose of this funding is to support the operational platform for the Carers Register and Residential Care Workers Register. Refer to Note 10 for more information.

4. Current assets – cash and cash equivalents

	2025 \$'000	2024 \$'000
Cash at bank and on hand	3,315	8,806
	3,315	8,806

For the purposes of the Statement of Cash Flows, cash and cash equivalents include cash at bank and cash on hand as per the Statement of Financial Position.

Refer Note 14 for details regarding credit risk and market risk arising from financial instruments.

5. Current assets - receivables

Current Receivables	2025 \$'000	2024 \$'000
GST Receivable	364	201
Trade receivables from contracts with customers	1,922	2,249
Prepayments	370	342
Other receivables	10	22
	2,666	2,814

Details regarding credit risk of trade receivables that are neither past due nor impaired are disclosed in Note 14(b).

Recognition and Measurement

Receivables are initially recognised at fair value plus any directly attributable transaction costs. Trade receivables that do not contain a significant financing component are measured at the transaction price.

Short-term receivables with no stated interest rate are measured at the original invoice amount where the effect of discounting is immaterial.

Impairment

The Office has not recognised an allowance for expected credit losses for receivables as at the reporting date (2024: \$0 million) as the balance primarily relates to working with children and NDIS workers check collected fees to be transferred from other State Government collection agencies to the Office, in which there is no risk of default.

6. Non-current assets – property, plant and equipment

	Plant and equipment	Fixtures & Fittings	Total
	\$'000	\$'000	\$'000
At 1 July 2023 - fair value			
Gross carrying amount	941	2,115	3,056
Less: Accumulated depreciation and impairment	(531)	(2,087)	(2,618)
Net carrying amount	410	28	438

Year ended 30 June 2024

Net carrying amount at beginning of year	410	28	438
Purchases of assets	107	-	107
Disposals	(6)	-	(6)
Other movement (retirements)	-	-	-
Depreciation expense	(143)	(7)	(150)
Net carrying amount at end of year	368	21	389

At 1 July 2024 - fair value

Gross carrying amount	1,016	2,115	3,131
Less: Accumulated depreciation and impairment	(648)	(2,094)	(2,742)
Net carrying amount	368	21	389

Year ended 30 June 2025

Net carrying amount at beginning of year	368	21	389
Purchases of assets	159	-	159
Disposals	(2)	-	(2)
Depreciation expense	(148)	(7)	(155)
Net carrying amount at end of year	377	14	391

At 30 June 2025 - fair value

Gross carrying amount	890	2,115	3,005
Less: Accumulated depreciation and impairment	(513)	(2,101)	(2,614)
Net carrying amount	377	14	391

6. Non-current assets – property, plant and equipment (cont'd)

Recognition and Measurement

i. Acquisitions of property, plant and equipment

Property, plant and equipment acquired are initially measured at cost and subsequently revalued at fair value less accumulated depreciation and impairment. Cost is the amount of cash or cash equivalents paid, or the fair value of the other consideration given to acquire the asset at the time of its acquisition or construction or, where applicable, the amount attributed to that asset when initially recognised in accordance with the requirements of other Australian Accounting Standards.

The Office's property, plant and equipment are non-specialised assets with short useful lives. Accordingly, they are subsequently measured at depreciated historical cost, as an approximation of fair value. The Office has assessed that any difference between fair value and depreciated historical cost is unlikely to be material.

Assets acquired at no cost, or for nominal consideration, are initially recognised at their fair value at the date of acquisition.

ii. Capitalisation thresholds

Property, plant and equipment and intangible assets costing \$5,000 and above individually (or forming part of a network costing more than \$5,000) are capitalised.

iii. Impairment of property, plant and equipment

As a not-for-profit entity with no cash generating units, impairment under AASB 136 Impairment of Assets is unlikely to arise. Since property, plant and equipment is carried at fair value or an amount that approximates fair value, impairment can only arise in the rare circumstances such as where the costs of disposal are material. Specifically, impairment is unlikely for not-for-profit entities given that AASB 136 modifies the recoverable amount test for non-cash generating assets of not-for-profit entities to the higher of fair value, less costs of disposal and depreciated replacement cost, where depreciated replacement cost is also fair value.

The Office assesses at each reporting date, whether there is an indication that an asset may be impaired. If any indication exists, or when annual impairment testing for an asset is required, the entity estimates the asset's recoverable amount. When the carrying amount of an asset exceeds its recoverable amount, the asset is considered impaired and is written down to its recoverable amount.

iv. Depreciation of property, plant and equipment

Depreciation is provided for on a straight-line basis for all depreciable assets so as to write off the depreciable amount of each asset as it is consumed over its useful life to the Office.

Depreciation rates of the various categories of non-current assets is as follows:

Depreciation Rates	% Rate 2025	% Rate 2024
Plant & Equipment		
Office fixtures and fittings	14-20	14-20
Plant and Equipment	25	25

6. Non-current assets – property, plant and equipment (cont'd)

v. Restoration costs

The present value of the expected cost for the restoration or cost of dismantling of an asset after its use is included in the cost of the respective asset if the recognition criteria for a provision are met. Refer to Note 9 for disclosures of the restoration provision.

7. Intangible assets

	Software \$'000
At 1 July 2023	
Cost (gross carrying amount)	6,971
Accumulated amortisation and impairment	(3,316)
Net carrying amount	3,655
Year ended 30 June 2024	
Net carrying amount at beginning of year	3,655
Additions	6
Amortisation (recognised in 'depreciation and amortisation')	(1,596)
Net carrying amount at end of year	2,065
At 1 July 2024	
Cost (gross carrying amount)	6,977
Accumulated amortisation and impairment	(4,912)
Net carrying amount	2,065
Year ended 30 June 2025	
Net carrying amount at beginning of year	2,065
Additions	150
Amortisation (recognised in 'depreciation and amortisation')	(1,226)
Net carrying amount at end of year	989
At 30 June 2025	
Cost (gross carrying amount)	7,063
Accumulated amortisation and impairment	(6,074)
Net carrying amount	989

7. Intangible assets (cont'd)

Recognition and Measurement

The Office recognises intangible assets only if it is probable that future economic benefits will flow to the Office and the cost of the asset can be measured reliably. Intangible assets are measured initially at cost. Where an asset is acquired at no or nominal cost, the cost is its fair value as at the date of acquisition. Following initial recognition, intangible assets are subsequently measured at fair value only if there is an active market. As there is no active market for the Office's Intangible assets, the assets are carried at cost less any accumulated amortisation and impairment losses.

All research costs are expensed. Development costs are only capitalized when certain criteria are met.

The Office's Intangible assets (computer software) are amortised using the straight-line method within a period of 4 years. The amortisation period and the amortisation method for an intangible asset with a finite life are reviewed at the end of each reporting period.

Impairment

Intangible assets are tested for impairment where an indicator of impairment exists. The indicators considered by the Office include technical obsolescence and any plans to discontinue the use of intangible assets. If the recoverable amount is less than its carrying amount, the carrying amount is reduced to recoverable amount and the reduction is recognised as an impairment loss.

8. Current liabilities – payables

	2025 \$'000	2024 \$'000
Payables		
Accrued salaries, wages and on costs	735	691
Creditors	2,390	3,323
	3,125	4,014

Recognition and measurement

Payables represent liabilities for goods and services provided to the Office and other amounts. Payables are recognised initially at fair value, usually based on the transaction cost or face value. Subsequent measurement is at amortised cost using the effective interest method.

Short-term payables with no stated interest rate are measured at the original invoice amount where the effect of discounting is immaterial.

Details regarding credit risk, liquidity risk and market risk, including a maturity analysis of the above payables are disclosed in Note 14.

9. Current/non-current liabilities - provisions

	2025 \$'000	2024 \$'000
Employee benefits and related on-costs		
Current employee benefits and related on-costs		
Annual leave	3,946	3,540
Long service leave – on-costs	729	695
Paid Parental Leave	206	269
Payroll tax	769	725
Fringe benefits tax	-	(3)
Total	5,650	5,226
Non-current employee benefits and related on-costs		
Long service leave – on-costs	81	77
Payroll tax	42	40
	123	117
Other provisions		
Restoration costs	428	437
Total Non-current employee benefits and related on-costs	551	554
Aggregate employee benefits and related on costs		
Provisions - current	5,650	5,226
Provisions - non-current	123	117
Accrued salaries, wages and on-costs (Note 8)	735	691
	6,508	6,034
Movements in provisions (other than employee benefits)		
Movements in restoration provision are set out below:		
Carrying amount at 1 July 2024		437
Unwinding of discount rate		(9)
Carrying amount at 30 June 2025		428

9. Current/non-current liabilities – provisions (cont'd)

Recognition and measurement

(a) Employee benefits and related on-costs

(i) Salaries and wages, annual leave, sick leave and parental leave

Salaries and wages (including non-monetary benefits), parental leave and paid sick leave that are expected to be settled wholly within 12 months after the end of the period in which the employees render the service are recognised and measured at the undiscounted amounts of the benefits.

Annual leave is not expected to be settled wholly before 12 months after the end of the annual reporting period in which the employees render the related service. As such, it is required to be measured at present value in accordance with AASB 119 Employee Benefits (although short cut methods are permitted). Actuarial advice obtained by Treasury has confirmed that the use of a nominal approach plus the annual leave on annual leave liability (using 8.4% of the nominal value of annual leave) can be used to approximate the present value of the annual leave liability. The Office has assessed the actuarial advice based on the Office's circumstances and has determined that the effect of discounting is immaterial to annual leave.

All annual leave is classified as current liability even where the Office does not expect to settle the liability within 12 months as the entity does not have the right at the end of the reporting period to defer settlement for at least 12 months after the reporting period.

Unused non-vesting sick leave does not give rise to liability as it is not considered probable that sick leave taken in the future will be greater than the benefits accrued in the future.

In accordance Section 52(1) Determination No 4 2022 under the Government Sector Employment Act 2013, from 1st October 2022 onwards, OCG staff who has provided 40 weeks of continuous service are eligible for a total of 16 weeks of paid parental leave. Staff are also eligible to utilise this leave period flexibly within 24 months from the child's birth date.

The parental leave provision is measured by reflecting the present value of unused parental leave entitlements by staff who has applied and took leave or notified OCG an intent to take leave in the next 12 months. Unused leave entitlements is calculated based on the difference of staff entitlement less than the parental leave already taken.

(ii) Long service leave and superannuation

The Office's liabilities for long service leave and defined benefit superannuation are assumed by the Crown in right of the State of New South Wales (Crown). The Office accounts for the liability as having been extinguished, resulting in the amount assumed being shown as part of the non-monetary revenue item described as 'Acceptance by the Crown of employee benefits and other liabilities'.

Long service leave is measured at the present value of expected future payments (in accordance with AASB 119 Employee Benefits) to be made in respect of services provided up to the reporting date. Consideration is given to certain factors based on actuarial review, including expected future wage and salary levels, experience of employee departures, and periods of service. Expected future payments are discounted using Commonwealth government bond rate at the reporting date.

9. Current/non-current liabilities – provisions (cont'd)

Recognition and measurement (cont'd)

(a) Employee benefits and related on-costs (cont'd)

(ii) Long service leave and superannuation (cont'd)

The superannuation expense for the financial year is determined by using the formulae specified in the Treasurer's Directions. The expense for certain superannuation schemes (i.e., Basic Benefit and First State Super) is calculated as a percentage of the employees' salary. For other superannuation schemes (i.e., the State Superannuation Scheme and State Authorities Superannuation Scheme), the expense is calculated as a multiple of the employee's superannuation contributions.

(iii) Consequential on-costs

Consequential costs to employment are recognised as liabilities and expenses where the employee benefits to which they relate have been recognised. This includes outstanding amounts of payroll tax, worker's compensation insurance premiums and fringe benefits tax.

(b) Other Provisions

Provisions are recognised when: the Office has a present legal or constructive obligation as a result of a past event; it is probable that an outflow of resources will be required to settle the obligation; and a reliable estimate can be made of the amount of obligation. When the Office expects some or all of the provision to be reimbursed, for example, under an insurance contract, the reimbursement is recognised as a separate asset, but only when the reimbursement is virtually certain. The expense relating to a provision is presented net of any reimbursement in the 'Statement of Comprehensive Income'.

10. Contract assets/liabilities and deferred revenue

	2025 \$'000	2024 \$'000
Contract liabilities – current	17	32
Deferred Revenue	-	1,250
	17	1,282

Recognition and measurement

Contract liabilities relate to consideration received in advance from customers. The balance of contract liabilities at reporting date mainly consists of fee for service contract agreements with other government agency which the Office have yet to deliver the services.

The contract liability is recognised based on completion of milestones as per the service contract. When the milestones are completed, this will be recognised as revenue as the performance obligations are satisfied.

11. Contingent liabilities & contingent assets

The Office is not aware of any contingent liabilities and / or assets associated with its operations.

12. Reconciliation of cash flows from operating activities to net result

Reconciliation of cash flows from operating activities to the net result as reported in the Statement of Comprehensive Income as follows:

	2025 \$'000	2024 \$'000
Net cash used on operating activities	(5,255)	(1,957)
Depreciation and amortisation expense	(1,381)	(1,746)
Decrease / (increase) in provisions	(422)	(690)
Increase / (decrease) in receivables and other assets	(73)	(585)
Decrease / (increase) in payables	888	302
Other Gains / (Losses)	(2)	(5)
Decrease / (increase) in contract liabilities	1,265	(1,245)
Net result	(4,980)	(5,926)

13. Budget review

The budgeted amounts are drawn from the original budgeted financial statements presented to Parliament in respect of the reporting period. Subsequent amendments to the original budget (e.g. adjustment for transfer of functions between entities as a result of Administrative Arrangements Orders) are not reflected in the budgeted amounts. Major Variances between the original budgeted amounts and the actual amounts disclosed in the financial statements are explained below:

Net Result

Net result was a deficit of \$4,980k compared to the original budget deficit of \$1,641k. This is an unfavourable variance of \$3,339k arising from the following items:

Expense

Total expenses excluding losses were \$69,169k compared to budget of \$63,643k. This was \$5,526k higher than budget driven by unfavourable variance in operating budget expenses, as the Office transitions to a new funding model with greater reliance on self-generated revenue effective 1 July 2024.

Revenue

Total revenue was \$64,191k compared to budget of \$62,002k. This was \$2,189k higher than budget due to net additional appropriation (including other variations) of \$3,000k plus favourable variance of other revenue for \$1,250k offset by unfavourable variance in sales of goods and services revenue of \$2,055k. The favourable variance in other revenue relates to correction of prior year accounting error. Refer to note 3(d) for more information.

Appropriation was \$25,784k compared to budget of \$22,784k. Net additional appropriation is \$3,000K as the office received a special appropriation of \$4,000k to meet its expenditure commitments. This was reduced by \$1,000k capital funding which was carried forward to future periods due to delays in related project for reasons outside of the Office's control. Refer to note 3(a) for more information.

Sale of goods and services from contracts with customers was \$35,709k against the budget of \$37,764k. This was lower than budget by \$2,055k due to lower volumes of NDIS worker checks by 19,500 checks.

Assets and Liabilities

Net Liabilities were \$1,982k compared to the budget Net Asset of \$1,545k. The major variances arising from the statement of financial position are noted below:

Assets

Total Assets were \$7,361k, which is lower than budget by \$6,220k. Cash and cash equivalents were \$3,315k compared to a budget of \$6,335k. The unfavourable cash variances are driven by additional expense pressures as the Office transitions to a new funding model, offset by net additional appropriation of \$3,000k.

Receivables were \$2,666k compared to the budget of \$5,076k. This is \$2,410 lower than budget. The receivable variance is lower than the budgeted balance due to timing variances and lower than budgeted revenue receipts for NDIS.

Liabilities

Total Liabilities were \$9,343k, which is lower than budget by \$2,693k. Payables were \$3,125k compared to a budget of \$7,344k. This is due to timely payment to suppliers for the reporting period. Provisions were \$5,650k compared to budget of \$4,104k, this is predominately due to higher recreation leave provisions.

13. Budget review (cont'd)

Cash Flow Statement

Net cashflows from operating activities were a deficit of \$5,255k compared to a budget surplus of \$207k. The unfavourable variance of \$5,462k is primarily driven by additional expense pressures as the Office transitions to new funding model this year.

Total operating cash payments were \$68,641k compared to the budget of \$60,662k, this was higher than budget by \$7,979k as a result of the higher other operating expenses predominately driven by higher payments to suppliers for goods and services. The excess cash payment to budget is derived mainly from the realignment of funding model.

Total operating receipts were \$63,386k compared to the budget of \$60,869k, this was favourable to budget by \$2,517k as a result of the one-off special appropriation received.

Net cashflows from investing activities were a deficit of \$236k compared to a budgeted deficit of \$1,439k as capital funding was received by OCG but the related project work was deferred to future periods due to factors outside of the OCG's control.

14. Financial instruments

The Office's principal financial instruments are outlined below. The financial instruments arise directly from the Office's operations and are required to finance the Office's operations. The Office does not enter into or trade financial instruments, including derivative financial instruments, for speculative purposes.

The Office's main risks arising from the financial instruments are outlined below, together with the Office's objectives, policies and processes for measuring and managing risk. Further quantitative and qualitative disclosures are included throughout these financial statements.

The Guardian has overall responsibility for the establishment and oversight of risk management and reviews and agrees on policies for managing each of these risks. Risks management policies are established to identify and analyse the risks faced by the Office, to set risks limits and controls and monitor risks. Compliance with policies is reviewed by the Office, to set risk limits and controls and to monitor risks. Compliance with policies is reviewed by the internal auditors on a continuous basis.

(a) Financial instrument categories

Class: Financial Assets	Note	Category	Carrying Amount 2025 \$'000	Carrying Amount 2024 \$'000
Cash and cash equivalents	4	Amortised cost	3,315	8,806
Receivables ¹	5	Amortised cost	1,932	2,271

Financial Liabilities	Note	Category	Carrying Amount 2025 \$'000	Carrying Amount 2024 \$'000
Payables ²	8	Financial liabilities measured at amortised cost	2,390	3,323

1. Excludes statutory receivables and prepayments (i.e., not within scope of AASB 7)

2. Excludes statutory payables and unearned revenue (i.e., not within scope of AASB 7)

14. Financial instruments (cont'd)**(b) Financial Risks****(i) Credit Risk**

Credit risk arises when there is the possibility of the Office's debtors defaulting on their contractual obligations, resulting in a financial loss to the office. The maximum exposure to credit risk is generally represented by the carrying amount of the financial assets (net of any allowance for impairment).

Credit risk arises from the financial assets of the Office, including cash and receivables. No collateral is held by the office. The Office has not granted any financial guarantees.

Credit risk associated with the Office's financial assets, other than receivables, is managed through the selection of counterparties and establishment of minimum credit rating standards.

Cash and cash equivalents

Cash comprises cash on hand and bank balances within the NSW Treasury Banking System. The Office does not have any interest income as it is adjusted to offset against management fee charged for banking services.

Receivables - trade debtors

All trade debtors are recognised as amounts receivable at balance date. The collectability of trade debtors is reviewed on an ongoing basis. Procedures as established in the Treasurer's Directions are followed to recover outstanding amounts, including letters of demand.

Debts which are known to be uncollectible are written off. An allowance for impairment is raised when there is objective evidence that the entity will not be able to collect all amounts due. This evidence includes past experience, and current and forward-looking information on changes in economic conditions and debtor credit ratings. No interest is earned on trade debtors. Sales are made on 30-day terms.

There were no aged debtors at the end of the financial year.

14. Financial instruments (cont'd)

(b) Financial Risks (cont'd)

(i) Liquidity risk

Liquidity risk is the risk that the Office will be unable to meet its payment obligations when they fall due. The Office continuously manages risk through monitoring future cash flows and ensuring adequate holdings of cash and cash equivalents.

The Office's exposure to liquidity risk is deemed insignificant based on prior periods' data and current assessment of risk. The Office has Corporate Credit facility of \$40,000(2023-24: \$40,000) with Citi Bank, which is the total of the credit limit for all issued credit cards. The balance in this facility is cleared monthly.

The liabilities are recognised for amounts due to be paid in the future for goods or services received, whether or not invoiced. Amounts owing to suppliers (which are unsecured) are settled in accordance with the policy set out in NSW TC 11/12. Under the Faster Payment Terms Policy, registered small businesses will be paid within 5 business days of receipt of a correctly rendered invoice. For other suppliers, if trade terms are not specified, payment is made no later than the end of the month following the month in which an invoice or a statement is received. For late payments to registered small businesses, interest payments are no longer applicable but are at the discretion of agencies to pay. For late payments to other suppliers, the Head of an authority (or a person appointed by the Head of an authority) may automatically pay the supplier simple interest. There was no interest paid during the year 2024-25 (2023-24: nil).

The table below summarises the maturity profile of the Office's financial liabilities, together with the interest rate exposure.

Maturity Analysis and interest rate exposure of financial liabilities

		Interest Rate Exposure			Maturity dates		
		\$'000			< 1 year	1-5 years	>5 years Int.
Financial Liabilities	Weighted Average Effective rate %	Nominal Amount	Variable Interest rate	Non-interest bearing			
2025							
<i>Payables:</i>							
Creditors ¹		2,390	-	2,390	2,390	-	-
		2,390	-	2,390	2,390	-	-
2024							
<i>Payables:</i>							
Creditors ¹		3,323	-	3,323	3,323	-	-
		3,323	-	3,323	3,323	-	-

NOTES:

- The amounts disclosed are the contractual undiscounted cash flows based on the earliest date on which the Office can be required to pay.

(ii) Market risk

Market risk is the risk that the fair value or future cash flow of a financial instrument will fluctuate because of changes in market prices.

The Office is not subject to interest rate risk. The Office does not hold any interest-bearing assets or liabilities. Any associated interest on Treasury Banking System cash balances is withheld from the Office and accounted for by NSW Treasury.

The Office also has no exposure to foreign currency risk and does not enter into commodity contracts.

(c) Fair value compared to carrying amount

The amortised cost of financial instruments recognised in the Statement of Financial Position approximates the fair value, because of the short-term nature of all the financial instrument

15. Related party disclosures

The table below contains the remuneration paid to Key management personnel (KMP). There were two individuals who fulfilled KMP roles throughout the year:

Short-term employee benefits:	2025 \$'000	2024 \$'000
Salaries	514	388
Other long-term employee benefits		-
Post-employment benefits	40	27
Total Remuneration	554	415

The Office did not enter into any other transactions with key management personnel, their close family members and controlled or jointly controlled entities thereof.

In addition, during the year, the Office entered into transactions with other entities that are controlled/ jointly controlled / significantly influenced by the NSW government. These transactions include:

	2025 \$'000		2024 \$'000	
	Transaction value	Net receivable/ payable	Transaction value	Net receivable/ payable
Appropriations, sale of services and other receipts	30,110	1,929	29,113	1,928
Purchase of goods/ services and other payments	(11,109)	(1,047)	(13,122)	(2,211)
	19,001	882	15,991	(283)

In addition, in FY 24/25, OCG has collected a total \$35.3 million (2024 \$33.25 million) of paid application checks from both Working with Children Check and National Disability Insurance Scheme Check through Service NSW.

Other related party's transactions include:

- Insurance under Treasury Managed Fund Scheme
- Long Service Leave and Defined Benefit Superannuation assumed by the Crown
- Appropriations (and subsequent adjustments to appropriations)

-
- Agreement with Service NSW for Working with Children Check services and National Disability Insurance Scheme Check
 - Corporate shared services with Department of Customer Service
 - Service agreement with the Department of Communities and Justice
 - Payment for the audit of our financial statements to the Audit Office of NSW
 - Accommodation arrangement with Property NSW
 - Legal services received from Crown Solicitors Office

16. Major activity group

The Office of the Children's Guardian has one major activity group which supports the State Outcome to protect children and families. This State Outcome is about supporting the safety and wellbeing of vulnerable children, young people and families, and protecting them from the risk of harm, abuse and neglect.

17. Events after the reporting period

There are no events subsequent to balance date which affect the financial statements.

End of audited financial statements.



Key achievements, facts and figures about the Office of the Children's Guardian's work for 2024–25.

This report is available on our website: ocg.nsw.gov.au

Office of the Children's Guardian

Locked Bag 5100
Strawberry Hills NSW 2012

ABN: 43 304 920 597

Office hours:

Monday to Friday
9.00am – 5.00pm

T: (02) 8219 3600

E: ocg.nsw.gov.au/contact-us

W: www.ocg.nsw.gov.au

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ISSN 1446-0750
