

Department of Health  
Child Safety and Wellbeing  
**Framework**



**DRAFT**





# Foreword

Every day our health workforce provides essential services to children and young people across Tasmania.

From bringing new life into the world and aiding those precious first moments, to providing life-changing treatment, care, and support, our staff and volunteers are there every step of the way.

Working alongside families and caregivers to make a difference in the lives of children and young people is a privilege; ensuring they remain safe from harm is our duty.

While we each have a personal responsibility to uphold the rights of children and young people, it cannot be done alone. That is why the Department of Health is taking a systemic approach to enhance the way we work with children and young people.

Over the coming months, we will be prioritising the implementation of the National Principles for Child Safe Organisations. The National Principles are an ongoing commitment that will allow children and young people to grow and thrive in a health environment that is safe, welcoming, and supportive. This document provides a framework for how this will be done and importantly, how we can each contribute.

The action we take now as Tasmania's health agency will have a profound effect on the current and future generations in our State.

I am calling on each and every one of you to champion the safety and wellbeing of children and young people for a safer, brighter Tasmania.

<signature>

Kathrine Morgan-Wicks

Secretary, Department of Health, Tasmania

Month 2022



# Statement of Commitment

All children and young people have the right to feel and be safe. Keeping children and young people safe is everyone's responsibility.

The Department is committed to improving the way we work with vulnerable people, with a specific focus on children and young people. Children and young people are particularly vulnerable, as they are dependent on adults to care for them, meet their basic needs, and make decisions for them. Adults are in positions of trust, and are responsible for the safety, wellbeing, and empowerment of children and young people. The Department has an opportunity to recognise the signs of harm to children and young people and respond accordingly, whether working directly with them or with their parents or caregivers.

The Department recognises that while all children and young people are vulnerable, some face additional risk of harm. The Department is committed to meeting the diverse needs and ensuring the cultural safety of:

- Aboriginal and Torres Strait Islander children and young people
- children and young people from culturally and linguistically diverse (CALD) backgrounds
- children and young people who are unable to live at home
- children and young people with disability
- lesbian, gay, bisexual, transgender, gender diverse, intersex, queer, asexual and questioning (LGBTIQA+) children and young people.

The Department will put in place strategies and actions to promote child safety and wellbeing, empower, and prevent harm to children and young people. It will work towards an environment where children and young people feel safe and are safe, have their voices heard, and are involved in the decisions that affect their lives.

Signed by Health Executive



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# Executive summary

The National Principles for Child Safe Organisations (the National Principles) were endorsed by the Council of Australian Governments in February 2019. [1]

The Child Safety and Wellbeing Framework for Implementing the National Principles for Child Safe Organisations (the Framework) establishes a systemic approach to enhance the way the Department of Health (the Department) works with vulnerable people, specifically children and young people.

The Framework:

- ensures that structures, systems, and processes are in place to mandate and foster a child safe organisation and child safe culture. It recognises that effective leadership and governance must be embedded at all levels of the organisation to successfully foster this culture.
- establishes the National Principles as key priorities to be embedded into the Department's child safe approach. The National Principles set out a nationally consistent rights-based approach to creating an organisational culture that fosters child safety and wellbeing. [2]
- applies to the entire Department, as well as organisations funded by the Department. While the operational practicalities of a child safe approach may differ across services, all services must uphold the Department's commitment to child safety and wellbeing. The Framework recognises that this commitment is an obligation of both the individual and the organisation and is a shared responsibility at all levels.
- details the responsibility and requirements to be met by all people engaged by the Department in protecting the health, safety, welfare, and wellbeing of children and young people. All workers must act in accordance with their legal obligations and relevant statutory directions, and the Department's child safe policies, frameworks, guidelines, and procedures.



# About the Framework

The Framework was developed as part of the Department's response to implementing the National Principles. Organisation-wide implementation will provide the Department with the tools to contribute to the safety and wellbeing of children and young people, meeting their specific needs, rights, and interests within a child safe culture.

The Framework provides a common understanding of child safety and wellbeing and ensures that children and young people's voices are heard, and that they and their families and caregivers are involved in the decisions affecting them.

The Department's existing safety and quality principles and practice lay a strong foundation for the promotion and protection of the safety and wellbeing children and young people. The implementation of the National Principles requires a specific child-focused methodology to be applied to the Department's existing approach to meeting the National Safety and Quality Health Service (NSQHS) Standards against which it is assessed and accredited. [3] They assist to provide a nationally consistent rights-based approach to creating organisational cultures that foster child safety and wellbeing.

The National Principles reflect a broad scope that spans beyond child sexual abuse to cover children and young people's rights and other forms of potential harm. They are intended to guide institutions to be child safe by setting out nationally agreed good practice, based on best available evidence. The principles also set benchmarks to assess an organisation's child safe capacity, and a structured framework to assess, and minimise or mitigate, the risks that contribute to institutional child abuse. [4] [5]

The National Principles outline at a high level the 10 elements that are fundamental for making an organisation safe for children and young people.

The National Principles are: [2]

- 1 Child safety and wellbeing is embedded in organisational leadership, governance and culture.
- 2 Children and young people are informed about their rights, participate in decisions affecting them and are taken seriously.
- 3 Families and communities are informed and involved in promoting child safety and wellbeing.
- 4 Equity is upheld and diverse needs respected in policy and practice.
- 5 People working with children and young people are suitable and supported to reflect child safety and wellbeing values in practice.
- 6 Processes to respond to complaints and concerns are child focused.
- 7 Staff and volunteers are equipped with the knowledge, skills and awareness to keep children and young people safe through ongoing education and training.
- 8 Physical and online environments promote safety and wellbeing while minimising the opportunity for children and young people to be harmed.
- 9 Implementation of the national child safe principles is regularly reviewed and improved.
- 10 Policies and procedures document how the organisation is safe for children and young people.



# How does the Framework help?

The Framework establishes a formal rights-based approach to child safety and wellbeing. It enables the Department to demonstrate to consumers, the community, government, and peers that it is accountable for the safety and wellbeing of children and young people.

The Framework outlines the commitment of the Department to the promotion of child rights, safety and wellbeing, and the prevention of harm to children and young people. Critically, it demonstrates a commitment to the empowerment of children and young people as active participants in the institutions which are a part of their lives. The Framework supports the achievement of a culture that promotes child wellbeing and prevents harm to children and young people.

It articulates the professional and legal responsibilities that employees, consultants, contractors, and

volunteers (workers) engaged by the Department must follow, whether directly or indirectly involved with children and young people to provide a child safe culture where children and young people feel safe and are safe, and able to actively participate in the decisions that affect their lives.

The Framework guides and informs workers on safe ways to behave, interact and engage with children and young people. It also references the tools, and resources available and the interagency arrangements in place to assist workers to meet their responsibilities. The Framework aims to ensure a consistent and best practice Departmental approach that promotes the health, safety, empowerment, and wellbeing of children and young people in accordance with the guidance and obligations as referred to throughout.

## Aim

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The Framework aims to empower and improve the wellbeing of children and young people, their families and caregivers, ensuring equitable, inclusive practice. It pays particular attention to groups of children and young people for whom equity and inclusion is a particularly critical safeguard, including:

- Aboriginal and Torres Strait Islander children and young people
- children and young people from culturally and linguistically diverse backgrounds
- children and young people who are unable to live at home
- children and young people with disability
- Lesbian, gay, bisexual, transgender, gender diverse, intersex, queer, asexual and questioning (LGBTIQ+) children and young people.

It aims to minimise any risks that may impact the safety and wellbeing of children and young people

and strengthens the Department's capacity to detect and respond effectively to harm in line with the principles of trauma-informed care. [6] [7]

The Framework:

- promotes a child safe culture where the Department works collectively to improve the safety and wellbeing of all children and young people in its care
- enables the Department to empower and better anticipate the diverse needs of children, young people, their families and caregivers and universally adapt environments, communication and ways of working to ensure equitable, inclusive practice
- outlines the requirements the Department must meet in relation to the National Principles,



- statutory obligations, and relevant standards and accreditation processes
- details structures, systems, and processes that enable compliance with the principles and accountability for child safety and wellbeing to be demonstrated, and
- requires prevention and risk mitigation strategies, monitoring and continuous quality improvement systems and processes to be embedded and supported at all levels to improve the wellbeing of children and young people.

## Scope

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The Framework applies to all services provided by the Department, and funded by the Department

(including those delivered by community service organisations (CSOs).

## Concepts

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### Safeguarding children and young people

Safeguarding children and young people involves the duty of care and responsibility of the Department and its workers to promote the human rights and welfare of children and young people and protect them from harm.

It encompasses the adoption of proactive, preventative, and responsive systems, policies, and practices that ensure that children and young people do not come to harm as a result of any direct or indirect contact with the Department. [8] [9]

### Child and youth wellbeing

The *Tasmanian Child and Youth Wellbeing Framework*, developed in partnership with people who work with children, young people, and their families, defines wellbeing as:

‘... the state where a child or young person feels loved and safe; has access to material basics; has their physical, mental and emotional health needs met; is learning and participating; and has a positive sense of culture and identity.’ [10]

Tasmania’s definition of wellbeing is based on six domains inspired by The Nest, a national evidence-based initiative on child and youth wellbeing developed by the Australian Research Alliance for Children and Youth (ARACY). [11]

### Safeguarding concerns to children and young people

The Department considers a safeguarding concern to children and young people to encompass any actual or potential harm, loss or damage to any child or young person’s rights, or psychological, physical, or cultural safety and welfare.

Concerns may arise from any event, circumstance, act, or omission that may have occurred while they were accessing, visiting, or receiving health services, or where a duty of care is owed.

A safeguarding concern to a child or young person does not include harm, loss or damage resulting from safety events in the course of evidence-based service provision or clinical care in line with accepted norms or from the normal or expected progression of their clinical condition.



# Document background and structure

## Document background

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This Framework underpins a range of child safe policies, protocols and guidelines set out in the Department's child safe approach. It describes the components and requirements of the National Principles, and how each requirement enables the Department to assure the public and the government that the organisation provides a child safe service to the Tasmanian community.

The Department acknowledges the significant contributions of everyone involved in the development of the Framework. The contributions of all involved have helped and continue to help shape a health environment that is dedicated to the protection of the rights, safety, and wellbeing of all children and young people.

## Structure

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The requirements of the National Principles are included throughout the document. They are

The relevant section provides the linkage between the National Principles and the actions that the

reflected in a tabled snapshot of each principle that leads into each document section.

Department will take, and already has in place, to meet the requirements of each Principle.

## Context

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Integral to compliance with this Framework is an understanding and application of whole-of-government and inter-agency requirements and strategic priorities that relate to the Department's child safety and wellbeing approach.

This Framework is informed by and must be read and implemented parallel to national and best practice standards, regulatory, legislative, and statutory requirements, including but not limited to those mentioned throughout this document.

The Framework is supported by:

- a set of supporting policies, protocols and guidelines that are specific to the Department's child safe approach
- national and best practice standards, regulatory, legislative, and statutory requirements, and
- existing policies and protocols that are accessible to staff within the Department's Strategic Document Management System.

This Framework is a dynamic document. Continuing codesign, co-development, evaluation and feedback will be used to refine this Framework over time.



# Child Safety and Wellbeing Principles

## I Leadership, governance and culture

*All adults should do what is best for children and young people. When adults make decisions, they should think about how their decisions will affect children and young people. (Convention on the Rights of the Child, Article 3) [12]*

Table 1. Snapshot of Leadership, governance, and culture

### National Principle I: Child safety and wellbeing is embedded in organisational leadership, governance, and culture



- 1.1 The organisation makes a public commitment to child safety.
- 1.2 A child safe culture is championed and modelled at all levels of the organisation from the top down and the bottom up.
- 1.3 Governance arrangements facilitate implementation of the child safety and wellbeing policy at all levels.
- 1.4 A Code of Conduct provides guidelines for staff and volunteers on expected behavioural standards and responsibilities.
- 1.5 Risk management strategies focus on preventing, identifying and mitigating risks to children and young people.
- 1.6 Staff and volunteers understand their obligations on information sharing and recordkeeping. [2]

## Child safe culture

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The National Principles require that a child safe organisation creates a culture, adopts strategies, and takes action to promote child and youth wellbeing and prevent harm to children and young people.

A child safe organisation consciously and systematically:

- creates an environment where children's rights, safety, and wellbeing are at the centre of thought, values, and actions
- emphasises engagement with, and valuing of, children and young people to create conditions that reduce the likelihood of harm
- creates conditions that increase the likelihood of identifying potential harm, and
- responds to concerns, disclosures, allegations, or suspicions.

A child safe culture encompasses the creation, adoption, and realisation of culture, strategies, and actions to promote child wellbeing and prevent harm to children and young people.

Implementing the National Principles will ensure the Department's approach to child safety, rights and wellbeing is underpinned by the following principles:

- the safety and wellbeing of children and young people is everyone's priority
- an organisational culture of openness supports all persons to safely disclose risks of harm to children and young people
- any child or young person harmed while receiving care or services receives appropriate care and support as well as an honest and open explanation of what happened, why it happened and what actions have and will be taken as a result
- safeguarding concerns are managed within a supportive, learning-based environment with a primary focus on child safety and wellbeing, a child safe culture, and continuous system improvement
- the organisational culture remains open and aware to the risks of harm to children and young people by other children and young people, including harmful sexual behaviour
- appropriate rigour is applied when investigating safeguarding concerns, ensuring any human error, systemic factors, misconduct, and intentional harm contributing to these concerns are properly analysed and understood so that effective strategies to eliminate or reduce risk, reoccurrence, or harm can be implemented, and that instances of misconduct and intentional harm are addressed accordingly
- the principles of trauma-informed care are applied to the management of safeguarding concerns involving children and young people
- an accessible, centralised, single system is established to raise, report on, assess, classify, and appropriately act on safeguarding concerns
- lessons learned from safeguarding concerns are shared throughout Tasmania's publicly funded health service system to reduce risk and improve quality of care and services provided to children and young people
- the diversity of children and young people is recognised, and their right to receive care and be informed in a way that is respectful of



- culture, beliefs, values, and language is embedded in organisational leadership, governance, policy, practice, and culture
- children and young people will receive equal access to care and be treated with respect, irrespective of geographic location, socioeconomic status, ethnicity, age, gender, sexual orientation, disability, religious views, health literacy levels, or other individual differences
  - children, young people, their families, and caregivers are aware of their rights, will be valued, supported, and encouraged to participate in decisions about their own health care, along with contributing to decision making about the Department's health care service
  - the increasing competency of children and young people to make decisions about the things that affect their lives is acknowledged
  - child and youth wellbeing is visible within consumer engagement and experience practices, and workers are supported, confident and competent in communicating and engaging with children and young people in a safe, transparent, inclusive, and empowering way
  - workers are supported through ongoing education, training, and functional systems to know, understand, and practice child safe behaviours and boundaries with confidence and competence
  - implementation of the National Principles is regularly monitored, reviewed, and improved, including continuous quality improvement in promoting the safety of children, reducing risk, preventing abuse, and responding to allegations of child abuse, and
  - organisations that receive funding from the Department for child-related work have implemented the National Principles.

## Governance structure

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Protecting children and young people and creating an inclusive and welcoming environment where they feel respected, valued, and empowered to reach their full potential is a Departmental priority.

The Department has a clear governance framework for the safeguarding of children and young people.

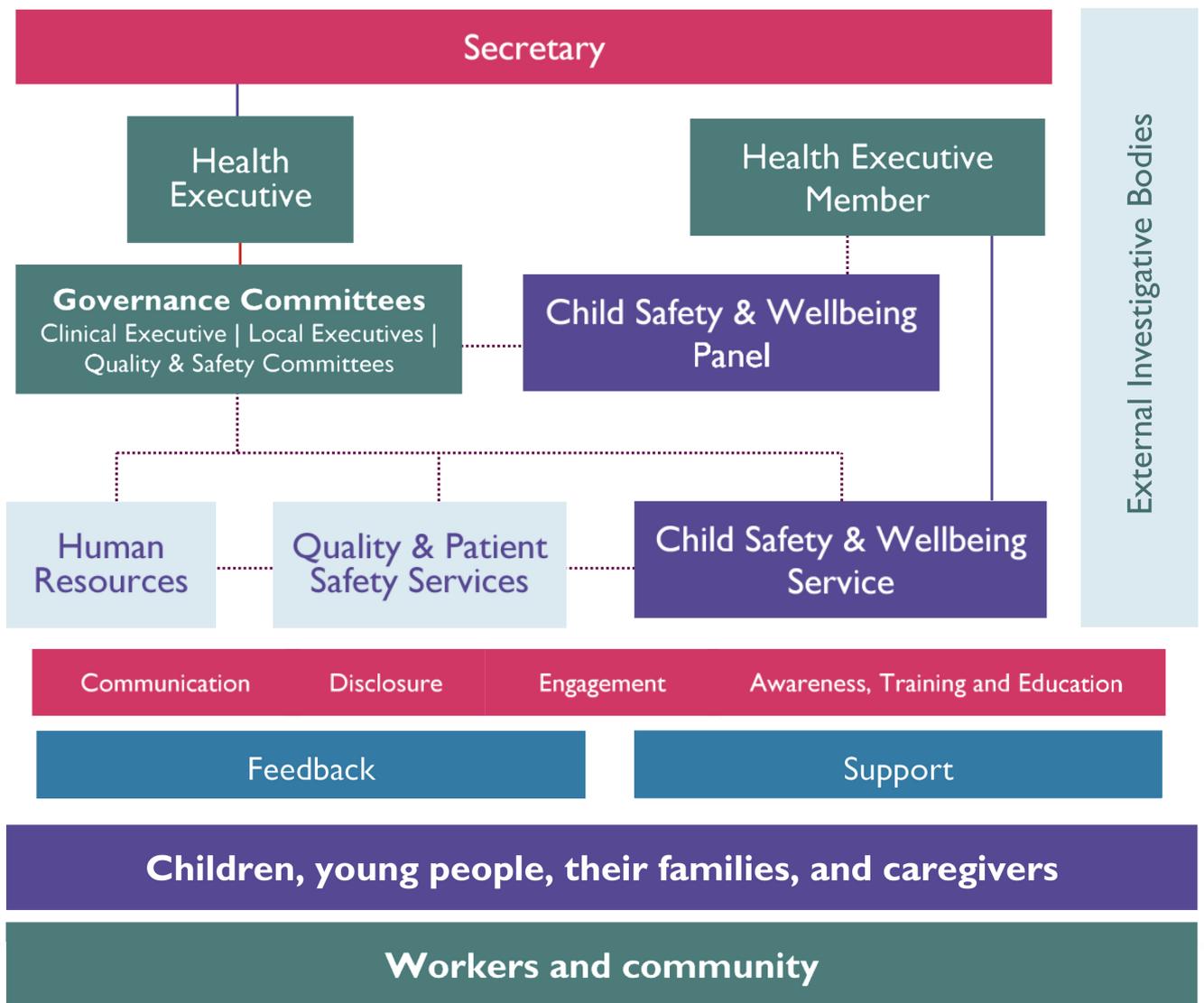
A child safe culture is developed and maintained through proactive leadership and adoption at all levels.

The policies, procedures and practices of the Department demonstrate that child safety and

wellbeing is paramount in delivering quality and safe services to the Tasmanian community.

The governance arrangements within the Department that relate to child safety and wellbeing are represented in Figure XXX below.





## Roles and responsibilities

The commitment to child safety and wellbeing is a shared responsibility at all levels.

All workers have a responsibility to protect the health, safety, welfare, and wellbeing of children and young people with whom they have contact in addition to mandatory statutory reporting obligations.

All workers must act in accordance with their legal obligations and relevant statutory directions, and the Department's child safe policies, frameworks, guidelines, and procedures.

Appendix 1 outlines how workers can contribute to upholding the National Principles based on the

Australian Human Rights Commission training resources.

The Department's leadership is responsible for championing a child safe culture through modelling and reinforcing behaviour that encourages the respectful and positive engagement with children, young people, their families, and caregivers.

The Department's consumer engagement processes will provide an important avenue for children, young people, their families, and caregivers to offer their input into the way the Department approaches child safety and wellbeing.

Other specific roles and responsibilities are named in the Department's child safety and wellbeing policies, guidelines, and procedures.



## *Roles and responsibilities in the management of safeguarding concerns involving children and young people*

The Department's child and young person safeguarding concern management process is administered by the following personnel or their delegates:

### **Secretary**

The Secretary of the Department is responsible for overseeing that:

- appropriate systems, structures, and policies are in place to appropriately safeguard children and young people accessing public health services
- systems are in place for recording and responding to all child safeguarding concerns, and
- serious child safeguarding concerns are managed appropriately.

### **Child Safety and Wellbeing Panel**

The Child Safety and Wellbeing Panel will be an independent panel of expert and impartial members with experience and understanding of child safety and wellbeing.

The roles and responsibilities of the Child Safety and Wellbeing Panel will be advisory in nature. The general scope of the Child Safety and Wellbeing Panel is to:

- analyse and assess child safeguarding concerns referred by the Secretary
- conduct research, reviews, inspections, or evaluations to inform independent advice and evidence-based solutions to the Secretary to assist the Department in decision-making in relation to child safety and wellbeing

- advise the Secretary on options for quality improvement in structures, systems, processes, and tools in relation to child safety and wellbeing
- advise the Secretary on options for systematic management of learnings in relation to child safety and wellbeing
- identify systemic and/or recurrent systems issues or trends occurring across the Department
- advise the Secretary in relation to appropriate escalation of risks relating to trends identified through the review of investigation findings
- monitor the implementation of recommendations originating from incident management processes, and
- recommend system improvements and risk avoidance and mitigation strategies for adoption.

### **Child Safety and Wellbeing Service**

The Child Safety and Wellbeing Service will be a Departmental unit with experience and understanding of child safety and wellbeing.

The roles and responsibilities of the Child Safety and Wellbeing Service will be both operational and advisory in nature. The general scope of the Child Safety and Wellbeing Service is to:

- monitor, review, assess and act in relation to reported safeguarding concerns
- document and assign actions, communications, outcomes, and recommendations related to a safeguarding concern and monitor implementation
- identify trends, patterns and systemic weaknesses and undertake quality improvement, training, education, and awareness activities



- identify opportunities for improvement and liaise with services to initiate action to mitigate current and/or future risk of harm to children and young people
- maintain the Department's child safety and wellbeing approach, including undertaking long-term research to better inform policies and procedures, and
- coordinate open disclosure processes, feedback protocols, external reporting requirements, and support functions.

## Code of conduct

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The Department employs a vast portfolio of workers with a range of professional and employment obligations.

The *State Service Act 2000* (Tas) and contained Code of Conduct and Principles provide an outline of minimum standards of behaviour and conduct that apply to workers. [13]

Behavioural standards and conduct towards children and young people are detailed in a range of discipline specific and interdisciplinary professional and

employment standards. These standards and codes provide direction, boundaries, and benchmarks for practice.

Codes are not a substitute for the provisions of legislation and statutory direction. If there is conflict between these codes and standards and the law, the law takes precedence.

## Duty of care

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Workers have a duty of care to support and protect the safety and wellbeing of children and young people accessing the Department's services or facilities.

This duty of care requires workers to avoid acts or omissions which could be reasonably foreseen to injure or harm children and young people. This includes the anticipation of risks and taking action to prevent harm.

This duty is determined through common law, *Criminal Code Act 1924* (Tas), *Civil Liability Act 2002* (Tas), *Wrongs Act 1954* (Tas), and other legislation specific to each circumstance. [14] [15] [16]



## Professional boundaries

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Professional boundaries are integral to workers establishing and maintaining healthy relationships with children, young people, their families, and caregivers. They promote optimal care for patients and protect everyone involved.

Workers must ensure the care, response, treatment, and support provided to children and young people remain within the parameters of their professional boundaries.

Professional boundaries are set by legal, ethical, and organisational frameworks to maintain a safe environment for both children and young people and workers. They are grounded in a clearly articulated ethical framework that comprises four central principles: [17]

- beneficence (of always doing good for the patient)
- non-maleficence (of avoiding doing harm)
- respect for patient autonomy as a decision-making individual, and
- justice (treating everyone equally).

The Department's child safety and wellbeing practice guidance will support workers to understand and practice safe behaviours when providing care and provides clear definition around appropriate relationships and professional boundaries between workers and children and young people.

## Risk management

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Risk management is the combination of culture, systems, and processes undertaken by an organisation to coordinate the identification and management of risk. Risk management activities inform decision-making and support the achievement of objectives and prevention of harm. [18] [19]

The Department's risk management framework outlines its approach to risk management, and aims to improve decision-making, accountability, and outcomes by embedding effective risk management into practice.

Risks to children and young people will be identified, assessed, treated, and monitored in accordance with the Department's risk management framework.

Risks can take many forms, including environmental, operational, and cultural. They will vary across service types and changeover time, requiring routine, ongoing

review of child safety and wellbeing risks within a culture of continuous quality improvement. [20]

Risk management and mitigation is a core component of the Department's continuous quality improvement approach to child safety and wellbeing.

The Department will facilitate the identification of strategies to improve each business area's approach to fostering a child safe culture to address identified risks through child safety and wellbeing risk management plans and its child safe policies, procedures, protocols, and guidelines.

The Department will develop and enhance risk management tools to support the identification, assessment, and ongoing management of new and existing risks relating to child safety and wellbeing. Risk management plans will focus on identifying,

preventing, and lowering risks to children and young people. They will also identify factors and practices that disempower and/or increase the risk of harm to children and young people and describe how to respond to them, ensuring that the outcomes of a risk assessment, and identified areas for improvement are progressed and implemented in a timely manner.

The Department's consumer engagement processes will provide an important avenue for children, young people, their families, and caregivers to offer their input into the identification and management of risks to children and young people.

Feedback to children, young people, their families, and caregivers about the measures the Department will take to reduce risks as they are identified will be developed in a range of inclusive, accessible formats.

## Information sharing and recordkeeping

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There is an important balance between an individual's right to privacy and adequate information sharing to provide optimal care as well as protect children and young people from harm.

Information sharing between organisations and relevant personnel is necessary to facilitate decision-making, assessments, and service provision relating to the safety, welfare and wellbeing of children and young people, and to identify, prevent, and respond to concerns and risks effectively and in a timely manner.

When information is not shared effectively or within appropriate timeframes, it can enable the continuation of harm and ongoing risks to children and young people within the Department as well as within other organisations and jurisdictions. It can also compromise the safety and wellbeing of other children and young people.

Personal information sharing is restricted by obligations under privacy legislation, confidentiality, or secrecy provisions in legislation. The Department operates in accordance with the *Right to Information Act 2009* (Tas) and *Personal Information Act 2004* (Tas) when accessing records and disclosing information. Access is granted in accordance with the law, and the Department observes any requirements to withhold or redact information when necessary. [21] [22]

The Department has a duty to facilitate child safety and wellbeing through appropriate and proactive information sharing with police, statutory authorities, and other Government agencies.



Information sharing is mandated between the Department, Tasmania Police, and the Department of Justice by the *Registration to Work with Vulnerable People Act 2013* (Tas) and is critical to managing the status of worker registrations and, in turn, their engagement with the Department. [23]

The Department is committed to promoting awareness of the right those who have experienced harm to access and request amendment of records containing information relating to them. Complaints concerning information sharing legislation and any decisions made in accordance with them are managed by the Ombudsman Tasmania.

The Personal Information Protection Principles allow information to be shared in certain circumstances. [24][25] It is important that workers are aware of their information sharing responsibilities.

In general, information may be shared when:

- consent is provided from the person the information pertains to or the person legally responsible for them
- there is a significant risk of serious harm or danger if the information is not shared, and

- there is a legal requirement or authorisation to disclose the information.

The Department observes sound recordkeeping principles and practices to effectively identify, prevent, and respond to harm to children and young people in a timely manner. Accurate and unobtrusive records and recordkeeping processes play a role in reducing distress and trauma to those who have experienced harm. They also increase organisational accountability to the safety, wellbeing, and protection of those who are documented in them. [26]

The Department is committed to creating and maintaining quality records regarding child safety and wellbeing. Workers understand their obligations through the Department's records and information management policies, procedures and training resources. The Framework and supporting resources outline specific recordkeeping requirements in relation to the safety and wellbeing of children and young people.

Records relevant to child safety and wellbeing are disposed of in accordance with the Department's policies and procedures and are subject to minimum retention periods that allow for delayed disclosure and consider limitation periods for civil actions in accordance with the *Limitation Act 1974* (Tas). [27]



# 2

## Empowering children and young people

*Children and young people have the right to give their opinion, and for adults to listen and take it seriously. (Convention on the Rights of the Child, Article 12) [12]*

Table 2. Snapshot of Empowering children and young people to participate

### National Principle 2 Children and young people are informed about their rights, participate in decisions affecting them and are taken seriously



- 2.1 Children and young people are informed about all of their rights, including to safety, information, and participation.
- 2.2 The importance of friendships is recognised and support from peers is encouraged, to help children and young people feel safe and be less isolated.
- 2.3 Where relevant to the setting or context, children may be offered access to sexual abuse prevention programs and to relevant related information in an age-appropriate way.
- 2.4 Staff and volunteers are attuned to signs of harm and facilitate child-friendly ways for children to express their views, participate in decision-making and raise their concerns. [6]

# Framework rights

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The Department is committed to the safety, participation, and empowerment of children and young people.

The Department will foster a culture that supports and empowers children and young people to understand what child safety and wellbeing means. They will be informed about their rights and responsibilities and supported to access inclusive, age-appropriate information and resources. [6]

The Department upholds the rights of children and young people and acknowledges the growing autonomy of each child and young person as they develop. It endeavours to demonstrate the following rights in all aspects of care, which are based upon and adapted from:

- Australian Charter of Healthcare Rights [28]
- United Nations Convention on the Rights of the Child [12]
- Charter on the Rights of Children and Young People in Healthcare Services in Australia [29]
- Tasmanian Charter of Health Rights and Responsibilities [30]

## Child-focused

- We will consider the best interests of children and young people as a primary concern in all aspects of care.

## Access to quality care

- We will strive to provide care that meets the needs of children and young people, is safe, well-planned, and continuous, and lives up to national standards.
- We will empower children, young people, their families, and caregivers to participate in all

aspects of care, without being disadvantaged due to illness, disability, or other personal circumstances.

## Safe and supported

- We will keep children and young people safe from all forms of harm and care for them in an environment that is safe and makes them feel safe.
- We will provide every child and young person the opportunity to access and experience the support of their family or caregiver when receiving care.

## Respectful care

- We will treat children and young people as whole people, and respect the individual characteristics, culture, identity, beliefs and choices of themselves, their families, and caregivers.

## Participation and partnerships

- We will encourage and empower every child, young person, their family, or caregiver to ask questions and participate in decision-making about the things that affect them, including the care they receive.
- We are open and honest in our communication, and are transparent with every child, young person, their family, or caregiver about when their care does not go to plan, why it has not, and what steps will be taken to



minimise the risk of similar events occurring again.

## Right to information

- We will support every child, young person, their family, or caregiver to understand their rights and provide them with the opportunity to give informed consent/assent.
- We will provide every child, young person, their family, or caregiver with clear and understandable information and support them to access assistance to help them understand and use the information when they need it.

## Privacy

- We will respect the privacy of every child, young person, their family, or caregiver and keep their information secure and confidential, including where required to share information with other services to protect their safety and wellbeing.<sup>1</sup>

## Feedback and improvement

- We will listen to the voice of and take seriously the feedback and concerns of every child, young person, their family, or caregiver, and address these in a timely, transparent way to improve the quality of our care.

# Children's rights in a healthcare environment

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The Department is committed to upholding and promoting the rights of children when accessing healthcare.

The Department will uphold the following charters when providing services and working with children and young people:

- Australian Charter of Healthcare Rights
- Charter on the Rights of Children and Young People in Healthcare Services in Australia, and
- Tasmanian Charter of Health Rights and Responsibilities.

Whilst all the rights within these charters are equally important, there are certain rights that are of particular note in respect of the Department's

approach to the safety and wellbeing of children and young people in a healthcare environment.

The Department specifically acknowledges the right of children and young people to 'receive health services free from physical intimacy unrelated to the health service or medical treatment.' This right is outlined within the *Tasmanian Charter of Health Rights and Responsibilities* as prescribed under the *Health Complaints Act 1995* (Tas). Workers must understand and act in accordance with their obligation to only engage in physical contact that is

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<sup>1</sup> Confidentiality and privacy are limited in circumstances where Department workers believe, suspect or know that a child or young person is being abused or neglected. As part of their engagement

with the Department of Health, workers have a duty of care to report any concerns about the safety and wellbeing of children and young people.



clinically necessitated and in line with evidence-based best practice care. [30] [32]

## Children's wellbeing

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The Department observes the following principles from the Tasmanian Government's *It Takes a Tasmanian Village: Child and Youth Wellbeing Strategy*. [31]

- Acknowledging that the family and extended family of the child has the primary responsibility for the care, upbringing and development of their child/children and to provide them with information to access available services which will assist in providing a nurturing environment for their children.
- Providing opportunities for Tasmanian Aboriginal children and young people to connect to community and country and working in partnership with Tasmanian Aboriginal people to ensure life outcomes for Tasmanian Aboriginal children and young people are equal to all Tasmanian children and youth.
- Understanding the varying relationships that influence each child and young person we work with.
- Providing the opportunity for, and supporting, children and young people to have a voice in decisions that affect them.
- Providing a range of education and training opportunities to ensure children and young people can participate in life-long learning and employment.
- Recognising the individuality of children and young people and treating them without discrimination and with respect.
- Providing children and young people opportunities to explore topics that interest them in a manner that supports learning and reduces anxiety.
- Providing a range of recreational and social opportunities for children and young people in the areas in which they live.
- Fulfilling our preventative and statutory responsibilities against all forms of violence against children and young people.
- Supporting positive mental and physical health outcomes for children and young people in a way that aligns with the Government's Tasmania Statement on Working Together for the Health and Wellbeing of all Tasmanians.

## Engagement and participation

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The Department seeks to ensure that children and young people contribute to and actively participate in building an organisational culture that is safe for them. It is vital that children and young people are aware



## of the ways in which they can engage with the Department and participate in decision-making to the greatest possible extent.

Information and resources will be developed in a range of inclusive, accessible formats that can be understood and used by all children and young people. Children and young people will be supported to recognise safe environments, understand protective strategies, and feel comfortable participating in decisions and communicating their views and concerns. The Department upholds the right of children and young people to make their own decisions as appropriate to their stage of development.

The Partnering with Consumers Standard of the NSQHS Standards recognises the importance of involving patients in their own care and providing clear communication to patients. [33] [3]

Enabling children, young people, their families, and caregivers to express their views and participate in decisions that affect their lives is viewed as integral to the development, implementation and evaluation of health policies, programs, and services.

The Department is committed to genuine consultation with children and young people to understand when they feel safe and what makes them feel unsafe. Children and young people are more likely to speak up about issues of safety and wellbeing when they feel respected, valued, and empowered.

Communicating effectively and transparently helps children and young people to understand how the Department ensures their safety and wellbeing, and to seek their feedback into these processes.

Partnering with children, young people, their families, and caregivers is a pillar of person-centred care and recognises that trust, mutual respect, and sharing of knowledge are needed for the best health outcomes. [3]

The Department will engage with children, young people, their families, and caregivers to embed their contributions and representation in:

- feedback on how to improve services
- governance and advisory committees
- consumer engagement approaches
- consumer complaints and concerns processes
- risk management processes
- professional guidance around acceptable and safe behaviour and conduct
- the organisation of projects and events, and
- resources to support and educate children, young people, their families, and caregivers.

### Approach to consumer engagement with children and young people

The Tasmanian Government's statewide consumer engagement framework will provide an overarching practical, principled and evidence-based approach to engagement. It will aim to improve the coordination and consistency of consumer engagement, whilst encouraging creative and innovative approaches. [34]

The Department's Consumer and Community Engagement Model of Care is informed by change and empowerment theories and is underpinned by the Consumer and Community Engagement Principles. It ensures the views, advice, input and involvement of consumers and the broader community are sought and integrated into the design, planning, delivery and evaluation of health services. [35] [36]

Best practice guidance builds the capacity of the Department to engage effectively with children and young people. It supports the development of meaningful approaches to planning, facilitating, and



evaluating engagement with children and young people. [37] [38]

The Department observes the guiding principles that characterise effective and genuine participation as outlined by the Commissioner for Children and Young People Tasmania: [39]

- issues are real and relevant to children themselves
- capacity to make a difference (where possible long term or organisational change)
- links to children direct day-to-day experience
- adequate time and resources made available
- realistic expectations of children
- clear goals and targets agreed with children, and
- address the promotion or protection of children's rights.

## Engagement values

- honesty from adults about the issue and the process
- inclusive – equal opportunity for participation by all
- inclusive – equal opportunity for participation by all groups of interested children
- equal respect for children of all ages, abilities, ethnicity, social background, gender and sexual orientation
- information is shared with the children to enable them to make real choices
- children's views are taken seriously
- voluntary nature of children's involvement, and
- decision-making is shared.

## Engagement methodology

- clarity of purpose

- child-friendly meeting places, language, and structures
- involvement of children from the earliest possible stages
- training provided to help children acquire necessary skills
- methods of involvement developed in collaboration with children
- adult support provided where needed, and
- strategy developed for sustainability.

## Engagement mechanisms

The Department will have a range of consumer engagement mechanisms that provide children and young people with opportunities for engagement and participation.

The Department's Consumer and Community Engagement Council (CCEC) facilitates consumer representation for a range of health-related committees, projects, and working parties through its networks of consumer groups, trained volunteers, and consumer representatives.

The CCEC represents a cross section of the community and provides the opportunity for a variety of people to have a say about how health services could be delivered to improve patient outcomes.

The Department's Statewide Consumer Advisory Panel convenes quarterly with the Secretary and the chairs of the CCEC.

The Department's Statewide Health Senate will provide strategic clinical evidence-based advice and build strong clinical leadership to help guide health service planning in Tasmania. [40]



# Communication

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The Department seeks to ensure that children, young people, their families, and caregivers understand its commitment to child safety and wellbeing.

Its child safe approach, policies, and resources will be made publicly available, in clear, accessible, and age-appropriate formats. Workers will have a sound knowledge of the rights of children and young people, and the accountabilities that accompany those rights.

The Department's child safe approach:

- creates an environment that is inclusive and safe, enabling, empowering children and young people to speak up if they feel unsafe and to express their views, concerns, and queries
- acknowledges the strengths and abilities of children and young people, supporting them to participate to the best possible extent regardless of their abilities, sex, gender, or social, economic, or cultural background
- models and champions the empowerment and participation of children and young people through all levels of the organisation, including executive and senior leadership
- facilitates and supports workers to empower and engage with children and young people, encouraging their participation, and
- encourages the active dissemination and promotion of accessible, age-appropriate information and resources detailing the rights of children and young people.

The Department's child safe approach and associated resources will support children, young people, their families, and caregivers to understand the organisation's commitment to child safety and

wellbeing and provide access to education information, including:

- internal and external support services
- complaint processes
- prevention programs, including sexual abuse prevention when relevant
- understanding safety and wellbeing
- rights and the right to safety
- identifying and raising concerns about harm from other children and young people, including harmful sexual behaviour
- opportunities for participation and engagement
- recognising safe environments
- understanding protective strategies, and
- their roles and responsibilities in helping to ensure the safety and wellbeing of their peers.

The Department will provide age-appropriate platforms to regularly seek the views of children, young people, their families, and caregivers and encourage their participation in decision-making. Opportunities for participation will be documented and regularly reviewed.

Workers will be supported to assist children, young people, their families, and caregivers to access, understand and use these services through ongoing guidance, education, and training.

The Department commits to ensuring its child safe approach is communicated through:

- the Department's public website
- the Department's Intranet



- recruitment and induction processes
- training and education related to child safety and wellbeing, and
- age-appropriate and health literate formats for children, young people, their families, and caregivers.



# 3

## Involving family and community

*Families and caregivers have the responsibility to help children and young people learn to exercise their rights, and to ensure that their rights are protected. (Convention on the Rights of the Child, Article 5) [12]*

Table 3. Snapshot of Involving family and community

### National Principle 3 Families and communities are informed, and involved in promoting child safety



- 3.1 Families participate in decisions affecting their child.
- 3.2 The organisation engages and openly communicates with families and the community about its child safe approach and relevant information is accessible.
- 3.3 Families and communities have a say in the development and review of the organisation's policies and practices.
- 3.4 Families, carers and the community are informed about the organisation's operations and governance.

## Child-focused care

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The Department is committed to protecting the best interests of children and young people by respecting and facilitating the role of families and caregivers.

The Department observes Article 18 of the *United Nations Convention on the Rights of the Child*, which states that:

'Parents, carers or significant others with caring responsibilities have the primary responsibility for the upbringing and development of their child. This includes being informed about the organisation's operations and their children's progress and being involved in decisions affecting their children.' [12]

The *Children, Young Persons and Their Families Act 1997* (Tas) also recognises the role of the family and caregiver as best placed to provide care for children and young people, stating:

'The family [or caregiver] or a child [or young person] has the primary responsibility for the care, upbringing, and development of the child [or young person] and is entitled to be treated with respect at all times. [41]

The role of the Department is to provide high-quality care to children and young people while encouraging and partnering with families and caregivers to fulfil their role in protecting and supporting them.

Families and caregivers have the primary responsibility for the upbringing of their children and young people and have in-depth knowledge of the most appropriate support networks and the roles that each person plays in a child or young person's life. They are best placed to provide advice about the

needs, capabilities and supports that a child or young person requires when engaging with the Department.

The Department recognises that some children and young people live apart from their family or caregivers and take a sensitive approach to the rights and roles of any support networks in their lives.

The Department recognises that children and young people are best protected and cared for by their families and caregivers in most circumstances. When these networks are unable to protect children and young people from harm, the Department has a duty of care to take appropriate action to ensure their safety and wellbeing.

The Department aims to empower families and caregivers, respecting their right to participate in decisions affecting their lives. The Department seeks contributions from families and caregivers about how to better create safe, supportive environments that value children and young people, respects their culture, identity, and rights, and ensures that these rights are fulfilled.

Families and caregivers will be informed about their responsibility to keep children and young people safe, the Department's approach to child safety and wellbeing, and how they can become more involved in the Department's child safeguarding governance. They will be supported to identify and raise concerns of harm to children and young people.



# Engagement and participation

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The Department aims to engage with children, young people, their families, and caregivers to embed their contributions and representation.

This includes:

- feedback on how to improve services
- governance and advisory committees
- consumer engagement approaches
- consumer complaints and concerns processes
- risk management processes
- professional guidance around acceptable and safe behaviour and conduct
- the organisation of projects and events, and
- resources to support and educate children, young people, their families, and caregivers.

The Department observes the guiding principles that characterise effective and genuine engagement as outlined within its consumer engagement framework: [42]

## Participation

- consumers have the right to participate in their own health, wellbeing, and welfare in a meaningful way. Consumers and community are involved in the design and shaping of policies and decisions relating to the Tasmanian healthcare system.

## People-centred

- meaningful engagement processes embrace the values and the needs of consumers, their families, carers, and the community.

## Mutual respect

- engagement undertaken with mutual respect and valuing each other's experiences and contributions.

## Accessible and inclusive

- consumers and their families are a diverse group. Given this diversity, consumer participation opportunities need to be accessible and inclusive, with flexibility and a range of options for consumer participation. The needs of consumers and community experiencing barriers to service access and engagement are considered

## Partnership

- working relationships between engagement partners are built on transparent and accountable processes which are publicly provided to consumers

## Diversity

- the engagement process values and supports all consumers, carers and community

## Support

- community advisory and engagement councils to take a formal leadership role in ensuring consumers, carers and community are provided with the support they need to engage meaningfully with the health and community services systems



## Influence

- consumers, carers, and community engagement influence policy, planning and system reform

## Continuous improvement

- consumer, carer and community engagement is regularly reviewed and evaluated to drive continuous improvement.

# Decision making

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The Department is committed to promoting a collaborative healthcare environment where children, young people, their families, and caregivers can ask questions, are informed about their options, have their values and preferences heard, and can engage in shared decision making.

The Department's informed consent processes comply with legislation and best practice, and observe the principles outlined within the NSQHS Standards. [43]

In general, Australian law recognises that individuals aged 18 years and over have full legal capacity to make decisions relating to their own health care.

Prior to the age of 18, parents and caregivers can provide consent for children, with the understanding that young people become increasingly competent to

make decisions regarding their own health care and this competency must be observed.

This competency (Gillick competence) is a common law principle that is assessed on an individual basis and depends on a range of factors.

A child or young person is considered to be 'Gillick competent' if they have a 'sufficient understanding and intelligence enabling [them] to understand fully what is being proposed.' It is important to note that the term 'assent' has no legal standing in Australia. [44]

# 4

## Equity upheld and diverse needs respected

*All children and young people have rights, no matter who they are, where they live, what their parents do, what language they speak, what their religion is, their sex or gender, what their culture is, whether they have disability, whether they are rich or poor. (Convention on the Rights of the Child, Article 2.1) [12]*

Table 4. Snapshot of Equity upheld and diverse needs respected

### National Principle 4 Equity is upheld, and diverse needs respected in policy and practice



- 4.1 The organisation, including staff and volunteers, understand children and young people’s diverse circumstances, and provides support and responds to those who are vulnerable.
- 4.2 Children and young people have access to information, support and complaints processes in ways that are culturally safe, accessible and easy to understand.
- 4.3 The organisation pays particular attention to the needs of Aboriginal and Torres Strait Islander children, children with disability, children from culturally and linguistically diverse backgrounds, those who are unable to live at home, and lesbian, gay, bisexual, transgender and intersex children and young people.

## Diversity and inclusion

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Department recognises and acknowledges the diverse circumstances of children and young people, enabling it practice in a more child-centred way that empowers children and young people to participate more effectively.

The Department is focused on ensuring that the culture, values, and behaviours of the organisation enable children, young people, their families, and caregivers to be respected and to have equal access to opportunities and resources.

The Department aims to actively anticipate the diverse circumstances of children and young people and respond effectively to those with additional vulnerabilities through planning for inclusivity. This recognition enables the Department to foster a child-focused environment and empowers children and young people to participate and engage effectively.

Children and young people may face additional risk of harm due to a range of cultural, operational and environmental factors. Vulnerabilities may be brought about by specific contextual factors, such as through societal and organisational cultures that prioritise adult voices over those of children and young people.

Children and young people who face discrimination such as racism, ableism, gender-based violence, misogyny, homophobia, socio-economic disadvantages and exclusion are additionally vulnerable. [45] [46]

The Department is committed to building an organisational culture that acknowledges the strengths and individual characteristics of and embraces all children and young people regardless of their abilities, sex, sexuality, gender, intersex variation, or social, economic, or cultural background. This

culture creates an environment that allows all children and young people to feel safe and comfortable and where services are provided in culturally safe and inclusive ways.

The Department practices cultural competence and inclusivity when working and communicating with children, young people, their families, and caregivers, and acknowledges diverse family systems and approaches to the development of children and young people.

Workers are supported to fulfil their obligations under the following legislation:

- *Anti-Discrimination Act 1998* (Tas) [47]
- *Work Health and Safety Act 2012* (Tas) [48]

The Department recognises that while all children are vulnerable, some children face additional risk of harm. The Department is committed to meeting the diverse needs and ensuring the cultural safety of:

- Aboriginal and Torres Strait Islander children and young people
- children and young people from culturally and linguistically diverse backgrounds
- children and young people who are unable to live at home
- children and young people with disability, and
- LGBTIQ+ children and young people.

The Department will build and sustain strong cross-sectoral relationships with community-led organisations and lived experience to allow the



co-design and co-development of its approach to equity and inclusion.

The Department has specialist teams dedicated to improving health outcomes for individuals, families, and communities, with a focus on children, young people, Aboriginal and Torres Strait Islander people, people from culturally and linguistically diverse backgrounds and other people experiencing poorer health outcomes. These teams work with all levels of government, community sector organisations, youth services, schools, early childhood services, and other stakeholders, and provides advice, resources, and training based on the latest evidence. [49]

The Department works towards improving diversity and inclusion when providing services to all Tasmanians by:

- leading the development of a Tasmanian Implementation Plan for the Cultural Respect Framework for Aboriginal and Torres Strait Islander Health 2016–2026 [50]
- participating in national and state discussions about health policies, programs and priorities that affect priority populations
- analysing information and providing expert advice
- supporting workforce diversity, and
- providing funding to community sector organisations and building capacity within those organisations to deliver results.

Further information regarding the Department's approach to diversity and inclusion is available on the Intranet. [51]

## Aboriginal and Torres Strait Islander children and young people

The Department is committed to improving Aboriginal and Torres Strait Islander cultural respect across Tasmania's healthcare system. [52] [53]

Cultural respect may be defined as the “recognition, protection and continued advancement of the inherent rights, cultures and traditions of Aboriginal and Torres Strait Islander people.” [54] It is achieved when “the health system is safe, accessible and responsive for Aboriginal and Torres Strait Islander people and cultural values, strengths and differences are respected.” [54] [55]

A range of resources are provided to support the delivery of culturally competent and responsive health care for Aboriginal and Torres Strait Islander children and young people. [56]

Ongoing training and education supports workers to achieve cultural competency through e-learning modules, face-to-face sessions, and resources such as webinars and podcasts.

Aboriginal Health Liaison Officers provide emotional, social, and cultural support to Aboriginal and Torres Strait Islander children, young people, their families, and caregivers when they visit hospital.

Further information about the Department's approach to culturally responsive healthcare is available on its website. [57]

## Children and young people from culturally and linguistically diverse backgrounds

The Department strives to provide culturally responsive health care for children and young people from culturally and linguistically diverse backgrounds and provides a range of resources to support this, such as e-learning modules for workers, interpreter services and health literacy resources. [58]

The Department is committed to upholding the values outlined within Tasmania's *Multicultural Policy*, requiring that every child and young person: [59]

- can freely exercise cultural, religious, and linguistic expression



- is treated with respect and dignity, free from discrimination
- has equitable access to affordable Tasmanian Government services
- has the opportunity to achieve financial security
- has an equal opportunity and responsibility to contribute to Tasmanian life, and
- is able to live safely, free from abuse, violence and fear.

## Children and young people who are unable to live at home

The Department observes the National Standards for Out-of-Home Care and works closely with the responsible Government Agency to understand that Department's application to service provision when providing care for children and young people who are unable to live at home. [60]

## Children and young people with disability

The Department observes Article 7 of the *United Nations Convention on the Rights of Persons with Disabilities*, which states:

'[The Department] shall take all necessary measures to ensure the full enjoyment by children with disabilities of all human rights and fundamental freedoms on an equal basis with other children.

In all actions concerning children with disabilities, the best interests of the child shall be a primary consideration.

[The Department] shall ensure that children with disabilities have the right to express their views freely on all matters affecting them, their views being given due weight in accordance with their age and maturity, on an equal basis with other children, and to be provided with disability and age-appropriate assistance to realise that right.' [61]

The Tasmanian Government's overarching disability framework seeks to remove barriers and enable people with disability to enjoy the same rights and opportunities as others. [62] The Department has committed to an action plan to implement the outcomes from the framework and will remain committed to future iterations. [54]

Resources are available to support the delivery of disability-confident health care for children and young people with disability, such as e-learning modules and health literacy resources. [63]

## LGBTIQA+ children and young people

The Department is dedicated to the provision of LGBTIQA+ inclusive healthcare and is guided by the Tasmanian Government's overarching Framework for Lesbian, Gay, Bisexual, Transgender and Intersex Tasmanians. [64] Resources are available to assist workers to deliver LGBTIQA+ inclusive healthcare, such as e-learning modules, discussion and inclusive language guides and glossaries. [65] [66] [67] [68] The Department has committed to implementing systems and processes that support respectful and inclusive data collection and management. [69]

The Department observes the guiding principles that characterise LGBTIQA+ inclusive healthcare as outlined within the *Australian Standards of Care and Treatment Guidelines for Trans and Gender Diverse Children and Adolescents*. [70]

- individualise care
- use respectful and affirming language
- avoid causing harm
- consider sociocultural factors, and
- consider legal requirements.

Whole-of-government and Department-specific LGBTIQ+ reference groups inform the organisational approach to service provision and quality improvement.

The Department sets expectations that all workers: [71]

- treat patients, clients, and colleagues with respect, regardless of their sex, sexual orientation, and gender identity
- not assume a person's sex or gender based on things such as name, voice, or appearance
- collect, manage, and communicate sex and gender information in an inclusive, non-discriminatory way
- accept a person's choice, and
- follow the State Service Code of Conduct and Principles.

## Health literacy

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Accessing, understanding, or appropriately using health information is difficult for many people. Workers have a role in making it easier for children, young people, their families, and caregivers to access, understand, and use health information and services.

This includes the way in which they communicate, provide services, and respond to people's needs, including: [72] [73]

- providing the best information to the needs of each person and checking it is understood
- providing information in a variety of formats including written and spoken information, pictures, diagrams, models, audio-video demonstrations, and group discussions
- using plain language
- providing effective instructional and directional signage
- considering the physical design and layout of services
- having excellent telephone and reception service standards
- helping people to complete forms, and
- providing orientation and ongoing training to workers. [74]

The Department's Health Literacy Action Plan sets out a range of actions to help improve health literacy for individuals, communities, and organisations. It prioritises health literacy awareness, the development of health literate organisations and workforces, and the creation of partnerships to improve health outcomes. [73] The plan builds upon existing Departmental and cross-sector initiatives, including a statewide Health Literacy Network and health literacy campaigns. [75]

The Department provides a range of resources to support the delivery of services that improve health literacy, such as e-learning modules and a workplace toolkit. [76] [77] [78]

Further information about the Department's approach to health literacy is available on its website. [79]



# 5

## Managing staff and volunteers

*Children and young people should feel confident about the standards established in an organisation, particularly in the areas of safety, health, number and suitability of staff, as well as supervision. (Convention on the Rights of the Child, Article 3.3) [12]*

Table 5. Snapshot of Managing staff and volunteers

### National Principle 5 People working with children and young people are suitable and supported to reflect child safety and wellbeing values in practice



- 5.1 Recruitment, including advertising, referee checks and staff and volunteer pre-employment screening emphasise child safety and wellbeing.
- 5.2 Relevant staff and volunteers have current working with children checks or equivalent backgrounds.
- 5.3 All staff and volunteers receive an appropriate induction and are aware of their responsibilities to children and young people, including record keeping, information sharing and reporting obligations.
- 5.4 Ongoing supervision and people management is focused on child safety and wellbeing.

# Recruitment and induction

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The Department is committed to upholding its ethical and legislative obligations when recruiting and inducting workers, with advertising, screening, recruitment, and induction processes underpinned by best practice standards foundational to child safety and wellbeing.

The Department will not knowingly engage, either directly or indirectly, anyone who poses a risk to children or young people. All reasonable steps are taken to engage workers that are suited and supported to work safely with children and young people.

All workers will receive induction around child safety and wellbeing and are aware of their responsibilities, including reporting obligations. The Department will continue to implement and monitor human resources and recruitment practices to ensure they meet the requirements of the National Principles.

Human resources policies and procedures provide a consistent foundation across the Department that promotes a safe, positive, and productive work environment. Key principles of respectful and professional behaviour contribute to child safety and wellbeing overall. The policies and procedures outline the minimum requirements of all workers, and cover the Department's approach to recruitment, induction, and probation.

The Department's statements of duties will outline its commitment to child safety and wellbeing when recruiting new workers. Selection criteria and reference checks for roles involving children and young people will contain safety and suitability requirements that demonstrate that they are valued and respected, and that the Department is focused on meeting their diverse needs. Position descriptions and recruitment advertisements for roles involving children and young people will include the

Department's commitment to their safety and wellbeing. [2]

The Tasmanian Government's Right Job Right Person Framework provides tools, resources and information to support the robust recruitment and selection of workers. The framework recommends the use of behaviourally based questions to assist in determining how a potential worker may perform in the role. The Department will adapt existing resources to provide a set of behaviourally based questions specific to children and young people. [80]

Departmental assessment panels comprise of multiple members to provide varying perspectives and help eliminate biases. For roles involving children and young people, panel members will need to have the appropriate experience to select the most suitable applicant.

## Pre-employment requirements

Rigorous pre-employment checks allow the Department to make informed decisions about the suitability and eligibility of workers to better ensure the safety and wellbeing of all people, including children and young people.

All positions within the Department require pre-employment checks, not just those working directly with children and young people.

Specific pre-employment checks required for a position are listed as essential requirements in the statement of duties as, as well as in job



advertisements. Students and volunteers also require pre-employment checks.

The following pre-employment checks will be conducted as appropriate to each position: [81]

- conviction checks
- working with vulnerable people registration
- eligibility to work checks (Immigration)
- identity checks, and
- disciplinary action in previous employment check.

### *Working with Vulnerable People (Children) Registration*

The Department is committed to delivering high-quality care and takes reasonable steps to protect the safety, security, and wellbeing of vulnerable people, including children and young people.

Under the *Registration to Work with Vulnerable People Act 2013* (Tas), workers that engage directly or indirectly with children or their records must hold a valid Working with Vulnerable People (Children) Registration as a condition of employment, unless they are exempt under the legislation. [23]

This standardised, centralised background checking and risk assessment process deters individuals who pose a risk of harm to vulnerable people from applying for and gaining positions of trust in the Department.

The Department's policies and procedures relating to employment checks and working with vulnerable people reflect the requirements within the legislation.

The Tasmanian Department of Justice administers the *Registration to Work with Vulnerable People Act 2013* (Tas). Appropriate information sharing is essential to preserving the efficacy of checks. The Department works closely with the Department of Justice to share relevant information, maintain accurate registration details for applicable workers, and participate in a two-way notification process about changes in a worker's circumstances that may result in risk of harm to children or young people.

### *Conviction checks*

Conviction checks are an employment requirement for many appointments and engagements, including for non-employees such as volunteers and students. Some areas of the Department require ongoing conviction checks in accordance with legislation. Further information about conviction checks is available on the Intranet.

### *Reference checks*

Reference checks consider a potential worker's suitability to perform a role, including relevant work history, character and experience. Minimum standards for reference checks are outlined in policy directives. When undertaking reference checks, the Department requires a minimum of two referees, one of whom should be a recent line manager. Reference checks are undertaken in direct communication with the referee.



## Conflict of interest

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The Department is committed to proactively anticipating, managing and resolving potential, perceived, or actual conflicts of interest to protect children, young people, and workers.

Conflicts of interest may arise when a worker's personal interests have the potential to compromise, or be seen to compromise, their judgement, decisions, or actions in the workplace.

Conflicts may impact the Department's ability to deliver the best possible outcomes for children and young people, and may arise due several factors, including family, financial, professional, or social reasons. [82]

A range of discipline-specific codes of practice detail the need to manage conflicts of interest, particularly relating to interactions with, and provision of services to, children and young people, their families, and

caregivers. Whenever possible, service provision to anyone a worker has a close personal relationship with should be avoided due to the lack of objectivity, possible discontinuity of care, and risks to the patient and worker.

Effectively managing conflicts of interest is an essential component of making decisions in the public interest, and in building public trust in the Department. [83]

Workers can access resources to manage conflicts of interest and are encouraged to take an 'if in doubt, declare' approach. More information about the Department's approach to managing conflicts of interest is available on the Intranet.

## Performance and professional development

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Frequent, open, and supportive supervision is an effective safeguard within organisational and professional settings. [84]

The Department will maintain a focus on safeguarding through performance and professional development programs, conversations, and agreements. Managers and workers are encouraged to have regular, quality discussions to build an understanding of development needs, and behaviour and performance expectations. [85]

Departmental services are expected to provide a means for ongoing performance development and review that embeds a focus on child safety and wellbeing and support all workers with practice supervision where appropriate.

## Unpaid workers

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Unpaid workers play an important role building and maintaining a child safe culture in the Department. The Department recognises the significant contribution made by unpaid workers in the delivery of quality care to children and young people and will support and enable them to contribute to a child safe culture. [86]

The Department's policy directives relating to unpaid workers provide a consistent best practice approach that upholds the National Standards for Volunteer Involvement. [87] The Department of Premier and Cabinet Guidelines for State Agency Management of Volunteer Activity are based on the National Standards and aim to improve volunteer services delivered in partnership with all Tasmanian Government Agencies. [88]

Under the Department's policy directives, unpaid workers are required to:

- support the Department's objectives and undertake their tasks in accordance with relevant legislation, directives, policies and procedures
- fulfil their obligations under the *Work Health and Safety Act 2012*
- not gain, or attempt to gain, information that they are not authorised to access, and
- maintain appropriate confidentiality. [89]

Unpaid workers are bound by formal agreements that outline their rights and responsibilities, including but not limited to, the following:

- the type and duration of the activity
- roles and responsibilities
- the level of supervision, guidance and support
- responsibility for induction and training

- how relevant issues relating to induction, training, illness, injury, welfare, performance, conduct and/or behaviour will be managed
- the name and details of contacts for each party, and
- how personal accident and liability insurance related matters will be managed.

The Department observes the following principles when engaging unpaid workers:

- unpaid workers undergo the same robust recruitment, selection, and induction processes that apply for paid workers
- unpaid workers are aware of the Department's child safe governance are aware of and can access the Department's child safeguarding reporting processes
- unpaid workers are aware of and agree to abide by the Department's child safe policies and procedures
- unpaid workers have access to ongoing education and training, including mandatory induction training and annual refresher training
- unpaid workers are included in the Department's communications
- unpaid workers are clearly identified when providing services
- unpaid workers understand the Department's expectations around behaviour and conduct, for themselves and paid workers



- unpaid workers are adequately supported and effectively managed and supervised, and participate in best practice exit procedures, and
- unpaid workers have input into the Department's quality improvement processes.

The Department has a duty of care towards unpaid workers under the *Work Health and Safety Act 2012*. Safe Work Australia provides essential guidance around protecting the health and safety of unpaid workers that is reflected in the Department's policies and procedures. [90] [91] [92]



# 6

## Child friendly complaint processes and reporting

*Organisations should ensure that children and young people are properly cared for and protect them from violence, abuse and neglect by their parents, or anyone else who looks after them. (Convention on the Rights of the Child, Article 19) [12]*

Table 6. Snapshot of Child friendly complaint processes and reporting

### National Principle 6 Processes to respond to complaints and concerns are child focused



- 6.1 The organisation has an accessible, child focused complaint handling policy which clearly outlines the roles and responsibilities of leadership, staff and volunteers, approaches to dealing with different types of complaints, breaches of relevant policies or the Code of Conduct and obligations to act and report.
- 6.2 Effective complaint handling processes are understood by children and young people, families, staff and volunteers, and are culturally safe.
- 6.3 Complaints are taken seriously, and responded to promptly and thoroughly.
- 6.4 The organisation has policies and procedures in place that address reporting of complaints and concerns to relevant authorities, whether or not the law requires reporting, and co-operates with law enforcement.
- 6.5 Reporting, privacy, and employment law obligations are met.

## Child and youth safeguarding concerns

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The Department's commitment to a positive safety culture underpins its safety and quality improvement systems.

By improving existing systems and processes, implementing the National Principles will ensure that workers can record, report on, and learn from safeguarding concerns to keep children, the public, and themselves safe and supported by a no-blame philosophy.

Safeguarding concerns and complaints are treated seriously and responded to promptly and consistently in accordance with Department's policies and procedures. The aim is to prevent harm to children and young people by identifying risks, and taking steps to remove and reduce those risks in a culturally appropriate, safe, timely, and trauma-informed way. [6] [7]

The Department's safeguarding policies and procedures will build on existing safety event management processes and reflect contemporary governance and management of child safeguarding concerns. They will outline roles and responsibilities for workers and detail the Department's approach to dealing with different types of safeguarding concerns, including harm to children and young people by other children and young people. These policies and procedures reflect requirements of the *Children,*

*Young Persons and Their Families Act 1997, Registration to Work with Vulnerable People Act 2013, Health Practitioner Regulation National Law (Tasmania) Act 2010, Health Complaints Act 1995,* and other specific legislation around conduct. [41] [23] [93] [30]

### Trauma-informed care

The Department will take a trauma-informed approach to the management of safeguarding concerns involving children and young people. This approach aims to ensure the best outcomes for children and young people and considers the widespread impact of trauma, seeking to actively resist re-traumatisation. The Department will uphold the guiding principles of trauma-informed practice, including: [6] [7] [94]

- safety
- trustworthiness
- choice
- collaboration
- empowerment

## Mandatory reporting

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Mandatory reporting is the legal requirement to report a reasonable suspicion of harm or risk of harm to children, young people, and unborn babies to relevant authorities.

A mandatory reporter must make the notification as soon as practicable after forming a suspicion. Failing

to report suspected abuse, neglect, or other conduct reportable under legislation is a criminal offence and workers may be prosecuted.

The Department provides workers with guidance about their mandatory reporting obligations and making a report. Workers may be supported by the Department's Child Safety and Wellbeing Service to make a mandatory report. Where the service identifies a requirement to report has not been fulfilled, they may take action to facilitate the process.

A mandatory report is required to be lodged using the legislated avenues in addition to the Department's safety and learning system.

## Children, Young Persons and Their Families Act 1997 (Tas)

The *Children, Young Persons and Their Families Act 1997* (Tas) outlines the requirements of mandatory reporters in relation to children and young people. All Departmental workers are mandatory reporters under the *Children, Young Persons and Their Families Act 1997* (Tas).

Section 14 establishes that the following professions are required to make a mandatory report: [41]

- medical practitioner
- registered nurse or enrolled nurse
- midwife
- dentist, dental therapist, dental hygienist, and oral health therapist
- psychologist
- police officer
- probation officer appointed or employed under section 5 of the Corrections Act 1997
- principal and a teacher in any educational institution (including a kindergarten)
- a person who provides childcare, or a childcare service

- a person involved in the management of an approved education and care service or a childcare service
- a member of the clergy of any church or religious denomination
- a member of the Parliament
- an employee or volunteer of a Government Agency or funded organisation that provides, health, welfare, education, childcare, or residential services wholly or partly for children, and
- any other person of a class determined by the Minister.

Anyone who has knowledge or a belief or suspicion on reasonable grounds that a child or young person has been or is being abused or neglected in accordance with the *Children, Young Persons and Their Families Act 1997* (Tas) must report this to the Child Safety Service through the Strong Families, Safe Kids Advice and Referral Line, Online Contact Form and/or Tasmania Police.

Workers can access advice about their mandatory reporting requirements from the Tasmanian Government's Child Safety Service and/or the Department's Child Safety and Wellbeing Service.

## Health Practitioner Regulation National Law (Tasmania) Act 2010 (Tas)

The *Health Practitioner Regulation National Law (Tasmania) Act 2010* (Tas) outlines the requirements of mandatory reporters in relation to notifiable conduct by registered health practitioners.

Any registered health practitioner who forms a reasonable belief that another registered health practitioner has behaved in a way that constitutes notifiable conduct in accordance with the *Health Practitioner Regulation National Law (Tasmania) Act 2010* (Tas) is required to notify the relevant



registration board by law. Other people are encouraged to report notifiable conduct but are not mandated to by law.

There are four concerns that may trigger a mandatory notification under the legislation. Depending on the type of concern, an assessment must be made about the risk of harm to the public when deciding whether to make a mandatory notification. The four concerns are: [95]

- impairment.
- intoxication while practising.

- significant departure from accepted professional standards.
- sexual misconduct.

Workers can access advice regarding their mandatory reporting requirements through the Australian Health Practitioner Regulation Agency (AHPRA) or the Department's Child Safety and Wellbeing Service.

Reports can be made online using the AHPRA Online Portal, by email or post using the downloadable Complaint and Concern Notification Form, or by phone.

## Duty of care

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All workers have a duty of care to support and protect the children and young people with whom they are professionally involved. This duty is determined through common law, *Criminal Code Act 1924* (Tas), *Civil Liability Act 2002* (Tas), *Wrongs Act 1954* (Tas), and other circumstance-specific legislation. [14] [15] [16]

When workers form a reasonable suspicion that a child or young person has been harmed or is at risk of harm, they are ethically bound to protect the safety and wellbeing of that child or young person. This also applies if a reasonable suspicion is formed outside of work.

Failing to report suspected abuse, neglect, or other conduct reportable under legislation is a criminal offence and workers may be prosecuted.

## Complaints and concerns

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The Department provides pathways and process options and platforms for children, young people, their families, and caregivers to raise concerns that best meets their individual needs, such as developmental, age, physical ability, intellectual capacity, language, technology, communication, information, cultural, support and social needs.



The Department's Consumer Liaison Unit (CLU) is responsible for processing and managing complaints exclusive of matters relating to conduct. Complaints relating to conduct are managed through the Department's Human Resources (HR) unit. The CLU will work closely with the Department's Child Safety and Wellbeing Service and HR unit to assign appropriate responsibility for the management of complaints.

The feedback process for complaints provides the opportunity for a person to have their issues resolved as well as ensuring any risks are identified, and management plans are put in place to decrease the likelihood of the issue reoccurring. Complaints are recorded and managed through the Department's safety and learning system. [96]

The Department takes reasonable steps to protect people who make disclosures, with natural justice afforded to the parties involved in the investigation of a disclosure or notification of inappropriate behaviour.

## Public Interest Disclosure

The Department is committed to upholding the objectives of the *Public Interest Disclosures Act 2002* (Tas). [97]

Where there are concerns about the improper conduct of a colleague that is serious or significant, workers can report them as a public interest disclosure in accordance with the Department's policy directives.

Further information is available on the Intranet. [98]

### *Departmental disclosure*

Public interest disclosures to the Department can be submitted to the Secretary (as the Principal Officer) or one of the Department's Public Interest Disclosure Officers. This can be done directly or by

emailing a completed Public Interest Disclosure Form to the designated email address.

### *Integrity Commission*

Public interest disclosures can be made to the Integrity Commission.

The Integrity Commission is an independent statutory authority tasked with improving standards of propriety in the Tasmanian public sector through investigating and preventing public sector misconduct.

Further information on making a public interest disclosure to the Integrity Commission is available on the Integrity Commission website. [99]

### *Ombudsman Tasmania*

Public interest disclosures can be made directly to the Ombudsman Tasmania.

The role of the Ombudsman is to investigate the administrative actions of public authorities to ensure their actions are lawful, reasonable, and fair. The Office of the Ombudsman works in an independent, impartial, and objective way to resolve complaints and to address systemic problems to improve the quality and standard of Tasmanian public administration.

Further information on making a complaint to the Ombudsman is available on the Ombudsman Tasmania website. [100]

## Open disclosure

Open disclosure is defined as a process of providing an open, consistent approach to communicating with children, young people, their families, and caregivers following a safeguarding concern.

Open disclosure is:

- a patient and consumer right and a legal obligation



- a core health professional requirement
- an attribute of high-quality health service organisations [3]
- an important part of healthcare quality improvement
- guided by the Australian Open Disclosure Framework [101]

The Department's policy directives on Open Disclosure support the achievement of an open culture and provides statewide consistency for communication with children, young people, their families, and caregivers following unexpected health care outcomes and harm. They ensure that any child or young person harmed will, as soon as practicable, be provided with information from services about what went wrong and why, and what that service is doing to mitigate the risk of future events in line with the *Australian Open Disclosure Framework*. [101]

## Direct Personal Response

The Department is committed to improving the protection and promotion of the rights, safety, and wellbeing of children and young people and respects the needs, expectations, and preferences of any person who has experienced harm through the Department.

The Department is a member of the National Redress Scheme, which was created in response to the Royal Commission into Institutional Responses to Child Sexual Abuse and acknowledges and supports people that have experienced institutional child sexual abuse. [102]

A Direct Personal Response (DPR) is an element of the National Redress Scheme. If a victim or survivor<sup>2</sup> of child sexual abuse applies to the scheme and are offered redress, they can also ask for a DPR from the institution responsible for the abuse. [103] [104]

## Harm to children and young people by other children and young people

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Some children and young people experience harm by other children and young people.

A child or young person may harm themselves or their peers, intentionally or unintentionally through: [105]

- bullying or cyberbullying
- emotional abuse
- online abuse

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<sup>2</sup> The term 'victim' or 'survivor' is used to refer to a person who has been harmed or abused as a child in an institutional context. In line with the Royal Commission into Institutional Responses to Child Sexual Abuse, the Department recognises that some people prefer 'survivor' because of the resilience and empowerment associated with the term. The

Department recognises that some people who have experienced abuse do not feel that they 'survived' the abuse, and that 'victim' is more appropriate. The Department also recognises that some people do not identify with any of these labels to define their experiences. [104]

- physical abuse
- sexting
- sexual abuse or other harmful sexual behaviour.

The Department considers the safety and wellbeing of all children and young people involved when peer-on-peer harm occurs. A child or young person who poses a risk to others may not always intend or understand the harm they are causing to themselves or their peers. They may have experienced prior harm or maltreatment and require targeted intervention and support to ensure the safety and wellbeing of themselves and others.

Research shows that children and young people who exhibit these behaviours are unlikely to continue them into adulthood if they are able to access early support and therapeutic services. Early identification, intervention and a tailored therapeutic response can help to stop these behaviours and reduce the likelihood of escalation.

Instances of harm by other children and young people will be managed in accordance with the Department's child safety and wellbeing policy directives and emerging best practice underpinned by the following principles: [105] [106] [107] [108]

- a contextual, systemic and trauma-informed approach is used that takes into account a child or young person's background, whole environment and supports.
- the approach used is accessible, trauma-informed and culturally safe and is non-stigmatising.
- the wellbeing of all children and young people involved is monitored and addressed.
- strong communication is maintained with the children and young people involved, their families, caregivers, and relevant agencies.
- families and caregivers are involved and empowered to play a continuing role in the management of their child or young person.
- overarching safety plans are established that provide safe and appropriate ways of managing the child or young person's behaviour in all environments.

# 7

## Education and development

*Organisations should take all appropriate legislative, administrative, social and educational measures to protect children and young people from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in their care. (Convention on the Rights of the Child, Article 19.1) [12]*

Table 7. Snapshot of Education and development

**National Principle 7 Staff and volunteers are equipped with the knowledge, skills and awareness to keep children and young people safe through ongoing education and training**



- 7.1 Staff and volunteers are trained and supported to effectively implement the organisation’s child safety and wellbeing policy.
- 7.2 Staff and volunteers receive training and information to recognise indicators of child harm including harm caused by other children and young people.
- 7.3 Staff and volunteers receive training and information to respond effectively to issues of child safety and wellbeing and support colleagues who disclose harm.
- 7.4 Staff and volunteers receive training and information on how to build culturally safe environments for children and young people.

## Indicators of harm

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The Department has an opportunity to recognise signs of harm to children and young people early and respond accordingly, whether working one-on-one or with families and caregivers.

For support identifying what constitutes a safeguarding concern to a child or young person, workers will be able to refer to the Department's child safety and wellbeing protocols and guidelines.

Identifying a safeguarding concern to a child or young person may be determined from a variety of sources including:

- a disclosure made by a child, young person, their family or caregiver, an external agency, or any other person
- a suspicion or belief that abuse or harm has occurred or is likely to occur
- the Department's consumer complaints and feedback processes
- the Department's child safety and wellbeing monitoring and review processes
- the Department's safety and quality monitoring and review processes
- alternative review systems, such as internal audit, accreditation processes or review of medical records, and
- any action or inaction that demonstrates non-adherence to the Department's child safety and wellbeing policies and other related documents.

The National Principles outline that a child safe organisation ensures workers are equipped with the knowledge, skills, and awareness to keep children and young people safe. Workers have a crucial role to play in protecting children and young people from harm or abuse. They may be the best-placed, or only, adult in a child or young person's life who is able to identify and

respond to signs that they are impacted by or at risk of harm, or that a person may be a perpetrator of child abuse.

Workers are positioned to identify and respond to potential harm and may observe something during their work that raises concerns about the safety of a child or young person.

A single event, a series of events over time, or an accumulation of behaviours and circumstances may indicate harm to a child or young person. It is important to maintain an organisational culture that remains open to the impacts of cumulative harm to children and young people. Children and young people may not always be able to verbally disclose when harm has occurred. [109] [110]

Workers have a duty of care to avoid acts or omissions that could expose a child or young person with whom the Department is involved to a reasonably foreseeable risk of injury. This means that workers must prioritise and protect the safety and wellbeing of children and young people through understanding the nature and risks of harm to children and young people and taking deliberate steps to reduce or eliminate risks.

The Department will provide information, ongoing education and training for workers to help them develop awareness and insights into their attitudes towards children and young people, and hold a contemporary understanding of child development, safety, and wellbeing.



Workers will be supported to have a sound knowledge of children and young people's rights and enabled to recognise indicators of child harm including harm caused by other children and young people. They will be able to prevent harm and respond in culturally appropriate and effective ways to children, young people, their families and caregivers and support their colleagues.

The Department's child safety and wellbeing policy directives will support workers to better understand and recognise these indicators and provides linkages to best practice information, including:

- understanding what constitutes harm to children and young people
- recognising and understanding the indicators of child harm, including harm caused by other children and young people
- understanding the rights of children and young people and recognising indicators that may detriment the rights and wellbeing of children and young people, and
- further education and resources about the indicators of child harm and the rights and wellbeing of children and young people.

## Disclosures

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Disclosure enables all workers to undertake protective action to address harm to children and young people, and minimise the risk of future harm.

Disclosure also allows the Department to make changes to ensure harm does not occur in future. It provides an opportunity to address the risk factors that enable harm to children and young people to occur and accountability for critical failings.

The Department is committed to creating conditions that empower, encourage, and support children and young people to disclose where: [111]

- safe adults are available and accessible for children and young people
- children and young people are given opportunities to raise and discuss concerns
- children and young people can access sexual abuse prevention programs and information about sexual abuse
- children and young people are taught to support peers, and
- children and young people are provided with appropriate supports to communicate abuse.

The Department acknowledges the conditions that encourage and support victims/survivors to disclose and seeks to embed these conditions wherever possible. Safe environments for disclosure must consider the diverse needs and circumstances of children and young people in order to uphold the principles of inclusion and accessibility. [111]

Speaking up is difficult for anyone, but it can be particularly hard for children and young people. Children and young people are most likely to disclose their experience of harm to peers and adults they trust. It is vital that children and young people have access to safe adults, and especially important for children and young people who are separated from their families and caregivers.

Workers will be trained and confident in facilitating an environment where children and young people are encouraged and supported to disclose and be listened to and believed. [112]



Appropriate responses to disclosure are critical. An inappropriate response to disclosure can affect a child or young person's willingness to disclose again, exacerbate the impacts of the harm experienced, and allow it to continue. Failing to act on a disclosure may also put other children and young people at risk of abuse. [113]

Workers will be assisted to create a safe, supportive environment for children, young people, and

victims/survivors to express their views and concerns through the Department's child safety and wellbeing policy directives. These resources will assist workers to be aware of, and open to, different ways children, young people, and victims/survivors might disclose to ensure that they are supported, made safe, and believed even following tentative, unclear, or partial disclosures. [114]

## Supporting children and young people

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While some workers are expected to support and listen to children and young people when they raise concerns, it may not be within their scope to counsel or investigate a disclosure made by a child, young person or victim/survivor.

The Department's Child Safety and Wellbeing Service, Child Safety Services, and Tasmania Police are responsible for investigating reported safeguarding concerns.

A range of health professionals, internal and external, are skilled in providing medical, psychological, and other support when required. Responses to child safeguarding concerns will be trauma-informed and culturally safe.

The Department recognises that making a report does not necessarily conclude its duty of care to a child, young person, their family or caregiver. It is essential that any child or young person harmed while receiving care/services will receive appropriate care, support, and information, including additional care at no expense to themselves or their family/caregivers.

When a child or young person makes a disclosure, it is an opportunity for workers to provide immediate support and comfort, and to assist in protecting the child or young person from harm. Workers can also continue to respond to the needs of a child or young person by helping them connect to professional services that can keep them safe, provide support and facilitate their recovery from harm.

The Department's child safe approach and associated resources support children, young people, their families, and caregivers to access information on internal and external support services and complaint processes, including prevention programs. Workers are also supported to assist children, young people, their families, and caregivers to access, understand and use these services through ongoing guidance, education, and training.



## Supporting workers

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Safeguarding concerns can be traumatic for everyone involved. It is important that workers involved in or affected by an event have access to care and support in accordance with the Department's child safety and wellbeing policy directives.

This may include support from the Child Safety and Wellbeing Service or external assistance programs where needed, such as the Department's confidential Employee Assistance Program (EAP).

Workers are encouraged to seek support if they feel they need additional support after receiving or being involved in a safeguarding concern.

### Child safe capability framework

The Department seeks to make all workers aware of and comply with the National Principles and their commitment to child safety and wellbeing and child safe approach when providing services to children and young people and/or their family or caregivers.

The following topics will constitute the capability framework:

- children and young people's rights and wellbeing
- safeguarding and identifying and responding to concerns
- child-safe culture and governance
- risk-management strategies
- participation and empowerment
- child safe behaviours
- reporting obligations
- education and prevention, and
- responsive care and support.

The Department will work in conjunction with services to provide resources to support child safety and wellbeing in practice in accordance with the

National Principles, and actively promote the dissemination of information about child safe practice to workers.

The aim is to ensure workers feel supported and confident in communicating and working with children in a way that is safe, empowering and encourages their participation in creating an organisation that is safe. Workers will be supported through ongoing education and awareness, training, and functional systems to know, understand, and practice child safe behaviours and boundaries with confidence and competence.

The Department's implementation of the National Principles will be regularly monitored, reviewed, and improved, including continuous quality improvement in promoting the safety of children, reducing risk, preventing abuse, and responding to allegations of child abuse.

Targeted induction, training, and supervision will be provided to ensure workers understand their obligations to protect children, identify child abuse risks and prevent, detect, and report any inappropriate behaviour, misconduct, or suspected child abuse. Local systems and processes are in place to support this, and workers will be trained in how to use the systems to support effective implementation of the child safe approach.

All sections of the Department are expected to provide child safety and wellbeing education and training as part of professional development programs.



They should maintain a focus on safeguarding, with these expectations encompassed in performance and professional development conversations and agreements where relevant to the scope of practice.

Education and training should prepare and equip workers with the skills to confidently implement the child safe approach and may include further training around indicators of child maltreatment, responding to disclosures, mandatory reporting, and open disclosure, amongst others.



# 8

## Safe environments

*Children have the right to get information that is important to their wellbeing from radio, newspapers, books, computers, and other sources. Adults should make sure that the information children get is not harmful and help them find and understand the information they need. (Convention on the Rights of the Child, Article 17) [12]*

Table 8. Snapshot of Safe environments

### National Principle 8 Physical and online environments promote safety and wellbeing while minimising the opportunity for children and young people to be harmed



- 8.1 Staff and volunteers identify and mitigate risks in the online and physical environments without compromising a child's right to privacy, access to information, social connections and learning opportunities.
- 8.2 The online environment is used in accordance with the organisation's code of conduct and child safety and wellbeing policy and practices.
- 8.3 Risk management plans consider risks posed by the organisational settings, activities and the physical environment.
- 8.4 Organisations that contract facilities and services from third parties have procurement policies that ensure the safety of children and young people.

# Physical environments

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The *Standards for the Care of Children and Adolescents in Health Services* aim to ensure that quality care is provided in an environment that is safe and appropriate for the age and stage of development of a child or young person. [115]

The National Quality Framework (NQF) provides a national approach to regulation, assessment, and quality improvement for early childhood education, care, and outside school hours services across Australia. [116]

The Department observes these standards and supports their application to service provision, ensuring that the physical environment is safe, suitable, and promotes learning and development. [115] [117]

The following principles have been adapted from the *Standards for the Care of Children and Adolescents in Health Services* and the NQF: [118] [119] [120] [121]

## Safe people

- leaders set expectations about behavioural standards interacting with children in physical and online environments
- workers and parents are provided information about risks in the physical environment, such as grooming and other forms of abuse
- children and young people are provided information about safety and regularly encouraged to tell workers about negative experiences
- children and young people are cared for by workers specifically trained to meet their physical, psychosocial, developmental, communication and cultural needs, and

- staffing ratios are optimised.

## Visibility

- physical environments, including outdoor environments, are altered to increase natural lines of sight while respecting a child or young person's right to privacy
- a 'no-closed door' approach is adhered to as appropriate, while respecting a child or young person's right to privacy
- appropriate supervision is always applied, including during transportation and off-site activities
- surveillance equipment is used in high-risk environments where natural surveillance is not feasible
- risk assessments identify areas where adults have opportunities to interact with children unsupervised
- higher-risk areas such as change rooms, cars, boarding facilities, and offsite locations are managed using specific safety measures, such as spot checks and logbooks
- secure areas such as storage are not used for care purposes to prevent isolation of children and young people, and
- access to external communication options, including telephones and internet is readily available.



## Facilities

- areas are clean, well-lit with adequate lighting and temperature control, adequately ventilated
- areas, furniture, and equipment are safe, clean, well maintained and age-appropriate
- entertainment and education materials are developmentally age-appropriate and protect children from psychosocial harm, and
- relevant standards and regulations are adhered to.

## Privacy

- age-appropriate separation of facilities for children, young people, and adults is undertaken
- children and young people have adequate spaces for sleep, rest, and relaxation, including appropriate soundproofing as required
- effective illness and injury management and hygiene practices are promoted and implemented, including isolation areas for infectious patients, and
- admission of young people considers their psychosocial history, relevant medical history, individual wishes, and their suitability to be accommodated in either a paediatric or an adult ward.

## Access control

- monitoring the presence of workers, visitors, carers, and contractors at all times is undertaken
- robust admission and release procedures are undertaken
- facilities for parents or caregivers to stay nearby to their child are provided
- areas are solely utilised for the provision of health services by the Department

The Department will support risk reduction in physical and online environments through the

development and implementation of risk assessment and management tools, audit and monitoring tools, trend analysis, and adherence to best practice standards and statutory obligations. [122]

## National Construction Code

The Department complies with the National Construction Code (NCC), comprising the Building Code of Australia and Plumbing Code of Australia. The NCC is produced and overseen by the Australian Building Codes Board.

The NCC is a performance-based code that sets the minimum required level for the health, safety, amenity, accessibility, and sustainability of Department facilities. It aims to maximise patient safety in parallel with the NSQHS Standards.

The NCC is legislated within Tasmania in relevant building and plumbing legislation. It is a nationally consistent code, with variations, additions, or deletions applied in accordance with state legislation. The Department is bound to meet health and safety requirements, building regulations and quality assurance standards under the NCC. [123]

The *Building Act 2016* (Tas) regulates the performance and standards of building, demolition, and plumbing work in Tasmania, including work approval processes, and all work must comply with the NCC. [124] [125]

NSQHS Standard Action 1.29 states:

*The health service organisation maximises safety and quality of care:*

- through the design of the environment*
- by maintaining buildings, plant, equipment, utilities, devices, and other infrastructure that are fit for purpose* [126]

The Department supports the undertaking of a risk assessment of all infrastructure programs and activities at the design stage and at intervals



throughout establishment to better protect children and young people from harm.

## Australasian Health Facility Guidelines

The *Australasian Health Facility Guidelines* (AusHFG) provide information to assist health services and design teams to plan and design health facilities in accordance with best practice. They support the delivery of optimal patient care through provision of an appropriate physical environment.

The aims of the AusHFG are to: [127]

- assist with the design of safe health facilities that provide privacy and dignity for patients, support contemporary models of care and the needs of carers, visitors, and staff
- maintain public confidence in the standard of health facilities
- achieve affordable solutions for the planning and design of health facilities, and
- promote built solutions that minimise recurrent costs and encourage operational efficiencies.

The Department is informed by the AusHFG when planning and constructing health facilities.

## Australian Standards

The Department ensures that any products, services, and systems used are safe, reliable and consistently perform as intended by selecting those that meet minimum quality and safety criteria as determined by Australian Standards. [128] [129] [130] [131] [132]

### *Health Products Regulation Group*

The Department acknowledges the role of the Health Products Regulation Group (HPRG) in safeguarding and enhancing the health and wellbeing of children and young people.

Appropriate information sharing arrangements are maintained to support the regulation of the safety, quality, efficacy, and timely availability of all medications, medical devices, biologicals, combination products and controlled drugs.

The HPRG comprises the Therapeutic Goods Administration and the Office of Drug Control. [133] [134]

## Online environment

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Online environments are crucial to the efficient and best practice delivery of health services. These environments provide children and young people with new ways to communicate, learn, create, and contribute to their health and wellbeing.

Digital environments carry risks, including:

- privacy
- illegal content
- harassment
- cyber abuse/cyberbullying
- misuse of personal data
- social engineering
- grooming, and
- child sexual abuse. [135]

Due to the advancing nature of technology, online protection mechanisms need to be adaptive and agile to remain effective.



The Department takes a holistic approach to responding to potential threats and harms to the safety of children and young people in its care. When managing online environments, the Department upholds the best interests of children and young people as a primary consideration and identifies how the rights of children can be protected and respected in the digital environment.

Ensuring children and young people's right to privacy, best practice care, and healthy development in relation to online and physical environments is guided by the Department's child safe approach and relevant protocols.

The Department is committed to the provision of safe, age-appropriate, inclusive, and participatory digital environments for children and young people that observe the principles of the *Recommendation of the Council on Children in the Digital Environment*. [136]

- fundamental values
- empowerment and resilience
- proportionality and respect for human rights
- appropriateness and inclusion, and
- shared responsibility, co-operation, and positive engagement.

## Online security features

The Department supports the implementation of the *'Essential Eight' Strategies to Mitigate Cyber Security Incidents* developed by the Australian Cyber Security Centre (ACSC). The Department also draws upon other best practice control frameworks, including the National Institute of Standards and Technology (NIST) *Cybersecurity Framework* and the Australian Signals Directorate (ASD) *Information Security Manual* to protect Departmental information and systems from cyber threats.

These guidance resources and mitigation strategies assist the Department to protect users against a wide

range of cyber threats unique to the online environments used by the organisation. [137] [138] [139]

## Safety and content filters

The Department applies content filtering for email and internet browsing across the organisation. Access to the Internet is filtered and audited using the Networking Tasmania Internet Filtering service. This service is intended to reduce the likelihood of people accessing web sites that are not permitted under Departmental policy, risky or illegal. [140]

The Department's content filters block access to the following major content categories:

- inappropriate content, and
- potentially dangerous or unlawful content.

## Inappropriate content

The filter protects users of the Department's network against inappropriate content that falls under the following categories:

- extreme
- gambling, and
- pornography.

## Potentially Dangerous or Unlawful Content

The filter protects users of the Department's network against potentially dangerous or unlawful content that falls under the following categories:

- browser exploits
- consumer protection
- malicious downloads
- potentially unwanted programs (PUPs)
- potential criminal activities
- malicious sites
- potential hacking/computer crime



- spyware/adware/keyloggers
- phishing
- SPAM URLs
- parked domains
- potential illegal software
- discrimination
- historical revisionism
- P2P/file sharing
- school cheating information
- anonymisers
- anonymising utilities, and
- residential IP addresses. [141]

## Health Information Management Services

The Department's Health Information Management Services (HIMS) ensures the Department operates in accordance with approved Australian Standards when managing health information.

Functions undertaken by HIMS include:

- providing and maintaining an efficient record storage system in which information is kept safe from loss, damage, and unauthorised access
- collecting and disseminating health information in accordance with Departmental policies and statutory requirements
- providing advice and guidance for records management to all workers including design, retention, storage and disposal for medical and corporate records
- timely preparation, retention, and maintenance of medical records
- ensuring the design and content of the medical record meets Australian Standards and the needs of users, and
- undertaking, applying, and advocating for quality, accurate, and reliable health information data.

Robust data access and management practices can support safety, quality improvement, and research. Access to patient health data must be appropriately reviewed, authorised, conducted, monitored, and governed.

HIMS is responsible for the approval and provision of access to data for activities including:

- quality assurance and auditing
- clinical record review
- service planning and development
- benchmarking
- education
- patient care, and
- research purposes. [142]

## Monitoring

HIMS provides information and training to all workers on a range of topics, including:

- personal information protection and confidentiality
- alert registration and management
- documentation basics
- clinical coding, and
- NSQHS Standards relating to health information management. [143]

## Remote access

Remote access to the Department's network, including the ability to connect to systems from multiple locations or outside Departmental sites is overseen by, and facilitated through, the Government service provider, Networking Tasmania. [144]

## Telehealth and web conferencing

Digital health service delivery is an ever-increasing modality of critical importance, particularly given Tasmania's regional, rural, and remote status. The Department expects workers to follow



Departmental policies and guidance when engaging in digital health technologies. [145] [146]

## Office of the eSafety Commissioner

The Office of the eSafety Commissioner is an independent statutory office that was created by the *Enhancing Online Safety for Children's Safety Act 2015* (Cth). It coordinates and lead the online safety efforts across government, industry, and the not-for-profit community. [147]

The Office of the eSafety Commissioner provides reporting functions to protect users of digital environments, including:

- Cyberbullying Scheme (children and young people)
- Adult Cyber Abuse Scheme
- Online Content Scheme (illegal and restricted content), and
- Image-Based Abuse Scheme. [148]

## Procurement and third-party providers

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The Department accounts for child safety and wellbeing when considering all third-party services, including where contact with children and young people is incidental or not standard to the funded activity.

A collaborative approach is taken with third-party providers to manage the safeguarding of children and young people in the delivery of its services. Providers will be supported to ensure they uphold the best interests of children and young people in practice and encouraged to implement the National Principles in their workplace where appropriate. Providers that implement the National Principles will be demonstrating their leadership and commitment to child safety and wellbeing.

The Department recognises that each provider will have challenges and risks unique to their specific context when considering the safety and wellbeing of children and young people that they interact with. Each provider has a responsibility to play an active part in identifying risks and developing their own child safe approach.

Whilst the Department encourages providers to utilise existing training and guidance on becoming a child safe organisation, each individual approach must be developed with the specific needs and vulnerabilities of the children and young people the

organisation interacts with in mind. Organisational practice and policy directives should be tailored to reflect the level of risk inherent in the activities undertaken by the provider.

When complying with the National Principles, the Department acknowledges that providers need to maintain a balance between risk management and risk aversity and ensuring that the rights and wellbeing of children and young people are upheld.

Partner agencies or organisations funded to provide goods and services through the Department are required to demonstrate adherence to Departmental policies and practices through the application of standard clauses within all funding agreements.

Standard clauses within funding agreements provide scope for the Department to request documentation, enter premises, and undertake quality and safety audits or reviews of the provider's compliance with any of its specified clauses, including those relating to children and young people.



Parameters are set to require providers to institute robust procedures to ensure the engagement of 'fit and proper' personnel, including but not limited to credentialing, background and reference checks, and training. All personnel, regardless of how they are contracted, are subject to the same recruitment and selection rigour. Funding agreements also encompass Working with Vulnerable People (Children) Registration as determined through legislation.

Under these agreements, providers are mandated to report concerns to the Department in line with policy directives and to comply with their own legislative and statutory requirements.

These requirements also apply to all downstream personnel, partners and subcontractors who are engaged by a funded partner to perform any part of a related activity, including where working with or

contact with children and young people is identified. Subcontractors are required to comply with the same terms and conditions that apply to the provider through funding agreement clauses.

The Department has the capacity to suspend or terminate of funding arrangements, refuse to engage personnel or require them to be replaced where non-compliance with funding agreements and Departmental policies and procedures is identified, including where a risk to a child or young person's safety and wellbeing is identified.

Funding agreements are monitored and evaluated during implementation, at regular intervals through the life of the agreement, and upon completion as part of a quality management approach.



# 9

## Continuous improvement

*In all actions concerning children and young people, the best interests of the child or young person shall be a primary consideration. (Convention on the Rights of the Child, Article 3.1) [12]*

Table 9. Snapshot of Continuous improvement

### National Principle 9 Implementation of the National Principles for Child Safe Organisations is regularly reviewed and improved



- 9.1 The organisation regularly reviews, evaluates and improves child safe practices.
- 9.2 Complaints, concerns and safety incidents are analysed to identify causes and systemic failures so to inform continuous improvement.
- 9.3 The organisation reports on the finding of relevant reviews to staff, volunteers, community, families, and children and young people.

# Feedback and consumer experience

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The Department is committed to enhancing the experience of children, young people, their families and caregivers accessing its services and values their feedback.

Feedback, whether it is a complaint, compliment, or suggestion, provides the Department with another mechanism to support consumer engagement and participation in health care service improvement.

## Consumer Liaison Unit

The Department's Consumer Liaison Unit (CLU) coordinates, manages, and reports on compliments and complaints across the Department. The CLU is a function of the Quality and Patient Safety Service (QPSS).

Feedback is received by the CLU through various channels, including:

- over the phone
- in person
- feedback forms
- email
- CM9 online enquires
- Office of the Health Complaints Commissioner
- Ministerial liaison/Office of the Secretary, and
- Third Party Advocacy service.

Compliments are a consumer's way of showing appreciation for the experience and treatment they have received while in the care of the Department. Compliments and associated evidence are recorded

into the Department's safety and learning system by workers and finalised by the CLU. [149]

Processing and managing complaints is the responsibility of the CLU. The feedback process for complaints provides the opportunity for a person to have their issues resolved as well as ensuring that any risks are identified, and management plans are put in place to decrease the likelihood of the issue reoccurring.

Complaints are recorded and managed through the Department's preferred safety system. [96]

## Patient experience surveys

Surveying children, young people, their families and caregivers about their experiences enables a focus on quality improvement that is inspired by them. It identifies and verifies their experience of their health care journey. The Department is supported to analyse trends, compare, and implement improvement initiatives based on patient experience. QPSS teams oversee patient experience surveys and administer a consumer feedback form and email service. The Department will enable children, young people, their families and caregivers to provide their experience through patient experience surveys that are accessible and inclusive of diversity. [149]



## Quality and safety

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The Department will regularly review and improve its child safe practices in line with its Quality Governance Framework and key child safety and wellbeing indicators to effectively inform continuous improvement.

Reviews help to achieve the best outcomes for children, young people, their families, and caregivers and ensure the ongoing improvement of environments where children and young people feel safe and are safe. [150]

QPSS coordinates and promotes the provision of an integrated system of healthcare that actively manages patient safety and clinical quality. [151] [152] [153]The Department commits to the regular review and improvement of the implementation of the National Principles, including the development of measurable objectives and targets aimed at the elimination of safeguarding concerns to children and young people. Child safety and wellbeing performance and monitoring will be implemented at all levels of the organisation, such as child safety and wellbeing audit and risk management tools.

Organisational transparency will be ensured by sharing the outcomes of recommendations and lessons learnt from the review, investigation, and analysis of risks and safeguarding concerns involving children and young people.

Developing a mature system is a long-term goal that will be achieved through building on established foundations to strengthen the culture of child safety and wellbeing.

### Accreditation

The primary aims of the NSQHS Standards are to protect the public from harm and to improve the quality of health service provision. Hospital and healthcare services are required to be accredited to

the NSQHS Standards. The QPSS oversees the Department's compliance with the NSQHS Standards. [126]

The National Principles reflect strong parallels with the NSQHS Standards and associated quality and safety requirements of the Department.

### Performance and monitoring

Policy, Purchasing, Performance and Reform (PPPR) within the Department performs core roles including strategy and planning, purchasing, performance management, monitoring, reporting, and analysis. [154]

The Monitoring, Reporting, and Analysis (MRA) Unit within PPPR provides functions to:

- undertake statistical analysis and reporting of public health services to support the Department in its purchasing and system management roles
- develop and manage the Department's public reporting of official statistics on public health services and related aspects of the health system
- manage relationships with state, national or other bodies analysing and reporting statistical information on Tasmanian health services and related aspects of the health system
- design, evaluate and manage effective analytical and statistical frameworks, classifications and coding schema for reporting and analysis



- provide guidance and support for performance evaluation, statistical analysis, statistical reporting, and clinical coding
- contribute to national and international programs for developing statistical and reporting frameworks and tools. [155]

The Department's Child Safety and Wellbeing Service will provide operational oversight of the performance and monitoring of the child safe approach and provides this information to the MRA, Safeguarding Panel, Secretary, and Quality and Safety teams.

### Monitoring

The QPSS team monitors and reports on data and improvement opportunities in accordance with the NSQHS Standards relating to:

- risks relating to patient safety and quality
- patient safety events
- consumer complaints
- consumer feedback, and
- quality improvement.

### QPSS dashboards and reports

The Department's QPSS team presents three monthly electronic reports that include: [156]

- Safety Event/Consumer Feedback Dashboard
- Quality Improvement Activity (QIA) Report
- Risk/Policy/Compliance (RPAC) Dashboard

### Peak governance committees

The establishment and maintenance of systems and processes that shape, enable, and oversee the management of the Department constitutes its governance arrangements. It is the activity undertaken to formulate strategy, set policy, delegate responsibility, oversee management, and ensure that appropriate risk management and accountability

arrangements are in place throughout the Department. [157]

To provide focus and consistency within decision-making, executive committees have been established. The Health Executive is the lead governance committee and has been established to provide oversight and direction to the public health system, strengthen systems coordination and to ensure implementation of directions set by Government. Along with the Health Executive, the Department has nine other Committees.

The peak governance committees for safety and quality within the Department include:

- THS-South Quality, Safety & Clinical Risk Committee
- THS North Healthcare Quality Executive Committee, and
- Clinical Governance & Risk Committee (NW).

### Analysis and investigation

All safeguarding concerns require a level of analysis with a structured investigation using an agreed and validated methodology. Many of these methods described share common features across data collection, analysis, and recommendations development.

The aim of analysis or investigation is to understand what happened, and how and why it happened, to identify potential mitigating factors and establish further actions or improvements.

Analysis and investigation should be undertaken in a way that is proportionate to the seriousness, frequency of occurrence and severity of the concern.

The level and type of analysis or investigation will depend on a range of factors, such as the level of harm caused to a child or young person, the probability of recurrence, the complexity of factors that appear to have influenced the concern, the



residual risk of harm and the extent of the impact on future care and service delivery.

The Department uses best practice analysis and investigation techniques when managing safeguarding concerns to children and young people. A variety of analysis, investigation and management methodologies are recommended within the Australian Commission on Safety and Quality in Health Care (ACSQHC) *Measurement for Improvement Toolkit* and the *Patient Safety Essentials Toolkit* by the Institute for Healthcare Improvement. These techniques include: [158] [159]

### *Root cause analysis*

Root cause analysis (RCA) is the process of discovering the root causes of problems to identify appropriate solutions. RCA is defined as a collective term that describes a wide range of approaches, tools, and techniques used to uncover causes of problems. [160]

### *The London Protocol*

The London Protocol is designed by the Clinical Safety Research Unit, Imperial College London and intends to provide a comprehensive and thoughtful investigation and analysis of a clinical incident, going beyond the more usual identification of fault and blame. [161]

### *Concise Incident Analysis*

The Concise Incident Analysis (CIA) methodology and tool was developed by the World Health Organization (WHO) Patient Safety Programme.

Concise incident analysis is defined as an analysis by a person(s) with knowledge of the incident analysis process, human factors, and effective solutions development in health care, with input gathered from patients, family members, staff, and physicians local to the event as well as organizational or external experts. [162] [163]

## Trend analysis and monitoring

The Department's Child Safety and Wellbeing Service will be responsible for liaising with QPSS and Human Resources to monitor and identify trends, patterns or systemic weaknesses relating to child safeguarding across the service.

### *Lookback review*

A lookback review is a type of investigation that is used when a group of patients are or may be adversely affected by a safety event or group of safety events otherwise called an adverse group event. A lookback review must be undertaken:

- when an adverse group event occurs or is highly likely to have occurred
- where there is concern that multiple patients may be exposed to harm or risk of harm, or
- as directed by the Secretary or Minister for Health.

Lookback reviews in relation to child safeguarding will be undertaken by the Department's Child Safety and Wellbeing Children Service in accordance with policy directives.



## Internal audit

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The Internal Audit function is an independent and objective quality improvement and assurance activity that works to understand and assess the Department's governance, risk management, and control environment, to provide recommendations for improvement to their efficiency and efficacy.

An internal audit may assess underlying systems and procedures for compliance with the requirements of the Framework.

The overall focus of this assessment will be one of continuous improvement to Department activities and provide evidence of how the Department is a child safe organisation through its governance, leadership, operations, and culture. [164] [165]

# 10

## Accessible and inclusive child safety and wellbeing policies

*The Department has a responsibility to ensure children's rights are protected. They can help families to protect children's rights and create an environment where children can grow and reach their potential. (Convention on the Rights of the Child, Article 4) [12]*

Table 10. Snapshot of Accessible and inclusive child safety and wellbeing policies

### National Principle 10 Policies and procedures document how the organisation is safe for children and young people



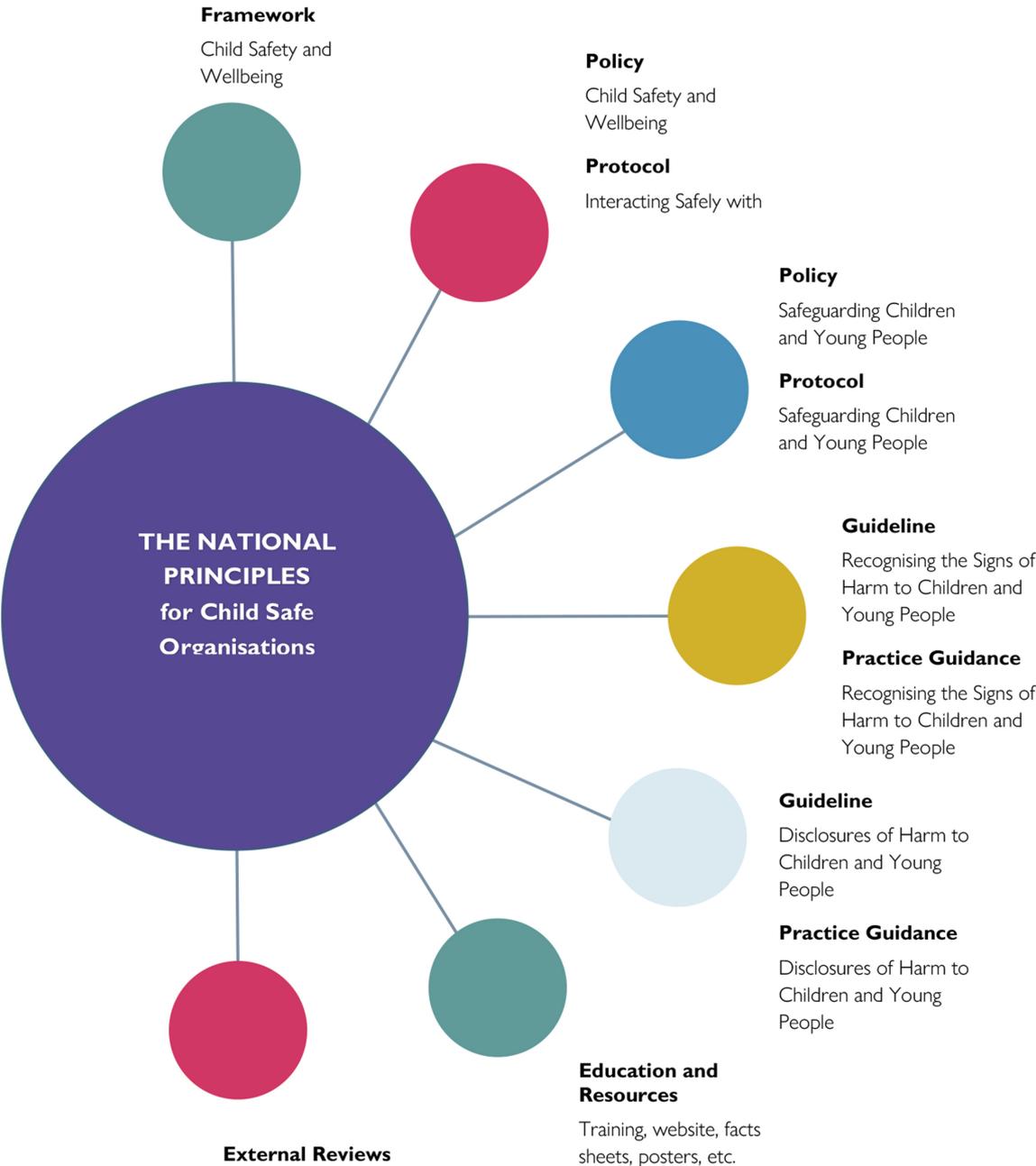
- 10.1 Policies and procedures address all national child safe principles.
- 10.2 Policies and procedures are documented and easy to understand.
- 10.3 Best practice models and stakeholder consultation informs the development of policies and procedures.
- 10.4 Leaders champion and model compliance with policies and procedures.
- 10.5 Staff and volunteers understand and implement policies and procedures.

# Policy framework

The Department recognises the importance of having a clearly documented child safety and wellbeing policy framework that ensures consistent application of child safe practices across the organisation.

A child safety and wellbeing policy framework also enables the Department to examine, through review processes, adherence to child safety and wellbeing principles and practices.

The overarching policy framework underpinning the Department’s approach to child safety and wellbeing is outlined in below.



## Consultation

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The Department seeks to ensure that its child safe approach is comprehensive, robust, evidence-based, and sensitive to the needs and circumstances of all children, young people, their families, and caregivers.

The Framework was developed through a collaborative and consultative process, building on existing frameworks and systems.

Best practice research, existing global, national, and local models, and consultations with a wide range of stakeholders has informed the development of the Department's approach to child safety and wellbeing in a context specific to the healthcare environment.

The Department acknowledges the significant contributions of everyone involved in the development of the Framework. The contributions of all involved have helped and continue to help shape a health environment that is dedicated to the protection of the rights, safety, and wellbeing of all children and young people.



# Appendix I

## The National Principles for Child Safe Organisations: How do I contribute to child safety and wellbeing?

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All workers have a responsibility to protect the health, safety, welfare, and wellbeing of children and young people with whom they have contact. The following outlines how workers can contribute to upholding the National Principles and is based on the training resources developed by the Australian Human Rights Commission.

### National Principle 1

*Child safety and wellbeing is embedded in organisational leadership, governance and culture.*

- Prioritise the best interests of children and young people in your daily work.
- Understand your duty of care to protecting the safety and wellbeing of all children and young people.
- Know the rights of every child and young person.
- Create a welcoming, inclusive and supportive environment for children and young people.
- Understand and comply with the Department's child safe policies and procedures to make sure you know how you can keep them safe.
- Be aware of and understand the governance structures and reporting lines that exist for child safety and wellbeing.

- Understand your responsibilities and legal obligations around recordkeeping and information sharing.
- Be open, transparent, and willing to listen.
- Stay informed and openly discuss issues regarding the safety and wellbeing of children and young people.
- Help identify and mitigate risks to children and young people.

### National Principle 2

*Children and young people are informed about their rights, participate in decisions affecting them and are taken seriously.*

- Support children and young people to understand their rights and the Department's commitment to their safety and wellbeing.
- Help children and young people to find information about their rights, and the different ways they can raise concerns.



- Check-in regularly with children and young people.
- Let children and young people know who they can go to if they need to talk to someone.
- Encourage and empower children and young people to ask questions and participate in decision-making about the things that affect them.
- Support children and young people to know of what they can expect from you and the people around you, and what is safe and unsafe behaviour both in-person and online.
- Teach children and young people about the signs of harm and the role that they can take in protecting themselves and their peers.
- Do what you say you will do.
- Use inclusive and empowering, child-friendly language in everyday activities.
- Develop your skills to engage effectively and appropriately with children and young people.

### National Principle 3

*Families and communities are informed and involved in promoting child safety and wellbeing.*

- Respect that families and caregivers have primary responsibility for keeping their child or young person safe.
- Involve families and caregivers in the care of their child or young person.
- Support families and caregivers to understand the rights of their child or young person.
- Help families and caregivers to find information about rights, and the different ways they can raise concerns.
- Provide families and caregivers with information that is accessible and tailored to their needs.

- Encourage and support families and caregivers to talk to their child or young person about safety and wellbeing.
- Help families and caregivers to know of what they can expect from you and the people around you, and what is safe and unsafe behaviour.
- Encourage and empower families and caregivers to provide feedback.

### National Principle 4

*Equity is upheld and diverse needs respected in policy and practice.*

- Recognise the diverse backgrounds needs and circumstances of children and young people and be alert to the challenges they may face due to their diversity.
- Tailor your communication to suit the different cultural backgrounds, needs and abilities of children and young people, and their families and caregivers.
- Make sure information and communication is age-appropriate and is provided in an appropriate language and format.
- Stay up to date with training, education, strategies and resources available to help you meet the diverse needs of children and young people, and their families and caregivers.
- Understand and comply with the Department's policy directives on diversity and inclusion, and respectful behaviour.



## National Principle 5

*People working with children and young people are suitable and supported to reflect child safety and wellbeing values in practice.*

- Take up training and development opportunities to better understand how you can keep children and young people safe and well.
- Undergo appropriate background checks and communicate relevant information if anything changes.
- Understand and practice safe behaviours when providing care to children and young people.
- Understand your reporting obligations and know where to report concerns.
- Normalise and encourage appropriate behaviour between children and young people and the people around them.
- Maintain a current knowledge and understanding of child development where relevant to your role.
- Maintain relevant experience with working with children and young people where relevant to your role.
- Understand and follow policies and procedures and know your responsibilities.

## National Principle 6

*Processes to respond to complaints and concerns are child focused.*

- Take children and young people seriously when they raise concerns and provide feedback and take action to keep them safe.
- Remain alert to the signs of harm and risks to children and young people and the ways different children and young people may disclose.

- Always raise and address concerns as soon as you recognise them.
- Normalise and encourage a safety culture of reporting and learning from all concerns.
- Understand and comply with the Department's policies and procedures about safeguarding children and young people.
- Understand and comply with your legal obligations to report harm to children and young people.
- Raise awareness about safety and wellbeing, and how to raise concerns.
- Let children and young people, and their families and caregivers know how to raise concerns, and what will happen when a concern is reported.
- Be transparent about your information sharing responsibilities and situations where you may have to tell someone else about a concern.

## National Principle 7

*Staff and volunteers are equipped with the knowledge, skills and awareness to keep children and young people safe through ongoing education and training.*

- Take up training and development opportunities to better understand how you can keep children and young people safe and well.
- Be aware of local support services and resources to help support children and young people, and their families and caregivers.
- Stay up to date with the latest evidence and best practice relevant to your role.
- Talk with your manager about professional and performance development and supervision strategies that can help you better keep children and young people safe and well.
- Talk with your colleagues about how to best uphold child safety and wellbeing in practice.



- Join a professional association or peak body and encourage your peers to do the same where relevant to your practice.

## National Principle 8

*Physical and online environments promote safety and wellbeing while minimising the opportunity for children and young people to be harmed.*

- Review if there are any risks in your work environment or if there's anything you think we can do to improve the wellbeing and safety of children and young people.
- Help children and young people to understand what a safe environment looks like and encourage them to seek help if they come across something that makes them feel unsafe.
- Let children and young people know about spaces that are off limits or out of bounds, such as storerooms, dark areas, or staff rooms.
- Comply with the Department's policy directives regarding online environments, images and media.
- Support children and young people to engage safely online.
- Understand what information and facilities you are allowed to access and what is restricted.

## National Principle 9

*Implementation of the national child safe principles is regularly reviewed and improved.*

- Stay up to date with any new or changed child safe policies and procedures or legal requirements that may affect your obligations.
- Stay open to suggestions for improvement and seek advice from relevant experts if you unsure about the best approach.
- Make suggestions if you feel something could be improved.

## National Principle 10

*Policies and procedures document how the organisation is safe for children and young people.*

- Understand and comply with the Department's child safe policies and procedures to make sure you know how you can keep them safe.
- Make sure the Department's child safe policies and procedures can effectively help you to uphold the safety and wellbeing of children and young people and make suggestions if you feel something could be improved.



# Glossary

accountable	To be 'required or expected to justify actions or decisions; responsible.'
caregiver(s)	Any related or nonrelated person who has the responsibility for the protection, care, or custody of a dependent child or young person as a result of assuming the responsibility voluntarily, by contract, through employment, or by order of the court.
child	Any person under 18 years of age.
child abuse	All forms of physical and/or emotional ill-treatment, sexual abuse, neglect, or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to a child or young person's health, survival, development, or dignity in the context of a relationship of responsibility, trust, or power.
child-related work/activities	Any work or roles that involve contact directly with children and young people, or that will or may involve contact with children and young people that is a usual part of, and more than incidental to, the service provision. Contact with children and young people includes physical contact, face-to-face contact, oral communication, written communication or electronic communication.
cumulative harm	Cumulative harm is the outcome of multiple episodes of abuse or neglect experienced by a child or young person. Cumulative harm refers to the effects of patterns of circumstances and events in a child or young person's life which diminish a child's sense of safety, stability and wellbeing.
disclosure	A disclosure is the process by which: <ul style="list-style-type: none"><li>• a child or young person conveys or attempts to convey that they are being or have been harmed.</li><li>• an adult conveys or attempts to convey that they were harmed as a child and/or young person.</li></ul>
emotional harm or abuse	Inappropriate verbal or symbolic acts towards a child and/or failure over time to provide them with adequate non-physical nurturing and emotional availability. Such acts of commission or omission are likely to damage a child's self-esteem or social competence.
family	A group of people consisting of: <ul style="list-style-type: none"><li>• The partner of the relevant person, or</li><li>• A parent of the relevant person, or</li><li>• A sibling of the relevant person, or</li><li>• A child of the relevant person, or</li></ul>



	<ul style="list-style-type: none"> <li>Any other person who should be treated for the purposes of this definition as a partner, parent, sibling, or child of the relevant person. This may cover situations such as stepchildren or foster children.</li> </ul>
gender	A person's sense of whether they are a man, woman, non-binary, agender, genderqueer, genderfluid, or a combination of one or more of these definitions. Gender can be binary (either a man or a woman), or non-binary (including people who have no binary gender at all and people who have some relationship to binary gender/s).
gender diverse	A term that describes a person who feels that their gender identity doesn't fit the categories associated with their assigned sex.
grooming	Actions deliberately undertaken with the aim of befriending and establishing an emotional connection with a child or young person, to lower the child or young person's inhibitions in preparation for sexual activity with the child or young person.
harmful sexual behaviour	Harmful sexual behaviour (HSB) is developmentally inappropriate sexual behaviour displayed by children and young people which is harmful or abusive.
intersex	An intersex person is born with atypical natural variations to physical or biological sex characteristics such as variations in chromosomes, hormones or anatomy. Intersex traits are a natural part of human bodily diversity. Not all intersex people use the term intersex.
LGBTIQ+	Lesbian, Gay, Bisexual, Trans/transgender and gender diverse, Intersex, Queer/questioning, and Asexual
mandatory reporting	Mandatory reporting is when the law requires a person to report known or suspected cases of abuse and neglect.
neglect	<p>Isolated incidents or a pattern of failure over time to provide for the development and wellbeing of the child or young person in one or more of the following areas:</p> <ul style="list-style-type: none"> <li>health</li> <li>education</li> <li>emotional development</li> <li>nutrition</li> <li>shelter and safe living conditions.</li> </ul>
open disclosure	An open discussion with a patient about an incident(s) that resulted in harm to that patient while they were receiving health care. The elements of open disclosure are an apology or expression of regret (including the word 'sorry') a factual explanation of what happened, an opportunity for the patient, their family, and carers to relate their experience, and an explanation of the steps being taken to manage the event and prevent recurrence. Open disclosure is a discussion and an exchange of information that may take place over several meetings.



physical harm or abuse	The intentional use of physical force against a child or young person that results in – or has a high likelihood of resulting in – harm for the child or young person’s health, survival, development or dignity. This includes hitting, beating, kicking, shaking, biting, strangling, scalding, burning, poisoning and suffocating.
reasonable belief	<p>A reasonable belief is more than suspicion. There must be some objective basis for the belief. However, it is not the same as having proof and does not require certainty. For example, a person is likely to have a reasonable belief if they:</p> <ul style="list-style-type: none"> <li>• Observed the event themselves.</li> <li>• Heard directly from a child that the event occurred.</li> <li>• Received information from another credible source (including another witness).</li> </ul>
sexual harm or abuse	The involvement of a child or young person in sexual activity that they do not fully comprehend, are unable to give informed consent to, or for which they are not developmentally prepared, or else that violates the laws or social taboos of society. Children and young people can be sexually abused by both adults and other children or young people who are in a position of responsibility, trust or power over the victim.
third-party provider	Any individual or organisation which receives funding from the Department, including through grants or procurements.
transgender	Of, relating to, or being a person whose gender identity, gender expression or behaviour differs from that typically associated with the sex to which they were assigned at birth.
victim and survivor	A person who has been harmed or abused as a child in an institutional context. The Department recognises that some people prefer ‘survivor’ because of the resilience and empowerment associated with the term. The Department recognises that some people who have experienced abuse do not feel that they ‘survived’ the abuse, and that victim is more appropriate. The Department also recognises that some people may have taken their lives as a consequence of the abuse they experienced and that the term ‘victim’ is more appropriate in these circumstances. The Department also recognise that some people do not identify with any of these labels to define their experiences. [111]
vulnerable person	Any person who is or may be unable to take care of themselves or is unable to protect themselves against harm or exploitation by reason of age, illness, trauma or disability, or any other reason.
workers	<p>All employees, consultants, contractors, or volunteers engaged by the Department.</p> <p>This includes an individual who is engaged as an employee, a contractor or sub-contractor, an agent, an apprentice, a consultant, a person who is self-employed, a person who is carrying out work for a defined period, a volunteer, or a work experience student.</p>
young person	A person who is 12 years old or older but under 18 years of age.



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