

Institute of Sisters of Mercy of Australia and Papua New Guinea

Safeguarding Audit Report August 2021

National Catholic Safeguarding Standards

Report prepared by:



A safe Church for everyone

Australian Catholic Safeguarding Ltd acknowledges the lifelong trauma of abuse victims, survivors and their families, the failure of the Catholic Church to protect, believe and respond justly to children and vulnerable adults, and the consequent breaches of community trust.

Australian Catholic Safeguarding Ltd is committed to fostering a culture of safety and care for children, and adults at risk.

This report is available on the Church Reports page of the ACSL website

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1. Executive Summary

1.1 Context

Australian Catholic Safeguarding Ltd (ACSL) was established in December 2020 and is a company limited by guarantee, owned by the Australian Catholic Bishops Conference, Catholic Religious Australia and the Association of Ministerial Public Juridic Persons. ACSL has safeguarding responsibilities at a national level and brings together the work of two previous entities, Catholic Professional Standards Ltd (CPSL) and the Australian Catholic Centre for Professional Standards (ACCPS).

ACSL works with the Catholic Church in Australia to support the maintenance of a Safe Church for all and is committed to fostering a nationally consistent culture of safety and care throughout the Church. This includes providing a range of services to the Church to support the implementation of the <u>National Catholic</u> <u>Safeguarding Standards</u> (NCSS), a framework for the protection and care of adults at risk and children.

ACSL's core organisational values are courage, compassion and honesty. These values guide the way we manage our organisation and inform cultural change within the Catholic Church and the wider community. We take our duty to care for and protect all children and adults at risk seriously, and have zero tolerance for abuse of any kind.

ACSL continues the mandate of CPSL in the maintenance of the NCSS and the publication of reports which demonstrate a Church entity's adherence to the NCSS. This audit report includes the results of the NCSS compliance assessment for the Institute of Sisters of Mercy of Australia and Papua New Guinea (ISMAPNG).

1.2 Background

The history of the Institute begins in Ireland on December 12, 1831, when Catherine McAuley, along with two companions, Anna Maria Doyle and Elizabeth Harley, professed their vows and became the first Sisters of Mercy. In 1846, just five years after Catherine's death, the Sisters of Mercy made a foundation in Perth, Western Australia and soon thereafter foundations and communities of Sisters of Mercy spread throughout Australia. In 1956, the first Sisters of Mercy in Papua New Guinea arrived in Goroka, from Australia.

In 1905, the Australian Bishops urged congregations of common origin to unite so that their capacity for the vital work of Catholic education, as well for as other ministries would be strengthened. Although there had been a number of movements towards unity for the various Mercy congregations in Australia, a most significant step in this direction occurred with the creation of the Institute of the Sisters of Mercy of Australia (ISMA) on December 12, 1981. For thirty years, ISMA, which encompassed the 17 independent Australian Congregations of Sisters of Mercy and the Autonomous Region of Sisters of Mercy in Papua New Guinea (PNG), engaged fruitfully in God's mission.

In December 2011, the congregations of Adelaide, Ballarat East, Bathurst, Cairns, Goulburn, Grafton, Gunnedah, Melbourne, Perth, Rockhampton, Singleton, Townsville, West Perth, Wilcannia–Forbes, as well as the autonomous region of PNG, came together as one new congregation, to be known as Institute of Sisters of Mercy of Australia and Papua New Guinea (ISMAPNG).

There are approximately 665 Sisters of Mercy throughout Australia and PNG and the Institute employs over 100 staff operating from 6 offices and locations, including Sydney, Melbourne, Perth, Canberra, Adelaide and Brisbane. The Institute Leader and her Council (five Sisters in total) form the leadership team of the Institute and they are supported by eight Community Leaders, an Executive Director and professional services staff.

ISMAPNG is dedicated to serving people who suffer from injustices related to poverty, sickness or lack of education and the Sisters work in a variety of fields and professions to support this cause.

ISMAPNG has been assessed as a "Category One" Church entity for application of the NCSS (Working Children). There are 10 NCSS Standards, 49 NCSS Criteria and 111 NCSS Indicators that apply to Category One entities. For further details of the category system and the Indicators which are applicable, refer to the NCSS documentation available on the Audit Framework page of the <u>ACSL website</u>.

Our assessment of ISMAPNG's compliance with the Category One Indicators is detailed in Section 2 of this report. Our recommendations for improvement, including management responses, are included in Section 3 of this report.

The full audit report is also publicly available on the Church Reports page of the ACSL website.

1.3 Audit Approach

The NCSS seek to build a culture of shared responsibility for safeguarding and to ensure that policies, practices and codes of behaviour work in unison to prevent, detect and respond appropriately to potential or actual incidents of child abuse.

In this context, the audit processes we have undertaken are intended to provide reasonable assurance that safeguarding controls have been designed appropriately and are operating effectively. Accordingly, this report provides a point-in-time assessment of the safeguarding practices implemented by ISMAPNG and the extent of its compliance with the requirements of the NCSS.

The focus of this audit was on safeguarding practices implemented within the formal ministries governed by ISMAPNG which are not subject to external assurance processes (i.e. non-regulated activities), as well as the application of safeguarding practices within ministries and activities conducted individually by Sisters, for example through individual work in parishes, dioceses and/or other Catholic organisations or associations.

This audit did not include review of any regulated ministries governed by ISMAPNG (e.g. Mercy Health, Mercy Education etc.) and the findings, recommendations and management actions in this report should not be construed as applying in any way to the activities of the regulated ministries.

Our audit procedures included:

- interviews, observations and enquiry with the ISMAPNG leadership team and community leaders, and other relevant personnel;
- documentation and policy review;
- assessment of the design of safeguarding controls implemented by ISMAPNG within its unregulated ministries; and
- testing of the operation of safeguarding controls implemented by ISMAPNG within its unregulated ministries.

The specific ministries reviewed as part of this audit are as follows:

- Mercy Works Ltd, including Mercy Works Limited PNG;
- McAuley Ministries Ltd;
- Catherine McAuley Services Ltd; and
- Mercy Associates.

We also selected a random sample of 30 Mercy Sisters from the wider ISMAPNG congregation to assess their knowledge and understanding of congregational safeguarding practices and review how safeguarding practices are implemented within their daily work and ministry (including where this is performed in a formal or volunteer capacity for other organisations). We also interviewed a sample of four Sisters from the Family Care Sisters (Grey Sisters) and Franciscan Missionaries of the Divine Motherhood, as these two religious institutes come under the governance of ISMAPNG for administrative purposes.

This audit was commenced in September 2020 when restrictions on travel and face-to-face meetings where still in place due to the coronavirus pandemic.

As such, the review of documents, assessment of policies and procedures, discussions and interviews with personnel were largely conducted remotely, using email, photos, video conferencing and other electronic communication methods.

1.4 Overall Audit Findings

Compliance with the NCSS Indicators has been assessed using a four-point maturity scale.¹

Our assessment indicates that ISMAPNG has fully implemented or has substantially progressed in the implementation of 99 (92%) of the 103² Indicators which are relevant to their operations.

Five Indicators (4%) are in the initial stages of implementation. A further four Indicators (4%) are yet to be addressed. These relate to:

- 1. Updating the Complaints Management Policy to include guidance on understanding barriers that prevent children from disclosing abuse, and barriers for adults recognising and/or responding to such disclosures;
- 2. Updating the Complaints Management Policy to differentiate between the appropriate response to a child with a concern or complaint, as distinct from an adult bringing forward a complaint of abuse suffered as a child;
- 3. Providing training on cultural safety; and
- 4. Developing guidelines for managing persons of concern who may attend ministry functions, activities or events.

The key findings from the audit are summarised below.

NCSS Standard 1 – Committed leadership, governance and culture

ISMAPNG has a Safeguarding Advisory Committee and Safeguarding Working Group, made up of representatives from each of the ministries, who collectively provide oversight over the implementation and monitoring of compliance with the NCSS. In addition, the Director of Standards and Legal has safeguarding responsibilities for the Institute on a day-to-day operational basis.

ISMAPNG has a comprehensive suite of safeguarding policies and materials, including Safeguarding Policy, Commitment Statement and complaints procedures, which are easily accessible on the safeguarding page of their website. In carrying out their governance responsibilities, the Institute Leadership Team (ILT), Board and Committee members are aware of the policies and procedures and the topic of safeguarding is a permanent standing item on the agendas of the ILT, Board and Committee meetings. All ILT, Board and Committee members regularly engage in safeguarding training to ensure that the policies and procedures are a high priority in their overall decision making.

The Institute has developed a Code of Conduct booklet, which outlines in specific detail the Institute's safeguarding commitments and principles, including acceptable and unacceptable behaviours. The Code of Conduct is used as the basis for all safeguarding training and has also been translated into the local language for use with ISMAPNG's ministries in PNG. Whilst the Code of Conduct is comprehensive, it needs to be updated to make particular reference to Aboriginal and Torres Strait Islander children and children from culturally and linguistically diverse backgrounds.

ISMAPNG has a strong framework around risk management with risk assessments having been completed for all key ministries. The Institute is in the process of rolling out the NCSS in its overseas ministries and will be developing a formal plan for this initiative.

Whilst the Institute has a detailed Archives Access and Use Policy, this document currently states that records are maintained for a period of 30 years, instead of the required 50 years as per the NCSS.

¹ Refer Appendix A for definitions of the maturity scale used for the Compliance Assessment.

² Of the 111 NCSS Indicators applicable to Category One, 3 of these are not relevant to ISMAPNG's operations.

NCSS Standard 2 - Children are safe, informed and participate

Where the ministries are involved with children directly, staff and personnel engage with children to ensure their safety at all times. This engagement has its foundation in the suite of policies and procedures which apply across the Institute.

At age appropriate levels and with cultural sensitivity, children are informed of issues and procedures which assist them to understand the meaning of a safe environment and their personal safety.

NCSS Standard 3 – Partnering with families, carers and communities

Sisters within ISMAPNG work in a variety of fields and professions, which may include engagement with or direct ministry to children. Where this is the case, strategies are in place to obtain feedback from families and children, on relevant safeguarding policies and practices.

For example, personnel working in Mercy Works use a variety of methods to collect responses from school coordinators, volunteers and students regarding safeguarding practices. This includes anecdotal feedback from families and students, as well as formal surveys.

NCSS Standard 4 – Equity is promoted and diversity is respected

ISMAPNG has produced child-friendly materials (posters) which inform children of support and complaints processes available to them. These posters are displayed in relevant offices and key locations.

Whilst the complaints handling procedure is available on ISMAPNG's website, we note that the Complaints Management Policy does not contain guidance on understanding barriers that prevent children from disclosing abuse, and barriers for adults recognising and/or responding to such disclosures.

NCSS Standard 5 – Robust human resource management

ISMAPNG has comprehensive recruitment policies and procedures that outline safeguarding requirements in its advertising, vetting and screening of personnel. However, the "Procedures for Mandatory WWCC and Police Checks" do not specify actions required where a working with children check is suspended or has lapsed.

Details of working with children checks for employees are maintained by the various ministries. In addition, a central database of working with children checks for employees is in development and will be maintained by the safeguarding office going forward.

Safeguarding training is provided to employees and volunteers upon commencement. However, a formal induction checklist should be developed for new employees, to provide an appropriate safeguarding induction in between the formal training sessions.

ISMAPNG has a developed a comprehensive professional supervision program which includes various methods of supervision, including formal supervision agreements with accredited supervisors, group supervision sessions as well as reflective ministry circles established with the assistance of the community leaders.

This tiered approach to supervision caters for all Sisters, depending on their level of ministry and engagement with the community, and is an excellent example of a tailored and fit-for-purpose supervision program to meet the Institute's needs. The supervision program is also available for relevant staff.

NCSS Standard 6 – Effective complaints management

The ACSL audit does not re-assess the outcomes of individual complaints. The audit focuses on reviewing current complaint management practices, including policies and procedures in place to prevent, detect, report and respond to all incidents and complaints, and the associated training, awareness and education available for all personnel.

The Institute has a formal Complaints Management Policy which provides guidance on handling complaints. Audit procedures indicate that complaints handling procedures are operating effectively.

However, the Complaints Management Policy document should be updated, as follows:

- Whilst all Sisters interviewed indicated an awareness of the appropriate response should they receive a complaint or disclosure, the Complaints Management Policy does not specifically state the requirement to report to police where it is believed that a child is in imminent danger. This should be stated in the Policy and also in the "reporting process pocket cards" which have been distributed to the Sisters.
- The Complaints Management Policy and procedures do not differentiate between a child victim and an adult bringing forward a complaint of abuse suffered as a child. Whilst many Sisters would not minister directly to children, it is possible that they could receive a disclosure from a child in the course of their daily life or other duties. As such, Sisters should be provided with information on how to respond to a child in this situation, if required.
- The Complaints Management Policy is primarily focused on historical complaints and does not provide for complaints which are current, for example, concerns or complaints brought by children. As such, there is currently no discussion in the document of the need to prioritise the safety of the complainant.

NCSS Standard 7 – Ongoing education and training

With over 600 Sisters and over 100 staff and volunteers, the process of ensuring all ISMAPNG personnel have received the relevant safeguarding training is complex and lengthy. We note that basic safeguarding training, based on the Code of Conduct, has been rolled out to the majority of Sisters, volunteers and staff. In addition, more in-depth safeguarding training has been provided to personnel in specific ministries, for example, Mercy Works and McAuley Ministries.

However, the general safeguarding training does not cover risk assessment, e-safety or record keeping, and does not specifically cover the topic of complaints handling and reporting. In addition, the training provided to personnel who work with or minister to children (for example, personnel in Mercy Works and McAuley Ministries) should be updated to include the topic of cultural safety.

NCSS Standard 8 – Safe physical and online environments

Our interviews with Sisters indicated that online risks are well understood and have been considered in risk assessments, as appropriate.

ISMAPNG has a web filter enabled that prevents personnel accessing inappropriate sites on computers when working in offices. Further, every month ISMAPNG receives an executive report from the internet/hosting provider (Invotec) providing information on unusual activity, sites visited etc. This also includes sites/services accessed on the office Wi-Fi on mobile phones.

We note that there are currently no policies or guidelines for managing persons of concern who may attend ministry functions, activities or events. Whilst this is not considered a major risk to the Institute (as most people attending ministry events would be known to the Institute and it is unlikely a "person of concern" would be attending), such guidelines should be developed and distributed to relevant ministries, for example Mercy Associates, where existing members may sometimes bring members of the public to their meetings/events.

We also note that some ministries hire out their facilities. A hire form/agreement should be developed to make potential hirers of ISMAPNG's facilities aware of their safeguarding requirements and expectations.

NCSS Standard 9 – Continuous improvement

ISMAPNG has a formal Safeguarding Implementation Plan, including self-audit and monitoring processes, which will be updated to include the actions arising from the ACSL audit.

NCSS Standard 10 – Policies and procedures support child safety

Key policies and procedures relating to safeguarding requirements are in place and operating effectively.

The following table shows the overall compliance assessment for each of the Standards.

| | ş | (0 | Asses | sment o | f Compli | ance |
|---|-------------------------------------|--------------------|-------------------------|------------------------|---------------------|------------------|
| National Catholic Safeguarding Standard | # NCSS Indicators (Category One) | Not Relevant to DS | Managed & measurable | Defined & developed | Initial / Ad hoc | Not addressed |
| 1: Committed leadership, governance & culture | 16 | - | 13 | 3 | - | - |
| 2: Children are safe, informed and participate | 5 | 1 | 4 | - | - | - |
| 3: Partnering with families, carers and communities | 6 | - | 6 | - | - | - |
| 4: Equity is promoted and diversity is respected | 4 | - | 1 | 2 | - | 1 |
| 5: Robust human resource management | 23 | - | 20 | 3 | - | - |
| 6: Effective complaints management | 24 | - | 19 | 3 | 1 | 1 |
| 7: Ongoing training & education | 9 | - | 5 | - | 3 | 1 |
| 8: Safe physical and online environments | 10 | - | 8 | - | 1 | 1 |
| 9: Continuous improvement | 8 | 2 | 6 | - | - | - |
| 10: Policies and procedures support child safety | 6 | - | 5 | 1 | - | - |
| TOTAL | 111 | 3 | 87 | 12 | 5 | 4 |
| | | · | 99 (9 | 2%) | 9 (8 | 3%) |

Audit recommendations are classified according to priority and urgency for remediation.³

There are no Priority 1 (high rated) audit recommendations for the ISMAPNG.

There are five Priority 2 (medium rated) recommendations and four Priority 3 (low rated) recommendations, which are detailed in Section 3 of this report.

We would like to thank the ISMAPNG leadership team and all personnel who were involved in the audit for their cooperation and assistance.

³ Refer Appendix B for definitions of the Priority ratings used for audit recommendations.

2. Assessment of Compliance with NCSS Indicators

| Standa | rd 1 | Committed leadership, gove | rnance and cu | ılture | | |
|---------------------------|---|---|-------------------------|------------------------|--------------------|------------------|
| Child so | afeguarding is embeddea | in the entity's leadership, gov | vernance and | culture | | |
| | on 1.1 - The entity publicly arding and takes a zero-to | commits to child lerance approach to child | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
| 1.1.1 | | guarding Policy that is approved h Authority and/or relevant licly available. | \checkmark | | | |
| 1.1.2 | | d Safeguarding Commitment displayed and publicly available. | \checkmark | | | |
| Observa Require | | n place. No recommendations for | · improvement i | noted. | | |
| | ed at all levels of the entit | ng culture is championed and ay from the top down and | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
| 1.2.1 | maintain an entity's cultu promoting child safeg emphasising that child responsibility; and | | √ | | | |
| 1.2.2 | highest level of leadership | of child safeguarding practices, arding Policy and related | ~ | | | |
| 1.2.3 | The entity appoints and p Safeguarding Co-ordinato responsibilities for safegu religious institute or mini | r(s), with clearly defined arding children at diocesan, | \checkmark | | | |
| 1.2.4 | | child safeguarding is everyone's owered to provide input on s. | \checkmark | | | |
| Observa Require | | n place. No recommendations for | improvement i | noted. | | |
| implem | on 1.3 - Governance arran ientation of a Child Safeg activities. | - | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
| 1.3.1 | Governance arrangements safeguarding roles and res accountability for safeguar | | \checkmark | | | |
| 1.3.2 | Where the Church Authori countries other than Austr Standards taking into acco declarations and local legis | alia, the entity must apply these unt relevant international | | \checkmark | | |

Observations:

1.3.2 ISMAPNG is in the process of implementing the NCSS within its operations in PNG and overseas ministries. Refer recommendation #1.

| Criterion 1.4 - A Code of Conduct provides guidelines for personnel on expected behavioural standards and responsibilities. | | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
|---|---|-------------------------|------------------------|--------------------|------------------|
| 1.4.1 | The Code of Conduct explicitly and equally applies to all personnel and provides guidance on appropriate and expected standards of behaviour of personnel towards children. | \checkmark | | | |
| 1.4.2 | The Code of Conduct is written in accessible language and communicated to personnel, children, families and carers. | \checkmark | | | |
| 1.4.3 | The Code of Conduct takes into account the needs of all children, paying particular attention to Aboriginal and Torres Strait Islander children, children with disability, children from culturally and linguistically diverse backgrounds and children with particular vulnerabilities, for example, children who can't live at home. | | \checkmark | | |

Observations:

1.4.3 The Code of Conduct does not make particular reference to Aboriginal and Torres Strait Islander children or children from culturally and linguistically diverse backgrounds, as required by Indicator 1.4.3. Refer recommendation #2.

| | on 1.5 - The entity has risk management strategies g on preventing, identifying and mitigating risks to n. | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
|-------|---|-------------------------|------------------------|--------------------|------------------|
| 1.5.1 | The entity has a clearly documented child safeguarding risk management plan, as part of its overall risk management strategy, which considers actual and potential risks relating to children. | \checkmark | | | |
| 1.5.2 | The entity has appropriate risk management processes in place to assess, evaluate, review and oversee the safeguarding of children participating in, or receiving, ministries offshore including cultural immersions, pilgrimages, solidarity campaigns and world youth days. | \checkmark | | | |
| 1.5.3 | Leaders of the entity manage safeguarding risks effectively, through regular identification, monitoring, reporting and review of risks. | \checkmark | | | |

Observations:

Requirements of the Indicators are in place. No recommendations for improvement noted.

| Criterion 1.6 - Personnel understand their obligations on information sharing and record keeping. | | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed | | |
|---|--|-------------------------|------------------------|--------------------|------------------|--|--|
| 1.6.1 | The entity has documented information sharing and record keeping policies and procedures which are communicated to personnel. | \checkmark | | | | | |
| 1.6.2 | The entity's information sharing and record keeping policies and procedures relating to all aspects of child safeguarding, including incidents and complaints, apply sound record keeping principles. | | \checkmark | | | | |
| Observa | Observations: | | | | | | |

1.6.2 The Archives Access and Use Policy states that records are maintained for a period of 30 years, instead of the required 50 years as per NCSS 1.6.2. Refer recommendation #3.

| Standa | ird 2 | Children are safe, informed | and participat | e | | | |
|----------------------------|--|--|------------------------------------|------------------------|--------------------|------------------|--|
| Childre | en are informed about the | ir rights, participate in decisio | ons affecting t | hem and are | taken seriou | sly | |
| | on 2.1 - Children are inforr ng safety, information and | . . | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed | |
| 2.1.1 | engage with children; seek children about decisions th | at affect them; and consult ; them feel safe and how this | ~ | | | | |
| 2.1.2 | The entity ensures childrer including their right to be s informed whom to contact their safety or the safety o | ~ | | | | | |
| Observa Require | | place. No recommendations for i | improvement no | oted. | | | |
| and su | on 2.2 - The importance of pport from peers is encou Id less isolated. | friendships is recognised raged, helping children feel | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed | |
| 2.2.1 | The entity provides childre information about safe and including through social me | respectful peer relationships, | Not relevant to current operations | | | | |
| Observ a N/A | ations: | | | | | | |
| childre | on 2.3 - Where relevant to n and families may be offe tion programs and related priate. | ered access to abuse | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed | |
| 2.3.1 | Where relevant, the entity with information, access an prevention programs, appr development, ability and le | opriate to the child's age, | ~ | | | | |
| Observ a Require | | place. No recommendations for i | improvement no | oted. | | | |
| facilita | on 2.4 - Personnel are attu te child-friendly ways for o participate in decision-ma ns. | children to express their | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed | |
| 2.4.1 | Personnel have the knowle identify potential signs of h children to raise any conce | | ~ | | | | |
| Observ a Require | | place. No recommendations for i | improvement no | oted. | | | |

| rd 3 | Partnering with families, car | ers and comm | nunities | | |
|--|---|--|--|--|--|
| s, carers and communi | ties are informed and involved i | n promoting c | hild safeguar | ding | |
| n 3.1 - Families and car g their child. | ers participate in decisions | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
| an active role in monitor | ring children's safety when | \checkmark | | | |
| tions: ments of the Indicator are | in place. No recommendations for i | mprovement no | oted. | | |
| milies, carers and comm | nunities about its child | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
| of ways for families, care | ers and communities to contribute | \checkmark | | | |
| relevant safeguarding in | formation including contact details | \checkmark | | | |
| | | | | | 1 |
| | - | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
| communities about their | r views on policies and practices | \checkmark | | | |
| tions: ments of the Indicator are | in place. No recommendations for i | mprovement no | oted. | | |
| | | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
| aware of the roles and re | sponsibilities of personnel | \checkmark | | | |
| tions: ments of the Indicator are | in place. No recommendations for i | mprovement no | oted. | | |
| - | . – | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
| promotes and/or partici | ext or setting, the entity actively pates in civic engagement ich promote whole of community | \checkmark | | | |
| | n 3.1 - Families and car g their child. The entity supports and an active role in monitor participating in activities tions: ments of the Indicator are n 3.2 - The entity engage milies, carers and commending approach, and re- ole. The entity promotes operation of the safeguarding in of the safeguarding com- ordinator(s). tions: ments of the Indicator are n 3.3 - Families, carers ity's policies and praction Processes are in place to communities about their for keeping children safe tions: ments of the Indicator are n 3.4 - Families, carers he entity's operations a The entity ensures families aware of the roles and re providing ministries or action n 3.5 - The entity takes nity awareness of the operation of the safe n 3.5 - The entity takes | n 3.1 - Families and carers participate in decisions g their child. 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Processes are in place to engage families, carers and communities about their views on policies and practices for keeping children safe. tions: ments of the Indicator are in place. No recommendations for i n 3.4 - Families, carers and communities are informed he entity's operations and governance. The entity ensures families, carers and communities are aware of the roles and responsibilities of personnel providing ministries or activities directly to their children. | n 3.1 - Families and carers participate in decisions g their child. Managed & Measurable The entity supports and encourages families/carers to take an active role in monitoring children's safety when participating in activities. ✓ tions: ments of the Indicator are in place. No recommendations for improvement normalities, carers and communities about its child riding approach, and relevant information is ole. 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Managed & Measurable Defined & Developed The entity promotes open dialogue and provides a range of ways for families, carers and communities to contribute to discussions about its child safeguarding approach. ✓ ✓ The entity provides families, carers and communities to contribute to discussions about its child safeguarding co- ordinator(s). ✓ ✓ tions: measurable Defined & Developed n 3.3 - Families, carers and communities have a say in ty's policies and practices. Managed & Measurable Defined & Developed Processes are in place to engage families, carers and communities about their views on policies and practices for keeping children safe. ✓ ✓ n 3.4 - Families, carers and communities are informed whe entity's operations and governance. Managed & Measurable Defined & Developed The entity ensures families, carers and communi | g their child. Measurable Developed Ad-hoc The entity supports and encourages families/carers to take an active role in monitoring children's safety when participating in activities. ✓ ✓ ✓ tions: * ✓ ✓ ✓ ✓ matce or line nonitoring children's safety when participating in activities. ✓ ✓ ✓ ✓ tions: * ✓ < |

| Standa | rd 4 | rd 4 Equity is promoted and diversity is respected | | | | | | |
|--------------------------------|--|--|-------------------------------|------------------------|--------------------|------------------|--|--|
| Equity | is upheld and diverse ne | eds respected in policy and pro | ictice | | | | | |
| diverse | on 4.1 - The entity activel e circumstances and back t and responds effective able. | grounds, and provides | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed | | |
| 4.1.1 | an understanding, and ide | arding Policy and practices reflect entification, of diverse ences that increase a child's | | \checkmark | | | | |
| 4.1.2 | demonstrate an understa children from disclosing a recognising and/or respo | landling Policy and practices inding of barriers that prevent ibuse and barriers for adults nding to disclosures, and t reduce barriers to disclosure. | | | | \checkmark | | |
| сı 4.1.2 Т | he Code of Conduct does no ulturally and linguistically di the Complaints Managemer | ot make particular reference to Abo iverse backgrounds. Refer <u>recomm</u> nt Policy does not contain guidance s for adults recognising and/or resp | endation #2. on understand | ing barriers tha | t prevent child | ren from | | |
| suppor | on 4.2 - All children have t and complaints process ccessible and easy to und | ses in ways that are culturally | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed | | |
| 4.2.1 | language and formats that | -friendly material in accessible at promotes inclusion and informs t and complaints processes | ~ | | | | | |
| Observa Require | | n place. No recommendations for | improvement n | oted. | | | | |
| needs o childre linguist | of Aboriginal and Torres n with a disability, and cl | nildren from culturally and ds, those who are unable to | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed | | |
| 4.3.1 | attitudes and behaviours | arding Policy and practices reflect that respect the human rights of ive and responsive to diverse | | V | | | | |
| | he Code of Conduct does no | ot make particular reference to Abo iverse backgrounds. Refer <u>recomm</u> | | res Strait Island | er children or d | children from | | |
| Standa | rd 5 | Robust human resource ma | nagement | | | | | |
| People | working with children a | re suitable and supported to re | eflect child saf | eguarding va | lues in practi | ce | | |
| questic | | uding advertising, interview personnel pre-employment eguarding. | Managed & Measurable | Defined & developed | Initial/ Ad-hoc | Not Addressed | | |

| 5.1.1 | The entity emphasises its commitment to child safeguarding and zero-tolerance approach to child abuse in all aspects of its advertising, screening and recruitment for personnel. | \checkmark | | | |
|----------------|---|-------------------------|------------------------|--------------------|------------------|
| 5.1.2 | The entity documents its safeguarding approach in recruitment and screening procedures and processes. | \checkmark | | | |
| 5.1.3 | Positions are assessed for the expected level of contact with children and appropriate child safeguarding recruitment procedures are implemented. | \checkmark | | | |
| 5.1.4 | Position descriptions, selection criteria, referee checks and interview questions articulate: that children are valued and respected; the commitment of the entity to child safeguarding; and where appropriate to the role, an understanding of children's developmental needs and culturally safe practices. | √ | | | |
| Observa | • | | | | |
| Require | ments of the Indicators are in place. No recommendations for | · improvement i | noted. | | |
| clergy a | on 5.2 - Relevant personnel (including all seminarians, and religious) have current working with children or equivalent background checks. | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
| 5.2.1 | The entity has a policy which is implemented that ensures: personnel have a current working with children check as required by legislation, prior to working with children; and where a working with children check is not required by legislation, other background checks for personnel are conducted prior to working with children. | | \checkmark | | |
| 5.2.2 | The entity keeps records and monitors the status of working with children checks and/or background checks for all personnel. | | \checkmark | | |
| اa 5.2.2 De | ntions: The Procedures for Mandatory WWCC and Police Checks do not psed. Refer <u>recommendation #5</u> . The tails of WWCC for employees are maintained by the various r evelopment and will be maintained by the safeguarding office. | ninistries. A ce | ntral database | | |
| are awa | on 5.3 - Personnel receive an appropriate induction and are of child safeguarding responsibilities, including ng obligations. | Managed & Measurable | Defined & developed | Initial/ Ad-hoc | Not Addressed |
| 5.3.1 | All personnel participate in a safeguarding induction program, which occurs as soon as possible after commencement. | | \checkmark | | |
| 5.3.2 | All Church Authorities who are a signatory to a Service Agreement with CPSL are required to participate in the NCSS Introductory Session for Leaders within four months of commencement. | ~ | | | |
| Observa | | | | | |
| ch | afeguarding training is provided to new employees and volunte necklist/process should be developed for new employees going duction in between the formal training sessions. Refer recom | g forward, to pr | | | |

| | on 5.4 - Ongoing supervision and people management sed on child safeguarding | Managed & Measurable | Defined & developed | Initial/ Ad-hoc | Not Addressed |
|---------------------------|---|-------------------------|------------------------|--------------------|------------------|
| 5.4.1 | Support, mentoring, oversight and professional supervision processes for personnel include child safeguarding. | \checkmark | | | |
| 5.4.2 | Annual performance reviews for personnel include child safeguarding responsibilities relevant to their role. | \checkmark | | | |
| Observa Require | ations: ments of the Indicators are in place. No recommendations for | improvement ı | noted. | | |
| candida format | on 5.5 - Robust processes exist for screening ates before and during seminary and religious ion, as well as for ongoing formation, support and ision of clergy and religious. | Managed & Measurable | Defined & developed | Initial/ Ad-hoc | Not Addressed |
| 5.5.1 | The Church Authority draws upon broad-ranging professional advice in its decision-making relating to candidates for seminary/formation programs and ordination/profession of vows. This includes a positive duty to disclose to other Church Authorities where an applicant or candidate for seminary/formation programs does not continue through to ordination/profession of vows. | ~ | | | |
| 5.5.2 | Seminary and initial formation programs have robust screening processes for candidates for religious ministry, including external psychological and psychosexual assessments. | √ | | | |
| 5.5.3 | The entity promotes as normative the participation of all bishops, leaders of religious institutes, clergy and religious in active ministry, in no less than six hours professional/pastoral supervision per year. | √ | | | |
| 5.5.4 | The entity promotes as normative, all clergy and religious in active ministry, for the sake of proper accountability, are offered and access both ongoing professional development and annual performance appraisals. | \checkmark | | | |
| 5.5.5 | All newly ordained clergy and newly professed religious are supported with a suitable mentor for at least five years post ordination or final profession. | ~ | | | |
| Observa Require | ations: ments of the Indicator are in place. No recommendations for i | improvement n | oted. | | |
| religiou and skil | on 5.6 - Seminary and formation programs for clergy and is have appropriate curriculum to build the knowledge Ils of candidates to understand and lead child arding initiatives. | Managed & Measurable | Defined & developed | Initial/ Ad-hoc | Not Addressed |
| 5.6.1 | Seminary and initial formation programs have appropriate curriculum throughout the formation program which builds candidates' knowledge and skills in a range of areas to support child safeguarding | \checkmark | | | |
| 5.6.2 | Seminary and initial formation programs ensure promotion of pastoral responses to victims/survivors of sexual abuse. | \checkmark | | | |
| 5.6.3 | Seminary and initial formation programs are delivered in such a way as to protect against the development and/or reinforcement of clericalist attitudes and behaviours. | \checkmark | | | |

Observations:

Requirements of the Indicators are in place. No recommendations for improvement noted.

| Critoria | on 5.7 - Credentialing and movement of seminarians, | Managod 8 | Defined & | Initial/ | Not |
|--------------------|--|-------------------------|------------------------|--------------------|------------------|
| | and religious is appropriately managed. | Managed & Measurable | Developed | Ad-hoc | Not Addressed |
| 5.7.1 | The entity implements a system to assess the credentials and manage movement of all seminarians, clergy and religious moving between different seminaries and Church jurisdictions. | \checkmark | | | |
| Observa | | | | | |
| Require | ments of the Indicator are in place. No recommendations for i | mprovement n | oted. | | |
| religiou screen | on 5.8 - Entities which receive overseas clergy and us for work in ministry have targeted programs for the ing, induction, professional supervision, and pment of these individuals. | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
| 5.8.1 | Selection and screening procedures for overseas clergy and religious are targeted, thorough and follow, as far as practicable, the same processes as for Australian personnel. This includes the Australian Church Authority obtaining screening information from the International Church Authority. | ✓ | | | |
| 5.8.2 | All overseas clergy and religious participate in a Safeguarding Induction program, documented by the entity, before work with children begins. | \checkmark | | | |
| 5.8.3 | Overseas clergy and religious are supported with a suitable mentor for at least the first two years of their time in Australia. | \checkmark | | | |
| 5.8.4 | The entity promotes as normative the participation of all overseas clergy and religious in active ministry in no less than six hours of professional/pastoral supervision per year. | \checkmark | | | |

Observations:

Requirements of the Indicator are in place. No recommendations for improvement noted.

Standard 6

Effective complaints management

Processes for raising concerns and complaints are responsive, understood, accessible and used by children, families, carers, communities and personnel

| Handlir roles ar differer | on 6.1 - The entity has an effective Complaints ng Policy and procedures which clearly outline the nd responsibilities, approaches to dealing with nt types of complaints, reporting obligations and keeping requirements. | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
|---------------------------------|--|-------------------------|------------------------|--------------------|------------------|
| 6.1.1 | The entity's policies, procedures and practices ensure that all mandatory reporting obligations are met. | | \checkmark | | |
| 6.1.2 | There are documented procedures that provide step-by- step guidance on what action to take for different types of complaints, including breaches of Codes of Conduct, disclosures, allegations or concerns of abuse of a child, be they historic or current. | \checkmark | | | |

| 6.1.3 | There are clear procedures for identifying and mitigating actual and perceived conflicts of interest in complaint management. | √ | | | |
|----------|---|-------------------------|------------------------|--------------------|------------------|
| 6.1.4 | The entity works in cooperation with relevant organisations and seeks specialist advice from statutory child protection services when necessary | \checkmark | | | |
| 6.1.5 | Key roles and responsibilities in relation to handling complaints are articulated within the Complaint Handling Policy and procedures. | ~ | | | |
| 6.1.6 | The Complaint Handling Policy and procedures differentiate, where appropriate, between a child victim and an adult bringing forward a complaint of abuse suffered as a child. | | | | \checkmark |
| 6.1.7 | A process is in place to record all child abuse complaints, incidents, allegations, disclosures, concerns and referrals. The system must be secure so that confidential information is stored, protected and retained for 50 years. | | | \checkmark | |
| Observa | ations: | • | | • | • |
| | he Complaints Management Policy and procedures do not spe here it is believed that a child is in imminent danger. Refer <u>re</u> | • | • | to report to th | e police |
| | he Complaints Management Policy and procedures do not difforward a complaint of abuse suffered as a child. Refer <u>recomm</u> | | en a child victi | m and an adult | bringing |
| | he Archives Access and Use Policy states that records are main ears. Refer <u>recommendation #3</u> . | tained for a pe | riod of 30 years | , instead of the | e required 50 |
| | | | | | |
| handlin | on 6.2 - The entity has a child-focused complaints ng system that is understood by children, families, and personnel. | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
| 6.2.1 | The complaints handling system prioritises the safety and well-being of children. | | \checkmark | | |
| 6.2.2 | The Complaints Handling Policy and procedures are publicly available in a variety of formats, including age and developmentally appropriate for children, enabling complaints processes to be easily understood. | \checkmark | | | |
| Observa | ations: | | | | |
| sp | he Complaints Management Policy and procedures are primar pecifically for complaints which are current, e.g. complaints br rioritisation of the safety of the complainant. Refer <u>recommen</u> | ought by childre | | | |
| Critorio | on 6.3 - Complaints are taken seriously and responded | Managod 8 | Defined & | Initial/ | Not |
| | nptly and thoroughly. | Managed & Measurable | Developed | Initial/ Ad-hoc | Not Addressed |
| 6.3.1 | The Complaints Handling Policy requires that, upon receiving a complaint of child abuse, an initial risk assessment is conducted to identify and minimise any risk to children. Ongoing risk assessments are required throughout all investigation processes. | ~ | | | |
| 6.3.2 | The Complaints Handling Policy requires that at the completion of the initial risk assessment, where a complaint of child sexual abuse is plausible, and there is a risk that the person may come into contact with children, the person be stood down from their role and/or ministry while the complaint is investigated. | ~ | | | |

| Criteric | on 6.4 - The entity has policies and procedures in place Idress reporting of complaints and concerns to relevant | Managed & | Defined & | Initial/ | Not |
|----------|--|---------------|-----------|----------|-----|
| Observa | ations: ments of the Indicators are in place. No recommendations for | improvement i | noted. | | |
| 6.3.9 | Where a seminarian, clergy or religious is convicted of an offence relating to child sexual abuse, that individual should be permanently removed from ministry. The Church Authority must take practicable steps to prohibit that individual from holding themselves out as being a person with religious authority and should present a case to the relevant dicastery for dismissal from the clerical state and/or dispensation from vows | √ | | | |
| 6.3.8 | Where a complaint related to child sexual abuse against a seminarian, clergy or religious is substantiated on the balance of probabilities, with due respect to the rights of individuals, the Church Authority should remove that individual from ministry. | \checkmark | | | |
| 6.3.7 | Documented policies and processes empower and support personnel to raise, in good faith, concerns and allegations about unacceptable behaviour towards children by other personnel. | \checkmark | | | |
| 6.3.6 | Appropriate confidentiality is maintained with due regard for the Australian Privacy Principles and relevant legislation in relation to information sharing in the context of child safeguarding. | \checkmark | | | |
| 6.3.5 | Support and care are provided to a child who has experienced or is alleging abuse, and other affected parties. | \checkmark | | | |
| 6.3.4 | Complainants are responded to promptly and kept informed as to the progress of dealing with their complaint. | \checkmark | | | |
| 6.3.3 | The Complaints Handling Policy is aligned, and operates in conjunction, with the entity's documented disciplinary and grievance policies and processes, in such a way that at the completion of the initial risk assessment, a breach or breaches of the Code of Conduct in relation to inappropriate behaviour towards a child are effectively investigated and managed, and include provisions for personnel to be redeployed, stood down and/or dismissed. | √ | | | |

| on 6.5 - Reporting, privacy and employment law ions are met. | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
|---|---|---|---|--|
| The Complaints Handling Policy requires that all relevant reporting, privacy and employment law obligations are met. | | \checkmark | | |
| ations: | | | I | |
| | | | to report to th | e police |
| | | <u></u> . | | • |
| on 6.6 - The Church Authority ensures mechanisms are e to care for adult complainants. | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
| The entity offers appropriate pastoral care to adult complainants, which recognises their unique needs. This should include an offer from the Church Authority to meet the complainant in person. | √ | | | |
| The Church Authority facilitates adult complainants' access to appropriately trained personnel whose clearly defined roles are to listen to and represent the pastoral needs of the complainant. This is done in consultation with the complainant. | √ | | | |
| ations: | | | | |
| ments of the Indicators are in place. No recommendations for | improvement i | noted. | | |
| on 6.7 - The Church Authority ensures mechanisms are e to monitor and support respondents facing ions. | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
| The Church Authority has access to appropriately trained personnel - lay, religious or clergy - whose clearly defined roles are to listen to and represent the pastoral needs of the respondent. This is done in consultation with the respondent. | 1 | | | |
| The Church Authority has suitable arrangements in place for the monitoring and support of a respondent, where there is a plausible complaint, until (and if) the Church Authority no longer has responsibility for monitoring the respondent. | 1 | | | |
| ations: | | | | |
| ments of the Indicators are in place. No recommendations for | r improvement i | noted. | | |
| rd 7 Ongoing education and train | ing | | | |
| nel are equipped with knowledge, skills and awareness g education and training | to keep child | ren safe thro | ugh informat | ion, |
| on 7.1 - Personnel are trained and supported to vely implement the entity's child safeguarding policies ocedures. | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
| The entity provides regular opportunities to educate/train personnel on its Child Safeguarding Policy and procedures including through induction and refresher safeguarding training (at least every three years). | √ | | | |
| | In a complaints Handling Policy requires that all relevant reporting, privacy and employment law obligations are met. Intions: te Complaints Management Policy and procedures do not spechere it is believed that a child is in imminent danger. Refer recomplainents. The entity offers appropriate pastoral care to adult complainants, which recognises their unique needs. This should include an offer from the Church Authority to meet the complainant in person. The Church Authority facilitates adult complainants' access to appropriately trained personnel whose clearly defined roles are to listen to and represent the pastoral needs of the complainant. This is done in consultation with the complainant. totoms: In 6.7 - The Church Authority ensures mechanisms are end to monitor and support respondents facing ons. The Church Authority has access to appropriately trained personnel - lay, religious or clergy - whose clearly defined roles are to listen to and represent the pastoral needs of the respondent. This is done in consultation with the respondent. The Church Authority has access to appropriately trained personnel - lay, religious or clergy - whose clearly defined roles are to listen to and represent the pastoral needs of the respondent. The Church Authority has suitable arrangements in place for the monitoring and support of a respondent, where there is a plausible complaint, until (and if) the Church Authority no longer has responsibility for monitoring the respondent. The Church Authority has suitable arrangements in place for the monitoring and support of a respondent, where there is a plausible complaint, until (and if) the Church Authority no longer has responsibility | ons are met. Measurable The Complaints Handling Policy requires that all relevant reporting, privacy and employment law obligations are met. Image: Complaints Management Policy and procedures do not specifically state the here it is believed that a child is in imminent danger. Refer recommendation In 6.6 - The Church Authority ensures mechanisms are to care for adult complainants. Managed & Measurable The entity offers appropriate pastoral care to adult complainants, which recognises their unique needs. This should include an offer from the Church Authority to meet the complainant. This is done in consultation with the respondent. ✓ The Church Authority has suitable arrangements in place for the mo | ons are met. Measurable Developed The Complaints Handling Policy requires that all relevant reporting, privacy and employment law obligations are met. Image: Complaints Management Policy and procedures do not specifically state the requirement here it is believed that a child is in imminent danger. Refer recommendation #6. The Church Authority ensures mechanisms are to care for adult complainants. The entity offers appropriate pastoral care to adult complainants, which recognises their unique needs. This should include an offer from the Church Authority to meet the complainant in person. The Church Authority facilitates adult complainants' access to appropriately trained personnel whose clearly defined roles are to listen to and represent the pastoral needs of the complainant. This is one in consultation with the complainant. This is one in consultation with the complainant. This is one in consultation with the respondent. This is one in consultation with the respondent. The Church Authority has access to appropriately trained personnel - lay, religious or clergy - whose clearly defined roles are to listen to and represent the pastoral needs of the respondent. This is one in consultation with the respondent. The Church Authority has suitable arrangements in place for the monitoring and support of a respondent where there is a plausible complaint, until (and if) the Church Authority no longer has responsibility for monitoring the respondent. | Ones are met: Measurable Developed Ad-hoc The Complaints Handling Policy requires that all relevant reporting, privacy and employment law obligations are met. Image: Complaints Management Policy and procedures do not specifically state the requirement to report to the ref it is believed that a child is in imminent danger. Refer recommendation 56. Image: Complaints Management Policy and procedures do not specifically state the requirement to report to the ref it is believed that a child is in imminent danger. Refer recommendation 56. Image: Complainats. Managed & Defined & Imitial/ Ad-hoc The entity offers appropriate pastoral care to adult complainants. Managed & Complainant in person. Defined & Imitial/ Ad-hoc The entity offers appropriate pastoral care to adult complainants which recognises their unique needs. This should include an offer from the Church Authority to meet the complainant. This is done in consultation with the complainant. Imitial/ Ad-hoc The Church Authority Failitates adult complainants? access to appropriately trained personnel whose clearly defined roles are to listen to and represent the pastoral needs of the complainant. Managed & Defined & Initial/ Ad-hoc The Church Authority ensures mechanisms are it to monitor and support respondents facing ons. Managed & Defined & Initial/ Ad-hoc The Church Authority has access to appropriately trained personnel - hoxe clearly defined respondent. This is done in consultation with the respondent. This is done in consultation with the respondent. Imitial/ Ad-hoc The Church Authority has access to appropriately trained personnel - hay, religious or cleagy - whose clearly defined |

| | | | | 1 | |
|----------|--|-------------------|-----------------|-----------------|-------------|
| | The entity's induction and refresher safeguarding training | | | | |
| | must as a minimum cover: | | | | |
| | Code of Conduct; | | | | |
| 7.1.2 | safeguarding risk management; | | | \checkmark | |
| | Child Safeguarding Policy and procedures; | | | | |
| | Complaints Handling Policy and procedures; | | | | |
| | reporting obligations; and e-safety training. | | | | |
| | | | | | |
| 710 | The entity keeps records of participation to ensure all | , | | | |
| 7.1.3 | personnel attend induction and refresher safeguarding | \checkmark | | | |
| | training. | | | | |
| | The entity ensures that personnel who have specific child | | | | |
| | safeguarding responsibilities, such as those appointed to | | | | |
| 7.1.4 | the role of safeguarding co-ordinator and those appointed | \checkmark | | | |
| | to the Safeguarding Committee, receive ongoing support | | | | |
| | and professional development relevant to their role. | | | | |
| Observa | ations: | | | | |
| 7.1.2 T | he general safeguarding training does not cover risk assessmer | nt or e-safety. I | n addition, whi | lst some minist | tries have |
| | onducted mandatory reporting training and/or training on the | | | | |
| | andling and reporting is not included in the general safeguardi | | | | |
| | | | | | |
| Critoria | an 7.2 Dersonnel receive training to recognize the | | | | |
| | on 7.2 - Personnel receive training to recognise the | Managed & | Defined & | Initial/ | Not |
| | and indicators of child abuse, including harmful | Measurable | Developed | Ad-hoc | Addressed |
| behavi | ours by a child towards another child. | | | | |
| | The entity provides regular training to relevant personnel | | | | |
| | which equips them with the knowledge to: | | | | |
| | understand the nature and impact of child abuse. | | | | |
| 7 2 1 | understand the nature, factors, and impact of | , | | | |
| 7.2.1 | institutional abuse. | \checkmark | | | |
| | identify risk factors, such as grooming behaviours; and | | | | |
| | understand, identify, and respond to abusive behaviours | | | | |
| | by a child towards another child. | | | | |
| Observa | ations: | | | | |
| | ments of the Indicators are in place. No recommendations for | improvement | noted | | |
| Require | ments of the indicators are in place. No recommendations for | improvement | noteu. | | |
| | | | | | |
| | on 7.3 - Personnel receive training to enable them to | Managed & | Defined & | Initial/ | Not |
| - | d effectively to child safeguarding risks, concerns, | Measurable | Developed | Ad-hoc | Addressed |
| disclos | ures, and allegations of child abuse. | Wedstrable | Developed | nu noc | / dui coocu |
| | The entity provides training to equip relevant personnel to | | | | |
| | appropriately respond to and support those bringing | | | | |
| 7.3.1 | forward concerns, disclosures and allegations of child | \checkmark | | | |
| | abuse. | | | | |
| | The entity provides training to ensure necessary are successed | | | | 1 |
| 7.3.2 | The entity provides training to ensure personnel are aware of information sharing and record keeping policies and | | | , | |
| 1.3.2 | procedures. | | | \checkmark | |
| | procedures. | | | | |
| | | | | | |
| | The entity provides training to ensure personnel are aware | | | | 1 |
| | of their reporting obligations under state/territory | | | | |
| | of their reporting obligations under state/territory legislative requirements including: | | | | |
| 7.3.3 | of their reporting obligations under state/territory | | | ~ | |
| 7.3.3 | of their reporting obligations under state/territory legislative requirements including: | | | ~ | |
| 7.3.3 | of their reporting obligations under state/territory legislative requirements including: • reporting criminal behaviour to police; | | | 1 | |
| 7.3.3 | of their reporting obligations under state/territory legislative requirements including: reporting criminal behaviour to police; mandatory reporting to child protection authorities; | | | 1 | |

7.3.2 Whilst some ministries have included information on record keeping in their training sessions, this topic is not included in the general safeguarding training. Refer recommendation #7.

7.3.3 Whilst some ministries have conducted mandatory reporting training and/or training on the Complaints Management Policy, the topic of complaints handling and reporting is not included in the general safeguarding training. Refer recommendation #7.

| | on 7.4 - Personnel receive training and information on build culturally safe environments for children. | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed | | |
|---------|---|-------------------------|------------------------|--------------------|------------------|--|--|
| 7.4.1 | The entity provides cultural safety training to equip relevant personnel to create culturally safe environments for Aboriginal and Torres Strait Islander children and children from culturally and linguistically diverse backgrounds. | | | | \checkmark | | |
| Observa | Observations: | | | | | | |

Safeguarding training does not cover the topic of cultural safety. Refer recommendation #7.

Standard 8

Safe physical and online environments

Physical and online environments promote safety and contain appropriate safeguards to minimise the opportunity for children to be harmed

| and ph right to | on 8.1 - Personnel identify and mitigate risks in online ysical environments without compromising a child's o privacy, access to information, social connections and g opportunities. | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
|--------------------|--|-------------------------|------------------------|--------------------|------------------|
| 8.1.1 | The entity's safeguarding risk management plan addresses physical and online risks including risks arising from child to child and adult to child interactions, and the nature of physical spaces. | \checkmark | | | |
| 8.1.2 | The entity's policies require the use of safe online applications for children to learn, communicate and seek help. | \checkmark | | | |
| 8.1.3 | Personnel are proactive in identifying and mitigating physical and online risks to children. | \checkmark | | | |
| 8.1.4 | A policy is documented and implemented that ensures where one-to-one interactions between an adult and child take place, they are conducted in an open or visible space, or within the clear line of sight of another adult. This includes ministries/services such as counselling, one-to- one tuition, the sacrament of reconciliation, coaching, spiritual direction and mentoring. | \checkmark | | | |
| Observa | ations: | I | | | |

Requirements of the Indicators are in place. No recommendations for improvement noted.

| | on 8.2 - The online environment is used in accordance e entity's Code of Conduct, safeguarding policies and lures. | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
|-------|--|-------------------------|------------------------|--------------------|------------------|
| 8.2.1 | Personnel access and use online environments in line with the entity's Code of Conduct and relevant communication protocols. | \checkmark | | | |
| 8.2.2 | The entity routinely monitors the online environment, reporting and responding to breaches of its Code of Conduct or child safeguarding policies in accordance with the entity's disciplinary, complaint handling or other relevant processes. | \checkmark | | | |

Observations:

Requirements of the Indicators are in place. No recommendations for improvement noted.

| | on 8.3 - Risk management plans consider risks posed by tity's settings, activities and physical environments. | Managed & Measurable | Defined & Developed | Initial/Ad- hoc | Not Addressed |
|-------|---|-------------------------|------------------------|--------------------|------------------|
| 8.3.1 | The entity assesses safeguarding risks in the physical environments under its control or management including buildings, structures, open spaces, grounds, homes of religious and clergy, and arrangements for live-in carers/caretakers. | \checkmark | | | |
| 8.3.2 | Where an entity becomes aware that a person (other than personnel of that entity) attending any of its services or activities is the subject of a substantiated complaint of child sexual abuse or has been convicted of an offence relating to child sexual abuse, the entity has in place and implements a process for assessing and managing the risks posed to children by that person's ongoing involvement in the service or activity. | | | | V |

Observations:

8.3.2 There are no policies or guidelines for managing persons of concern who may attend ministry functions, activities or events. Refer <u>recommendation #8</u>.

| and fro | on 8.4 - Entities that contract facilities and services to om third parties have procurement policies that ensure arding of children. | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
|---------|--|-------------------------|------------------------|--------------------|------------------|
| 8.4.1 | The entity considers the risks posed to children arising from any third parties engaged by the entity and conducts sufficient due diligence to ensure that the third party has appropriate child safeguarding practices and policies in place. | \checkmark | | | |
| 8.4.2 | The entity has conducted sufficient due diligence on all third parties who use the entity's facilities to ensure child safeguarding practices and policies are in place. | | | \checkmark | |
| | | | | | |

Observations:

8.4.2 A hire form/agreement should be developed to make potential hirers of ISMAPNG's facilities aware of safeguarding requirements and expectations. Refer <u>recommendation #9</u>.

Standard 9

Continuous improvement

Entities regularly review and improve implementation of their systems for keeping children safe

| | on 9.1 - The entity regularly reviews and improves child arding practices. | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
|-------|---|-------------------------|------------------------|--------------------|------------------|
| 9.1.1 | The entity has a clearly documented Safeguarding Implementation Plan which outlines the monitoring and continual improvement of child safeguarding practices. The Child Safeguarding Implementation Plan is regularly reviewed, progress is tracked, and actions/strategies updated. | ~ | | | |
| 9.1.2 | The Church Authority monitors compliance with the National Catholic Safeguarding Standards during systematic visits to parishes, ministries and/or congregational works. | \checkmark | | | |

| Identify causes and systemic failures to inform continuous improvement. Measurable Developed Ad-hoc Addre 9.2.1 Processes are in place to analyse individual incidents or complaints relating to child safeguarding practices and/or failures. √ Image: Complaints relating to child safeguarding practices and/or failures. √ Image: Complaints relating to child safeguarding practices and/or failures. √ Image: Complaints relating to child safeguarding practices and/or failures. √ Image: Complaints relating to child safeguarding practices and/or failures. √ Image: Complaints relating to child safeguarding practices and/or failures. √ Image: Complaints relating to child safeguarding practices and/or failures. √ Image: Complaints relating to child safeguarding practices and/or failures. √ Image: Complaints relating to child safeguarding practices and/or failures. √ Image: Complaints relating to child safeguarding practices and/or failures. √ Image: Complaints relating to child safeguarding practices and/or failures. Image: Complaints relating to children, families, carers and community. Image: Complaints relating to the Church Authority, and related entities, published by Catholic Professional Standards Ltd Not applicable – this is the first audit by ACSL to date Image: Complaints relating to date Image: Complaints relatin | | | | | | | |
|---|-----------------------|--|--|--------|--|------------------|--|
| 9.1.4 review - at least every three years. ✓ ✓ ✓ Observations: Requirements of the Indicators are in place. No recommendations for improvement noted. Criterion 9.2 - The entity analyses concerns and complaints to identify causes and systemic failures to inform continuous improvement. Managed & Defined & Initial/ Ad-hoc Not Addre Add | 9.1.3 | audits at a local level (parishes, ministries and/or | \checkmark | | | | |
| Requirements of the Indicators are in place. No recommendations for improvement noted. Initial/ Initial/ Notest Criterior J - 2 - The entity analyses concerns and complaints to identify causes and systemic failures to inform continuous improvement. Managed & Defined & Developed Initial/ Notest 9.2.1 Processes are in place to analyse individual incidents or complaints relating to child safeguarding practices and/or failures. √ Imitial/ Notest 9.2.2 Processes are in place to identify systemic issues or patterns and drive continuous improvement. √ Imitial/ Imitial/ Notest Observations: Requirements of the Indicators are in place. No recommendations for improvement noted. Managed & Defined & Defined & Initial/ Imitial/ Notest 9.3.1 The Church Authority reports on the findings of relevant reviews to personnel, children, families, carers and community. Managed & Defined & Developed Initial/ Not applicable – this is the first audit by ACSL address and audit reports relating to the Church Authority, and related entities, published by Catholic Professional Standards Ltd Not applicable – no such reviews have been conduct to date 9.3.2 The Church Authority reports on findings of relevant reviews of safeguarding policies, procedures and practices to its stakeholders. Not applicable – no such reviews have been conduct to date Not applicable – no such reviews have been conduct of date </td <td>9.1.4</td> <td></td> <td>\checkmark</td> <td></td> <td></td> <td></td> | 9.1.4 | | \checkmark | | | | |
| Criterion 9.2 - The entity analyses concerns and complaints to identify causes and systemic failures to inform continuous improvement. Managed & Defined & Initial/ Ad-hoc Not Addree 9.2.1 Processes are in place to analyse individual incidents or complaints relating to child safeguarding practices and/or failures. ✓ Imitial/ Not Addree 9.2.2 Processes are in place to identify systemic issues or patterns and drive continuous improvement. ✓ Imitial/ Not applicable Observations: Requirements of the Indicators are in place. No recommendations for improvement noted. Criterion 9.3 - The Church Authority reports on the findings of relevant reviews to personnel, children, families, carers and audit reports relating to the Church Authority, and related entities, published by Catholic Professional Standards Ltd Not applicable – this is the first audit by ACSL 9.3.1 The Church Authority reports on findings of relevant reviews for safeguarding policies, procedures and practices to its stakeholders. Not applicable – no such reviews have been conduct to date 9.3.2 The Church Authority reports on findings of relevant reviews of safeguarding policies, procedures and practices to its stakeholders. Not applicable – no such reviews have been conduct to date | Observa | ations: | | | | | |
| identify causes and systemic failures to inform continuous improvement. Managed & Defined & Initial/ Measurable Initial/ Developed Ad-hoc Addree 9.2.1 Processes are in place to analyse individual incidents or complaints relating to child safeguarding practices and/or failures. ✓ Initial/ Ad-hoc Addree 9.2.2 Processes are in place to identify systemic issues or patterns and drive continuous improvement. ✓ Initial/ Initial/ More Observations: Requirements of the Indicators are in place. No recommendations for improvement noted. Managed & Measurable Defined & Defined & Managed & Measurable Initial/ More 9.3.1 The Church Authority reports on the findings of relevant reviews to personnel, children, families, carers and community. Not applicable – this is the first audit by ACSL audit reports relating to the Church Authority, and related entities, published by Catholic Professional Standards Ltd Not applicable – no such reviews have been conduct to date Not applicable – no such reviews have been conduct 9.3.2 The Church Authority reports on findings of to its stakeholders. Not applicable – no such reviews have been conduct Not applicable – no such reviews have been conduct | Require | ments of the Indicators are in place. No recommendations for | improvement | noted. | | | |
| 9.2.1 complaints relating to child safeguarding practices and/or failures. √ Image: Complaints relating to child safeguarding practices and/or failures. 9.2.2 Processes are in place to identify systemic issues or patterns and drive continuous improvement. √ Image: Complaints relating to the indicators are in place. No recommendations for improvement noted. Observations: Requirements of the Indicators are in place. No recommendations for improvement noted. Criterion 9.3 - The Church Authority reports on the findings of relevant reviews to personnel, children, families, carers and community. 9.3.1 The Church Authority promotes to all its stakeholders any audit reports relating to the Church Authority, and related entities, published by Catholic Professional Standards Ltd Not applicable – this is the first audit by ACSL to date 9.3.2 The Church Authority reports on findings of relevant reviews of safeguarding policies, procedures and practices to its stakeholders. Not applicable – no such reviews have been conducto date Observations: | identify | causes and systemic failures to inform continuous | - | | | Not Addressed | |
| 9.2.2 patterns and drive continuous improvement. V I <t< td=""><td>9.2.1</td><td>complaints relating to child safeguarding practices and/or</td><td>\checkmark</td><td></td><td></td><td></td></t<> | 9.2.1 | complaints relating to child safeguarding practices and/or | \checkmark | | | | |
| Requirements of the Indicators are in place. No recommendations for improvement noted. Criterion 9.3 - The Church Authority reports on the findings of relevant reviews to personnel, children, families, carers and community. Managed & Defined & Initial/ Ad-hoc Initial/ Addree Not Addree 9.3.1 The Church Authority promotes to all its stakeholders any audit reports relating to the Church Authority, and related entities, published by Catholic Professional Standards Ltd Not applicable – this is the first audit by ACSL Second Provide Provide Provide Professional Standards Ltd 9.3.2 The Church Authority reports on findings of relevant reviews of safeguarding policies, procedures and practices to its stakeholders. Not applicable – no such reviews have been conduct to date Not applicable – no such reviews have been conduct to date Observations: | 9.2.2 | | \checkmark | | | | |
| relevant reviews to personnel, children, families, carers and community. Managed & Defined & Initial/ Ad-hoc Not applicable – this is the first audit by ACSL entities, published by Catholic Professional Standards Ltd 9.3.1 The Church Authority promotes to all its stakeholders any audit reports relating to the Church Authority, and related entities, published by Catholic Professional Standards Ltd Not applicable – this is the first audit by ACSL entities, published by Catholic Professional Standards Ltd 9.3.2 The Church Authority reports on findings of relevant reviews of safeguarding policies, procedures and practices to its stakeholders. Not applicable – no such reviews have been conducted to date Observations: | | | improvement i | noted. | | | |
| 9.3.1 audit reports relating to the Church Authority, and related entities, published by Catholic Professional Standards Ltd Not applicable – this is the first audit by ACSL 9.3.2 The Church Authority reports on findings of relevant reviews of safeguarding policies, procedures and practices to its stakeholders. Not applicable – no such reviews have been conductor date Observations: Image: Construction of the | relevan | nt reviews to personnel, children, families, carers and | - | | | Not Addressed | |
| 9.3.2 reviews of safeguarding policies, procedures and practices to its stakeholders. Not applicable - no such reviews have been conducted to date Observations: Construction | 9.3.1 | audit reports relating to the Church Authority, and related | Not applicable – this is the first audit by ACSL | | | | |
| | 9.3.2 | reviews of safeguarding policies, procedures and practices | Not applicable – no such reviews have been conducted to date | | | | |
| N/A | Observa N/A | ations: | | | | | |

| Standard 10 | | Policies and procedures support child safety | | | | |
|--|--|--|--------------|------------------|--|--|
| Policies | s and procedures docume | nt how the entity is safe for ch | nildren | | | |
| | Criterion 10.1 - Policies and procedures address National Catholic Safeguarding Standards.Managed & MeasurableDefined & DevelopedInitial/NotAd-hocAddressed | | | | | |
| All relevant policies and procedures reference appropriate safeguarding approaches, requirements and responsibilities. | | | \checkmark | | | |
| | Observations: Refer <u>recommendation #3</u> and <u>recommendation #6</u> . | | | | | |
| | Criterion 10.2 - Policies and procedures are accessible and easy to understand.Managed & MeasurableDefined & DevelopedInitial/ Ad-hocNot Addressed | | | Not Addressed | | |
| 10.2.1 | 10.2.1The entity's policies and procedures relevant to safeguarding are readily available and accessible to all personnel√ | | | | | |
| | Observations: Requirements of the Indicator are in place. No recommendations for improvement noted. | | | | | |

| consult | on 10.3 - Best practice policy models and stakeholder action inform the development and review of policies pocedures. | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
|--|--|-------------------------|------------------------|--------------------|------------------|
| 10.3.1 | The entity has processes in place to monitor adherence to policies and procedures relevant to safeguarding. | \checkmark | | | |
| | The entity has processes in place to develop and review its policies and procedures relevant to safeguarding. | | | | |
| 10.3.2 | These processes include consulting with and incorporating advice from experts, children, families, carers and communities. | \checkmark | | | |
| | Observations: Requirements of the Indicators are in place. No recommendations for improvement noted. | | | | |
| | on 10.4 - The Church Authority and leaders model ance with policies and procedures. | Managed & Measurable | Defined & Developed | Initial/ Ad-hoc | Not Addressed |
| 10.4.1The Church Authority and leaders promote and enact all policies and procedures relevant to safeguarding. | | \checkmark | | | |
| Observa Require | ations: ments of the Indicators are in place. No recommendations for | improvement | noted. | | |
| | | | Not Addressed | | |
| The entity encourages regular discussion and feedback10.5.1from personnel on their understanding and practicalimplementation of policies and procedures. | | \checkmark | | | |
| Observa Require | ations: ments of the Indicators are in place. No recommendations for | improvement | noted. | | |

3. Detailed Findings



Standard 1: Committed leadership, governance and culture

Child safeguarding is embedded in the entity's leadership, governance and culture

| Recommendation #1 | | |
|---|--|--|
| Criterion 1.3 - Gover Policy across the ent | Priority 2 | |
| Details of finding | ISMAPNG conducts various activities and ministries in PNG and has undertawork with the Sisters and staff in the areas of training, safeguarding aware codes of behaviour. A tailored Code of Conduct has been translated into the PNG and specific safeguarding training has been developed and rolled out. In addition, a member of the ISMAPNG Institute Leadership Team (ILT) has of the operations in PNG and provides regular supervision and support. Kee in PNG, including those of a safeguarding nature, are well understood and regular basis. However, whilst our discussions with the individual ministries indicates that the NCSS is generally progressing well in the overseas jurisdictions, there is implementation plan for overseas ministries, to ensure that all groups receiped to the support. | ness and expected he local language in formal oversight ey risks and issues are monitored on a at the roll-out of s no overall |
| | We also note that Mercy Associates manages two groups of participants of PNG and one in Timor-Leste. Due to the delays and disruption with the CO information on the NCSS has not yet been rolled out to either of these groups of the second se | VID pandemic, |
| Recommendation We recommend that ISMAPNG documents a staged implementation plan for the application of the NCSS in the overseas ministries, to ensure that the ILT has visibility over the reapplication of the NCSS in these jurisdictions. The implementation plan should focus following: The documentation of risk assessments for overseas ministries and activities to monitoring of key child safeguarding risks and required mitigation activities; Ensuring appropriate recruitment practices are in place, including undertaking W with Children Checks or equivalent background checks for staff and volunteers; The development of complaints handling policies and incident management protailored as appropriate for these jurisdictions. | | over the rollout and ould focus the tivities to facilitate vities; ertaking Working lunteers; and ement procedures, ogress of the |
| Agreed Action We agree with the recommendation. The NCSS (Australian document) will be used as a principle source document and adapted for implementation for overseas ministries. In regard to PNG, ISMAPNG w working with Catholic Bishops Conference (CBC), Caritas and other Church Authorit PNG to implement safeguarding standards appropriate to the country and the local cultures. Areas of recruitment, risk assessment, appropriate working with children checks or checks (or equivalent), reporting and complaints management will be addressed. These actions will form part of the safeguarding implementation plan. | | , ISMAPNG will be urch Authorities in and the local ren checks or police |
| Responsibility | Senior Advisor, Safeguarding and Safeguarding Officer | |
| Due date | We will aim to have an initial conversation with the Catholic Bishops Conference (CBC), Caritas and other Church Authorities by 31 December 2021 to commence the development of a staged approach and action plan. | |

| Recommendation #2 | | |
|---|--|---------------------------------------|
| Criterion 1.4 - A Code standards and respo | Priority 3 | |
| Details of finding | Details of finding The Code of Conduct does not make particular reference to Aboriginal and Torres Strait Islander children or Children from culturally and linguistically diverse backgrounds, as required by Indicator 1.4.3. | |
| Recommendation | The Code of Conduct should be updated as per the above. | |
| | We agree with the recommendation. | |
| Agreed Action | The Institute acknowledges the importance of acknowledging Aboriginal, T Islander, indigenous, First Nations and culturally and linguistically diverse of at risk in all locations. The Code of Conduct was developed with intentional language to address the diversity of cultures in all locations where our min | children and adults ally inclusive |
| | In updating the Code of Conduct to capture the draft Edition Two of the NG the Code will be updated accordingly. | CSS, the glossary of |
| Responsibility | Responsibility Safeguarding Officer | |
| Due date | ue date 31 December 2021 | |

| Recommendation #3 | | | |
|--|--|---------------|--|
| Criterion 1.6 - Personnel understand their obligations on information sharing and record keeping | | Priority 2 | |
| Dataile of finding | ISMAPNG has an Archives Access and Use Policy which outlines the require access to records and record keeping. | ements around | |
| Details of finding | However, the Policy states that records are maintained for a period of 30 years, instead of the required 50 years as per NCSS 1.6.2. | | |
| Recommendation | The Archives Access and Use Policy should be updated as per the above. | | |
| Agreed Action | greed Action We agree with the recommendation and this will be addressed in the biannual policy review process. | | |
| Responsibility | ponsibility Operations Manager | | |
| Due date | a 31 July 2021 | | |



Standard 4: Equity is promoted and diversity is respected

Equity is upheld and diverse needs respected in policy and practice

| Recommendation #4 | Priority 3 | |
|---|---|--|
| Criterion 4.1 - The entity actively anticipates children's diverse circumstances and backgrounds, and provides support and responds effectively to those who are vulnerable | | |
| Details of finding | The Complaints Management Policy and associated training materials do no information on barriers that prevent children from disclosing abuse and/or recognising and/or responding to disclosures. | |
| Recommendation | on The Complaints Management Policy and related documents should be updated as per above. | |
| Agreed Action | Agreed Action We agree with the recommendation and this will be addressed in the Institute's biannual policy review process. | |
| Responsibility | Safeguarding Officer | |
| Due date | 31 July 2021 | |

Standard 5: Robust human resource management



People working with children are suitable and supported to reflect child safeguarding values in practice

| Recommendation #5 | | |
|--|--|------------|
| | itment, including advertising, interview questions, referee checks and oyment screening, emphasises child safeguarding | |
| Criterion 5.2 - Relevant personnel (including all seminarians, clergy and religious) have current working with children checks or equivalent background checks | | Priority 2 |
| | nnel receive an appropriate induction and are aware of child sibilities, including reporting obligations | |
| Details of finding | The following points were noted: 1. The Procedures for Mandatory WWCC and Police Checks do not specify actions required where a WWCC is suspended or has lapsed. 2. A central database of details of WWCC for employees is in development. 3. Safeguarding training is provided to new employees and volunteers upon commencement, with records generally kept by the manager/ministry leaders. However, there is no consistent induction process for new employees/volunteers. | |
| Recommendation | The Procedures for mandatory WWCC and Police Checks should be updated as per point 2 above. The central database of WWCC for employees be finalised and maintained going forward. To cover employees and volunteers who commence work/ministry at different times of the year, we recommend that a one-page induction checklist be developed which should include the following: | |

| | the key safeguarding policies, including Commitment Statement, Safeguarding Policy and Code of Conduct; |
|----------------|--|
| | the Complaints Management Policy and procedures, as well as the Archives Access and Use Policy (specifically the requirement to keep safeguarding records for a minimum of 50 years); |
| | the necessity to be vigilant to safeguarding risks in the course of ministry; and |
| | • e-safety, including the Computer Systems and Electronic Communications Policy. |
| | The completion of the safeguarding induction checklist should be documented and signed by both the employee/volunteer and the person providing the induction. |
| | Formal guidelines should also be developed in relation to recording and following up induction for new personnel, including actions required where a person does not attend an induction, e.g. not commencing in ministry until the induction has been completed |
| | |
| | We agree with the recommendation. |
| | 1. The recommendation is noted and is in the process of being actioned for employees. |
| Agreed Action | 2. The recommendation is noted and is in the process of being actioned. |
| | 3. The Safeguarding unit will work with the Human Resources office to address |
| | the recommendation. |
| Responsibility | Safeguarding Officer |
| | 1. 30 September 2021 |
| Due date | 2. 30 September 2021 |
| | 3. 30 September 2021 |



Standard 6: Effective complaints management

Processes for raising concerns and complaints are responsive, understood, accessible and used by children, families, carers, communities and personnel

| Recommendation #6 | | |
|--|--|---|
| Criterion 6.1 – The entity has an effective Complaints Handling Policy and procedures which clearly outline the roles and responsibilities, approaches to dealing with different types of complaints, reporting obligations and record keeping requirements | | Priority 2 |
| Criterion 6.2 – The entity has a child-focused complaints handling system that is understood by children, families, carers and personnel | | |
| Details of finding The following points were noted: 1. The Complaints Management Policy and procedures do not specifically state the requirement to report to the police where it is believed that a child is in imminent danger. 2. The Complaints Management Policy and procedures do not differentiate between a chvictim and an adult bringing forward a complaint of abuse suffered as a child. 3. The Complaints Management Policy and procedures include information on pastoral cand support to abuse survivors with a focus on mercy and justice. However, the procedures are primarily focused on historical complaints and do not provide for complaints which are current, e.g. complaints brought by children. | | in imminent ite between a child a child. on on pastoral care wever, the |
| Recommendation | ecommendation The Complaints Management Policy and procedures should be updated to address the points noted above. | |

| Agreed Action | We agree with the recommendation. This will be addressed in the biannual policy review process. |
|----------------|---|
| Responsibility | Safeguarding Officer |
| Due date | 31 July 2021 |



Standard 7: Ongoing education and training

Personnel are equipped with knowledge, skills and awareness to keep children safe through information, ongoing education and training

| Recommendation #7 | | | | |
|--|--|---|--|--|
| Criterion 7.1 – Personnel are trained and supported to effectively implement the entity's child safeguarding policies and procedures | | | | |
| | Criterion 7.2 - Personnel receive training to recognise the nature and indicators of child abuse, including harmful behaviours by a child towards another child Priority 2 | | | |
| Criterion 7.3 - Personnel receive training to enable them to respond effectively to child safeguarding risks, concerns, disclosures and allegations of child abuse | | | | |
| Criterion 7.4 - Personr environments for chile | nel receive training and information on how to build culturally safe dren | | | |
| Details of finding | The general safeguarding training does not cover: risk assessment/risk management processes (as per Indicator 7.1. e-safety (as per Indicator 7.1.2); record keeping policies and procedures (as per the requirements Whilst we note that some ministries have conducted mandatory report and/or training on the Complaints Management Policy, the topic of chandling and reporting is not included in the general safeguarding training has not yet been developed to cover the formation of th | of Indicator 7.3.2). orting training omplaints aining. | | |
| Recommendation | an overview of the Complaints Management Policy and reporting procedures; an overview of risk management, in particular the need to be vigilant to safeguarding risks in the course of ministry; e-safety, including awareness of the Computer Systems and Electronic Communications Policy; and an overview of the Archives Access and Use Policy (specifically the requirement to keep safeguarding records for a minimum of 50 years). | | | |
| | Safeguarding training for relevant personnel (specifically, those with safeguarding duties or who work with/minister directly to children) should be developed to cover the topic of cultural safety. | | | |

| Agreed action | We agree with the recommendation. |
|----------------|---|
| | 1. The general safeguarding training should be updated to cover: |
| | an overview of the Complaints Management Policy and reporting procedures; |
| | an overview of risk management, in particular the need to be vigilant to safeguarding risks in the course of ministry; |
| | e-safety, including awareness of the Computer Systems and Electronic Communications Policy; and |
| | an overview of the Archives Access and Use Policy (specifically the requirement to keep safeguarding records for a minimum of 50 years). |
| | Safeguarding training for relevant personnel (specifically, those with safeguarding duties or who work with/minister directly to children) should be developed to cover the topic of cultural safety. |
| Responsibility | Safeguarding Officer |
| Due date | 1. 31 July 2021 |
| | 2. The necessity for cultural training will be assessed across the various ministries and a plan for inclusion in future safeguarding training sessions (where appropriate) will be developed by 31 December 2021 |



Standard 8: Safe physical and online environments

Physical and online environments promote safety and contain appropriate safeguards to minimise the opportunity for children to be harmed

| Recommendation #8 | | | |
|--|--|---------------------|--|
| | Criterion 8.3 - Risk management plans consider risks posed by the entity's settings, activities and physical environments | | |
| | Indicator 8.3.2 requires that an entity has procedures in place to manage p (other than personnel) who may attend any of its services or activities. | ersons of concern | |
| Details of finding | For ISMAPNG, this could potentially occur in relation to ministry functions or events where members of the public are invited or accompany other members/participants to these events. | | |
| | Currently, there are no formal procedures in place to manage persons of concern who may attend such events. | | |
| Recommendation | Procedures or guidelines for managing any suspected persons of concern who attend events should be confirmed to ensure that processes and accountabilities for managing and addressing such instances are clear. | | |
| | | | |
| Agreed Action We agree with the recommendation and this will be addressed in the overall risk assessmen process. | | all risk assessment | |
| Responsibility | esponsibility Safeguarding Officer | | |
| Due date | 31 December 2021 | | |

| Recommendation #9 | | |
|----------------------------|---|--|
| | s that contract facilities and services to and from third parties have that ensure safeguarding of children | |
| Details of finding | Whilst each venue which may be hired to third parties has a safeguarding poster on display, there is no formal agreement/documentation regarding the hirer's understanding of safeguarding requirements and expectations. | |
| Recommendation | A standard facilities agreement/form should be developed when hiring facilities to third parties. This agreement should contain appropriate references to safeguarding, for example: ISMAPNG's expectations on safeguarding and zero-tolerance approach to child abuse; the third party providing surety to the entity that they have policies and procedures in relation to safeguarding children or where they don't have their own policy, confirmation that they will adhere to ISMAPNG's safeguarding policies and procedures; a letter of compliance from the management of the third party stating that all personnel have current Working with Children Checks (where required by legislation); and records kept of any third parties using facilities, either regularly or occasionally. | |
| Agreed Action | For those who have not, the appropriate measures as outlined, will be put in place. | |
| Responsibility Due date | Safeguarding Officer 31 December 2021 | |

Appendix A

COMPLIANCE ASSESSMENT SCALE

The compliance assessment of the entity's performance against each indicator will be determined using a four-point scale, as follows:

| | General | Processes | People/Resources |
|------------------------------|--|--|---|
| Not Addressed | • The entity has not addressed the required Indicator or is unable to demonstrate that the requirements of the Indicator are in place and/or are operating effectively and continuously. | Processes are non-existent. Processes exist however the specific requirements of the Indicator have not been addressed. | No resources have been assigned. |
| Initial/Ad- Hoc | • The entity has commenced to address the Indicator, however processes are ad-hoc or are applied on a case-by-case basis. | Some relevant processes have been implemented which align with the requirements of the Indicator, however they are: siloed; and/or undocumented; and/or inconsistent; and/or lack clarity. | Capabilities vary across the entity. Resources are not formally assigned. |
| Defined and Developed | • The entity has addressed the Indicator and is in the process of implementing the requirements across the entity. | Relevant processes have been defined and developed, however are yet to be rolled out across the full operations of the entity. | Resources have been assigned and responsibilities defined, however there is no formal training or communication of standard procedures and it is unlikely that deviations will be detected. |
| Managed and Measurable | • The entity has demonstrated that Indicator requirements are formally embedded and are operating effectively and continuously. | Relevant processes are integrated and coordinated, including remote operations and activities. | Personnel have been trained to detect and report on deviations or break downs in processes. Resources have been assigned to monitor and address non-compliance. |

Appendix B

AUDIT FINDING PRIORITIES

The following priority ratings have been used to assess findings arising from this audit:

| Priority 1 | Priority 2 | Priority 3 |
|---|--|---|
| Gaps or control weaknesses have been identified resulting in non-compliance with the indicator. Mitigation actions are required to be developed and initiated as soon as practicable but no later than 30 days from the issuance of this report, with expected resolution within 3 months. | Progress has been made with respect to implementation of the required indicator, however full compliance is yet to be achieved. Mitigation actions are required to be developed and initiated within 3 months or earlier from the issuance of this report, with expected resolution within 6-9 months. | Issues have been identified which represent minor procedural weaknesses or improvement opportunities with respect to the operation of the indicator. Expected resolution is within 12 months or earlier from the issuance of this report. |

Appendix C

GLOSSARY

The definitions of terms used in the National Catholic Safeguarding Standards take into account Australian State, Territory and federal laws and relevant regulations, canon law, information from the Holy See, the Royal Commission into Institutional Responses to Child Sexual Abuse, the National Principles for Child Safe Organisations and the Glossary on Sexual Exploitation and Abuse published by the United Nations in 2017.

The glossary does not have any legal force and is meant only to serve as a reference tool for the National Catholic Safeguarding Standards. All terms and definitions are to be read in the context of these Standards alone.

| Accessible language | means information is provided in multiple formats for individuals with different levels of English literacy and proficiency, modes of communication, languages and cognitive abilities. |
|---|---|
| Allegation | means a complaint, still to be verified, claiming or asserting that someone has committed an act of abuse against a child. The term is used interchangeably and in combination with "complaint". |
| Australian Catholic Bishops Conference | means the national episcopal conference of the Catholic bishops of Australia. It is the instrumentality used by the Australian Catholic bishops to act nationally and address issues of national significance. |
| Bishop | means a diocesan bishop and archbishop and the ordinary of an ordinariate in the Latin Church and an eparch in the Eastern Churches. |
| Canon law | means the revised Code of Canon Law promulgated by His Holiness Pope John Paul II in 1983 and the Code of Canons of the Eastern Churches as promulgated in 1990 and any other universal or particular legislation promulgated by the competent ecclesiastical authority. |
| Canonical Steward | means the person(s) or other entity canonically responsible for the Catholic Entity. |
| Catholic Religious Australia | means the public name of the Australian Conference of Leaders of Religious Institutes (ACLRI). It is the peak body for leaders of Religious Institutes and Societies of Apostolic Life resident in Australia. |
| Child/ren | means individuals under 18 years of age. |
| Child abuse | there are different legal definitions of child abuse in Australia. Most commonly, the categories of child abuse include sexual, physical, psychological, neglect, ill-treatment, exploitation and exposure to family violence. The following provides general definitions only. For specific legal definitions related to your state or territory please go to: <u>https://aifs.gov.au/cfca/publications/cfca-resource-sheet/reporting-child- abuse-and-neglect</u> |
| | Child abuse, when referenced throughout the National Catholic Safeguarding Standards, includes: physical abuse refers to any non-accidental physically aggressive act towards a child. Physical abuse may be intentional or may be the inadvertent result of physical punishment. Physically abusive behaviours include shoving, hitting, slapping, shaking, throwing, punching, biting, burning and kicking; sexual abuse refers to a person who uses power, force or authority to involve a child or young person in any form of unwanted or illegal sexual activity. This can involve touching or no contact at all. This may take the form of taking sexually explicit photographs or videos of children, forcing children to watch or take part in sexual acts and |

| | forcing or coercing children to have sex or engage in sexual acts with |
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| | other children or adults; |
| | neglect refers to a failure by a caregiver to provide the basic requirements for meeting the physical and emotional developmental needs of a child. Physically neglectful behaviours include a failure to provide adequate food, shelter, clothing, supervision, hygiene or medical attention; |
| | psychological abuse refers to inappropriate verbal or symbolic acts and a failure to provide adequate non-physical nurture or emotional availability. Psychologically abusive behaviours include rejecting, ignoring, isolating, terrorising, corrupting, verbal abuse and belittlement; |
| | exposure to family violence is generally considered to be a form of psychologically abusive behaviour, where a child is present (hearing or seeing) while a parent or sibling is subjected to physical abuse, sexual abuse or psychological maltreatment, or is visually exposed to the damage caused to persons or property by a family member's violent behaviour; and |
| | grooming refers to a pattern of behaviour aimed at engaging a child as a precursor to sexual abuse. It includes establishing a 'special' friendship/ relationship with the child. Grooming can include the conditioning of parents and other adults to think that the relationship with the child is 'normal' and positive. The process can take as little as a few days or as long as months or even years. |
| Child Safeguarding Commitment Statement | means a commitment statement describing an entity's commitment to keep children safe from harm. It informs the entity's culture with respect to child safeguarding. |
| Child safeguarding policies and procedures | means any policies or procedures of the entity that address elements of child safety. For example, but not limited to: recruitment; risk management; |
| | complaints handling; and acceptable use (information and communication technology). |
| Church Authority | means: A. the diocesan bishop (or archbishop, as appropriate) of a diocese or his administrator from time to time; B. the Australian major superior in respect of religious institutes; or C. the canonical steward in relation to a particular Catholic entity in respect of other Catholic entities not referred to in (a) or (b) above. |
| Civic engagement | means individual and collective actions designed to identify and address issues of public concern. Civic engagement includes citizens working together to make a change or difference in the community. The goal of civic engagement is to address public concerns and promote the quality of the community. |
| Clergy | means the body of those ordained in sacred ministry in the Church. They are either deacons, priests or bishops. |
| Cleric | means a member of the clergy. |
| Clericalist/ism | means an attitude toward clergy/religious characterised by an excessive deference and an assumption of their moral superiority. Pope Francis has said of clericalism that it occurs when "clerics feel they are superior, [and when] they are far from the people." He goes on to say that clericalism can be "fostered by priests themselves or by lay persons". |

| When fostered by priests it may be demonstrated in an attitude where |
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| clerics see themselves as self-sufficient, superior to and separate from accountabilities of the world beyond the Church. When fostered by lay people it may be demonstrated by thinking that their contributions to the life of the Church are second-rate, or that in all things, surely 'Father knows best'. The features of clericalism are not restricted to the ordained (clergy and religious) nor to the Church alone. Abuse of an individual's function, role or power could be considered clericalist and could be exemplified through other attitudes such as not allowing criticism, being didactic rather than dialogical and being controlling rather than caring. It exists in hierarchical institutions such as academia, legal and medical establishments, the police |
| and the military. means any person who makes a complaint that may include any allegation, suspicion, concern, or report of a breach of the entity's code of conduct. It also includes disclosures made to an institution that may be about, or relate to, abuse in the entity's context. |
| means situations where a conflict arises between a person's official duties and their private interests, which could influence the performance of those official duties. Such conflict generally involves opposing principles or incompatible wishes or needs. |
| means an environment that is safe for people of all ethnicities and cultural identities: where there is no assault, challenge or denial of their identity, of who they are and what they need. It is about shared respect, shared meaning, shared knowledge and experience, of learning, living and working together with dignity and truly listening. |
| means departments of the Roman Curia, including the Secretariat of State, congregations, tribunals, councils and offices. |
| means ecclesiastical jurisdiction under the leadership of a bishop or an archbishop. In this document it is used as an inclusive term, including eparchies, ordinariates and personal prelatures. |
| means an entity that has been identified as Catholic by a competent authority within the Catholic Church. |
| means a term used by the Eastern Catholic Churches to denote ecclesiastical jurisdictions under the leadership of a bishop or an archbishop (also called an eparch or an archeparch). |
| refer to 'child abuse'. |
| means a program preparing individuals for ordination or profession of vows as well as a life-long journey to the invitation of Christ to proclaim and live the Gospel message within the life of the Church. |
| refer to 'child abuse'. |
| means, in the formal setting of an institution, child abuse caused by factors such as: a "closed" culture within an organisation where transparency is discouraged; failure to properly check the backgrounds and interview staff; inadequate training of staff; lack of child protection policies; lack of support of staff by management; poor communication skills; and/or poor supervision of staff and children. |
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| Lay/lay person | means members of the Catholic Church other than bishops, priests, deacons and religious. |
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| Leaders | means personnel who are responsible for important governance decisions within a Church entity and/or who lead and coordinate Church improvement initiatives. |
| Leaders of Religious Institutes | means the person acting in that canonical role (by whatever name) from time to time. |
| Mentor | means an experienced and trusted advisor or a person who gives a younger or less experienced person help and advice over a period of time. |
| Ministerial PJP | means a public juridic person established by a religious institute which provides sponsorship and lay leadership for ministries of the religious institute, to ensure their continuation as works of the Catholic Church. The establishing authority for these entities is varied – some ministerial PJPs have been established by the Holy See through the Congregation for Institutes of Consecrated Life and Societies of Apostolic Life and are known as PJPs of pontifical right, others have been authorised by diocesan or provincial bishops. Canon law defines a public juridic person (PJP) as 'an aggregate of persons or things constituted by the competent ecclesial authority to fulfil a proper function given them in view of the common good' [Can. 114 §1]. |
| Ministry | means any activity within, or delivered by, an entity that is designed to carry out the good works of the Catholic Church. |
| Neglect | refer to 'child abuse'. |
| Offender | means a person who has admitted abuse or whose responsibility for abuse has been determined by a court of law (criminal or civil), statutory or Church procedure. |
| Ordinariate | means a non-geographical diocese, an example of which is the Catholic Military Ordinariate of Australia which is administered by a bishop with the faculties of an Ordinary and thus this organisation is known by the term ordinariate. |
| Overseas clergy and religious | means any cleric or member of a religious institute who is specifically recruited from overseas by a Church Authority or entity. |
| Personal prelature | means a canonical structure of the Catholic Church which comprises a prelate, clergy and laity who undertake specific pastoral activities. The first personal prelature is Opus Dei. |
| Personnel | means a cleric, member of a religious institute or other person who is employed by the entity or engaged on a contract, subcontract, voluntary or unpaid basis. |
| Physical abuse | refer to 'child abuse'. |
| Position description | means a document which details the role, responsibilities and expectations of a role within an entity and outlines reporting lines. |
| Professional/pastoral supervision | means a forum for reflection and learning, an interactive dialogue between at least two people, one of whom is professionally trained as a supervisor. The dialogue shapes a process of review, reflection, critique and replenishment for personnel. Supervision is a professional activity in which personnel are engaged regardless of experience or qualification. Supervision assists personnel in their accountabilities for professional standards (including in relation to maintenance of professional boundaries), defined competencies for their role and understanding and implementation of organisational policy and procedures. For clerics and religious, professional/pastoral supervision assists in the maintenance of boundaries of the pastoral relationship and enhances the quality of their ministry. |

| | A cleric/ religious' commitment to conscious and critical reflection on their ministry and ministry experiences is recognised as being important for the wellbeing of the cleric/religious, the people with whom they exercise ministry, the wider Church and the community. |
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| Protective behaviours program | means an age-appropriate structured education program to equip children and young people with the skills and knowledge to enhance their personal safety. |
| Psychological abuse | refer to 'child abuse'. |
| Religious Institute | means an institute of consecrated life, a secular institute or society of apostolic life, and their provinces or equivalent. |
| Respondent | means a person against whom a complaint is made. |
| Safeguarding | means measures to protect the safety, human rights and well-being of individuals, which allow people – in this context children – to live free from abuse, harm and neglect. |
| Safeguarding Committee | means a committee established to advise and support the Church Authority on all matters relating to safeguarding, including the development and implementation of a Safeguarding Implementation Plan and coordination of annual self-audits at a local level. Committee members need relevant and varied professional expertise in relation to, but not limited to safeguarding, child protection, organisational culture and structure, policy development, and need to include lay women and men. |
| Safeguarding Co-ordinator | means an individual who champions safeguarding and co-ordinates the implementation of the National Catholic Safeguarding Standards within an entity. |
| Safeguarding Implementation Plan | means a documented plan which articulates actions to be taken across the entity to ensure safeguarding practices are in place. It includes actions, strategies, responsibilities and delegations and tracks review and progress. It is overseen by the Safeguarding Committee. |
| Seminary | means a centre for the formation and education of students preparing for ordination. |
| Sexual abuse | refer to 'child abuse'. |
| Spiritual abuse | means the abuse of a child that is perpetrated by an individual in a position of authority and trust within the Church, supposedly in the name of God. It can cause a child to have lifelong loss of faith and/or feel distanced from the Church. |
| Substantiated complaint | means allegations proven to be true or supported with evidence. |
| Third parties | means any individual, group or organisation outside the entity who either contract services and facilities to or from the entity. For example, groups hiring Church facilities for private or public use (for example birthday parties, men's sheds, exercise groups), companies contracted to provide design and print work for an entity, and consultants. |
| Working with children check | is a generic term used in the Standards to denote the statutory screening requirement for people who work or volunteer in child-related work. There is no single national framework setting out requirements for 'working with children' checks. Each state or territory in Australia has its own name, procedures and differences in scope regarding what this type of check entails. They are one part of a Church entity's recruitment, selection and screening processes. |