National Catholic Safeguarding Standards Sisters of Our Lady of the Missions



Catholic Professional Standards 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.
Catholic Professional Standards Ltd is committed to fostering a culture of safety and care for children and vulnerable adults.

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

Catholic Professional Standards Ltd Level 13, 200 Queen Street Melbourne Victoria 3000

Phone: 1300 603 411 Email: <u>info@cpsltd.org.au</u> <u>www.cpsltd.org.au</u>

Table of Contents

1.	Executi	ve Summary	_ 1
	1.1	Context	_ 1
	1.2	Background	1
	1.3	Audit Approach	2
	1.4	Overall Audit Findings	2
2.	Assessr	ment of Compliance with NCSS Indicators	_ 5
3.	Detaile	d Findings and Recommendations	16
Append	dix A: Co	mpliance Assessment Scale	23
Append	uA :B xib	dit Finding Priorities	24
Append	dix C: Gl	ossary	25

1. Executive Summary

1.1 Context

Catholic Professional Standards Limited (CPSL) was established by the Australian Catholic Bishops Conference (ACBC) and Catholic Religious Australia (CRA) in response to the findings of the Royal Commission into Institutional Responses to Child Sexual Abuse (Royal Commission), presented on 15 December 2017 to the Governor General of Australia.

As part of its constitutional mandate, CPSL has developed the National Catholic Safeguarding Standards (NCSS) to provide the framework for Catholic Church entities to build safe cultures and environments and to ensure that safeguarding practices are consistently applied across the Catholic Church in Australia.

The first edition of the NCSS was formally released on 30 May 2019 and applies to all Catholic ministries, including Catholic dioceses, religious institutes, institutions providing education, health and aged care, social and community services, pastoral care and other services. CPSL has also established a risk-based audit program to assess compliance with the NCSS.

This audit report includes the results of the NCSS compliance assessment for Religieuses de Notre Dame des Missions, known in Australia as Sisters of Our Lady of the Missions.

1.2 Background

Religieuses de Notre Dame des Missions (RNDM) is an International Missionary Congregation of women founded in Lyon, France in 1861 by Euphrasie Barbier. Her vision was the education and empowerment of women and children, particularly those most disadvantaged in society.

Euphrasie sent her first missionaries to the Pacific Islands of Wallis and Futuna, and then New Zealand, from where the Australian Province was ultimately founded, in Perth, in 1897. The Australian Province opened schools in Western Australia, Victoria and the ACT, as well as in Papua New Guinea. The Institute in Australia is known as "Sisters of Our Lady of the Missions" (RNDM) and is governed by a Province Leader, with all administrative functions now based in Melbourne.

RNDM no longer has any responsibility for the institutions which it previously governed. The current number of Sisters in Australia is 16, most of whom are retired and no longer in formal ministry. There are no candidates in formation.

RNDM has been assessed as a "Category Two" Church entity for application of the NCSS (Working with Children). There are 7 NCSS Standards, 33 NCSS Criteria and 84 NCSS Indicators that apply to Category Two 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 CPSL website.

Our assessment of RNDM's compliance with the relevant Indicators is detailed in Section 2 of this report. Our recommendations for improvement, including RNDM's 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 CPSL 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 RNDM and the extent of its compliance with the requirements of the NCSS.

Our testing procedures included the following:

- interviews, observations and enquiry with the RNDM leadership team and Province Secretary;
- interviews with four (25%) RNDM members who are still in formal or volunteer ministry, in relation to how safeguarding activities are applied in their daily work;
- review of key safeguarding documents, policies and procedures; and
- assessment of the design, and testing of the operation of safeguarding controls implemented by RNDM.

1.4 Overall Audit Findings

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

Our assessment indicates that RNDM has fully implemented or has substantially progressed in the implementation of 65 (96%) of the 68² Indicators which are relevant to their operations.

There are three Indicators (6%) in the initial stages of implementation. These relate to:

- 1. Monitoring of internet activity and online environments;
- 2. Development of a formal process to monitor adherence to safeguarding policies and procedures; and
- 3. Development of a formal review schedule for safeguarding policies and procedures.

The key findings from the audit are summarised below.

NCSS Standard 1 - Committed leadership, governance and culture

RNDM is committed to the safeguarding of children and vulnerable adults and has appointed a dedicated Safeguarding Co-Ordinator, who will be working with the leadership team to monitor and oversee the implementation of the NCSS across its operations and ministries.

RNDM has a comprehensive suite of safeguarding policies including a Safeguarding Commitment Statement, Policy for the Safeguarding of Children and Vulnerable Adults (Safeguarding Policy), Code of Conduct and Complaints Resolution Policy. However, RNDM does not have its own website and therefore these documents are publicly displayed in the office and available by request. RNDM will be establishing its own website in the latter part of 2020. We also note that there was previously no requirement for signing/acknowledgement of the Code of Conduct by all personnel. This requirement will be implemented in the latter half of 2020, when RNDM rolls out its safeguarding training program.

RNDM is substantially progressed in the development of a formal risk management framework, with risk assessments having recently been completed for the Sisters' key activities and ministries, as well as for RNDM's premises.

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

² Of the 84 NCSS Indicators applicable to Category Two, 16 of these are not relevant to RNDM's operations.

NCSS Standard 5 – Robust human resource management

RNDM has a section on recruitment in its Safeguarding Policy which considers appropriate safeguarding elements in the recruitment process. However, whilst National Criminal History (police) checks have been conducted for Sisters and employees in the past, some of these checks are more than three years old and should be renewed.

RNDM has recently developed a policy on professional supervision and this requirement is in the process of being implemented for relevant members, as appropriate.

RNDM does not have any candidates in formation and we have not assessed any formation program activities or curriculum at this time. RNDM has advised that they are unlikely to take any new candidates into formation going forward. However, should RNDM decide to take candidates in the future, the formation curriculum will need to be updated to include the appropriate safeguarding elements.

NCSS Standard 6 – Effective complaints management

The CPSL 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.

RNDM has a comprehensive complaints handling policy which is available in the office and on request, and which will be uploaded to their website when established (see prior comments for Standard 1).

There have been very few complaints in the Congregation's history and there have been no complaints of child sexual abuse against any of the Sisters which have been upheld.

NCSS Standard 7 - Ongoing education and training

Some training on safeguarding has been provided to the Sisters through updates and assembly days, however a safeguarding induction and training program has only recently been developed.

This will be rolled out to all Sisters, employees and volunteers in the second half of 2020.

NCSS Standard 8 – Safe physical and online environments

RNDM has an IT, Internet, Email & Social Media Policy which contains comprehensive guidance on the use of technology and internet, but which has not been formally rolled out to all Sisters, staff and volunteers.

In addition, a program for monitoring of internet activity is in the process of being developed.

RNDM has recently developed a policy on safeguarding requirements for the management of third parties and contractors who conduct work on RNDM premises and is now in the process of implementing this policy.

NCSS Standard 9 - Continuous improvement

NCSS Standard 10 – Policies and procedures support child safety

RNDM has a formal Safeguarding Implementation Plan which will be updated to include the actions arising from the CPSL audit, including the development of monitoring and policy review processes.

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

			Assessment of Compliance				
National Catholic Safeguarding Standard	# NCSS Indicators (Category One)	Not Relevant to RNDM (NR)	Managed & measurable (M)	Defined & developed (D)	Initial / Ad hoc (I)	Not addressed (N)	
1: Committed leadership, governance & culture	14	2	7	5	-	-	
5: Robust human resource management	21	10	8	3	-	-	
6: Effective complaints management	24	-	23	1	-	-	
7: Ongoing training & education	7	-	2	5	-	-	
8: Safe physical and online environments	6	2	2	1	1	-	
9: Continuous improvement	6	2	3	1	-	-	
10: Policies and procedures support child safety	6	-	3	1	2	-	
TOTAL	84	16	48	17	3	-	
			65 (9	6%)	3 (4	1%)	

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

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

There are five Priority 2 (medium rated) recommendations and three Priority 3 (low rated) recommendations, which are detailed in Section 3 of this report. Each recommendation also contains RNDM's response to the audit finding, including management actions.

We would like to thank the RNDM 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

Stand	lard 1	Committed leadership, governance and culti	ıre				
Child .	safeguarding	is embedded in the entity's leadership, govern	ance and cu	lture			
		entity publicly commits to child safeguarding olerance approach to child abuse.	Managed & Measurable	Defined & Developed	Initial/ Ad- Hoc	Not Addressed	
1.1.1	endorsed by	is a Child Safeguarding Policy that is approved and the Church Authority and/or relevant leadership publicly available.		√			
1.1.2		iblishes a Child Safeguarding Commitment hich is openly displayed and publicly available.		√			
The Sarecom Criter	mendation #1	nild safeguarding culture is championed and	cessible on th	e website on	ce established	l. Refer	
	illed at all lev m up.	els of the entity from the top down and	Measurable	Developed	Нос	Addressed	
1.2.1	maintain anpromotiemphas respons	Authority and leaders of the entity create and entity's culture of safeguarding by: ng child safeguarding regularly; ising that child-safeguarding is everyone's ibility; and		√			
	actively manage	monitoring safeguarding compliance and risk ment.					
1.2.4		derstand that child safeguarding is everyone's and are empowered to provide input on child practices.	√				
		is discussed by the leadership team and this topic is fer recommendation #2.	now a regula	r agenda iten	n at the leader	rship	
imple		ernance arrangements facilitate f a Child Safeguarding Policy across the	Managed & Measurable	Defined & Developed	Initial/ Ad- Hoc	Not Addressed	
1.3.1		arrangements are transparent and include roles and responsibilities to ensure accountability ling is clear.	✓				
1.3.2	other than A	nurch Authority's governance includes countries ustralia, the entity must apply these Standards count relevant international declarations and local	Not relevant to current operations				

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

I nersonnel on expected henavioural standards and		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.	√			
1.4.2	The Code of Conduct is written in accessible language and communicated to personnel, children, families and carers.		√		
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.	√			

Observations:

1.4.2 The Code of Conduct should be disseminated to all sisters and employees and acknowledged. The Code also should be easily accessible on the website once established. Refer <u>recommendation #1</u>.

I focusing on preventing identifying and mitigating risks to		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.	✓					
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.	Not relevant to current operations					
1.5.3	Leaders of the entity manage safeguarding risks effectively, through regular identification, monitoring, reporting and review of risks.		✓				

Observations:

1.5.1 A risk register at the congregational level has recently been developed, however a procedure to review the risk assessment on a regular basis has not yet been developed. Refer <u>recommendation #2</u>.

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.	√			
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.	✓			

Observations:

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

Standard 5

Robust human resource management

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

questio	on 5.1 - Recruitment, including advertising, interview ons, referee checks and personnel pre-employment ing, emphasises child safeguarding.	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.	√			
5.1.2	The entity documents its safeguarding approach in recruitment and screening procedures and processes.	√			
5.1.3	Positions are assessed for the expected level of contact with children and appropriate child safeguarding recruitment procedures are implemented.	~			
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.	✓			

Observations:

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

clergy a	n 5.2 - Relevant personnel (including all seminarians, nd religious) have current working with children checks or ent 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. 	√			
5.2.2	The entity keeps records and monitors the status of working with children checks and/or background checks for all personnel.		>		

Observations:

5.2.1 Police checks are conducted, however some of these were conducted more than three years ago. Refer recommendation #3.

	n 5.3 - Personnel receive an appropriate induction and are of child safeguarding responsibilities, including reporting ons.	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.		✓		
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.	√			

Observations:

5.3.1 A safeguarding induction/training program has recently been developed. Refer recommendation #4.

I hatore and diffing caminary and religious formation, as well as for		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.	Not relevant to current operations				
5.5.2	Seminary and initial formation programs have robust screening processes for candidates for religious ministry, including external psychological and psychosexual assessments.	Not relevant to current operations				
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.	✓				
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.	Not relevant to current operations				

Observations:

- 5.5.1/5.5.2/5.5.5 There are no candidates in formation, or Sisters recently professed.
- 5.5.3 A section on professional supervision has been added to the Safeguarding Policy and is in the process of being implemented. Refer <u>recommendation #5</u>.

have a	ion 5.6 - Seminary and formation programs for clergy and religious appropriate curriculum to build the knowledge and skills of dates to understand and lead child safeguarding 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.	Not relevant to current operations				
5.6.2	Seminary and initial formation programs ensure promotion of pastoral responses to victims/survivors of sexual abuse.	Not relevant to current operations				
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.	Not relevant to current operations				

Observations:

N/A - there are no sisters in formation.

	ion 5.7 - Credentialing and movement of seminarians, clergy eligious is appropriately managed.	Managed & Measurable	Defined & Developed	Initial/ 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.	~			

Observations:

 $\label{lem:requirements} \textbf{Requirements of the Indicator are in place. No recommendations for improvement noted.}$

work i	ion 5.8 - Entities which receive overseas clergy and religious for in ministry have targeted programs for the screening, induction, ssional supervision and development 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.	Not relevant to current operations						
5.8.2	All overseas clergy and religious participate in a Safeguarding Induction program, documented by the entity, before work with children begins.	Not relevant to current operations						
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.	Not relevant to current operations						
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.	Not relevant to current operations						
Observ	Observations:							

There are no Sisters from overseas who are assigned to the Australian Unit.

for raising concerns and complaints are responsive, under the communities and personnel 6.1 - The entity has an effective Complaints Handling Poledures which clearly outline the roles and responsibilities the set of dealing with different types of complaints, reporting and record keeping requirements. The entity's policies, procedures and practices ensure that all endatory reporting obligations are met. The ere are documented procedures that provide step-by-step didance on what action to take for different types of complaints,	icy 6, Managed &	Defined & Developed	I by children Initial/ Ad-Hoc	Not Addressed
edures which clearly outline the roles and responsibilities less to dealing with different types of complaints, reporting and record keeping requirements. e entity's policies, procedures and practices ensure that all andatory reporting obligations are met. ere are documented procedures that provide step-by-step	Managed & Measurable			
ere are documented procedures that provide step-by-step	✓			
, , , , , , , , , , , , , , , , , , , ,				
cluding breaches of Codes of Conduct, disclosures, allegations on needs of a child, be they historic or current.				
ere are clear procedures for identifying and mitigating actual arceived conflicts of interest in complaint management.	nd 🗸			
e entity works in cooperation with relevant organisations and s ecialist advice from statutory child protection services when cessary.	seeks 🗸			
y roles and responsibilities in relation to handling complaints articulated within the Complaint Handling Policy and procedures.	re 🗸			
er e ec e pr e pr e ec e ce	terns of abuse of a child, be they historic or current. The are clear procedures for identifying and mitigating actual at eived conflicts of interest in complaint management. The entity works in cooperation with relevant organisations and stalist advice from statutory child protection services when essary. The entity works in cooperation with relevant organisations and stalist advice from statutory child protection services when essary. The entity works in cooperation with relevant organisations and stalist advice from statutory child protection services when essary. The entity works in cooperation with relevant organisations and responsibilities in relation to handling complaints a culated within the Complaint Handling Policy and procedures differentiate, where operate, between a child victim and an adult bringing forward plaint of abuse suffered as a child. The entity works in cooperation with relevant organisations and statutory child protection services when essary.	terns of abuse of a child, be they historic or current. The are clear procedures for identifying and mitigating actual and eived conflicts of interest in complaint management. The entity works in cooperation with relevant organisations and seeks challst advice from statutory child protection services when essary. The entity works in cooperation with relevant organisations and seeks challst advice from statutory child protection services when essary. The entity works in cooperation with relevant organisations and seeks challst advice from statutory child protection services when essary. The entity works in cooperation with relevant organisations and seeks challst advice from statutory child protection services when essary. The entity works in cooperation with relevant organisations and seeks challst and seeks chall the entity works in cooperation with relevant organisations and seeks challst and seeks chall the entity works in cooperation with relevant organisations and seeks chall the entity works in cooperation with relevant organisations and seeks chall the entity works in cooperation with relevant organisations and seeks chall the entity works in cooperation with relevant organisations and seeks chall the entity works in cooperation with relevant organisations and seeks chall the entity works in cooperation with relevant organisations and seeks chall the entity works in cooperation with relevant organisations and seeks chall the entity works in cooperation with relevant organisations and seeks chall the entity works in cooperation with relevant organisations and seeks chall the entity works in cooperation works and seeks chall the entity works in cooperation works and seeks chall the entity works and seeks chal	terns of abuse of a child, be they historic or current. The are clear procedures for identifying and mitigating actual and eived conflicts of interest in complaint management. The entity works in cooperation with relevant organisations and seeks cialist advice from statutory child protection services when essary. The roles and responsibilities in relation to handling complaints are culated within the Complaint Handling Policy and procedures. Complaint Handling Policy and procedures differentiate, where ropriate, between a child victim and an adult bringing forward a plaint of abuse suffered as a child. The system must be reso that confidential information is stored, protected and ined for 50 years.	terns of abuse of a child, be they historic or current. The are clear procedures for identifying and mitigating actual and eived conflicts of interest in complaint management. The entity works in cooperation with relevant organisations and seeks itialist advice from statutory child protection services when essary. The entity works in cooperation with relevant organisations and seeks itialist advice from statutory child protection services when essary. The entity works in cooperation with relevant organisations and seeks itialist advice from statutory child protection services when essary. The entity works in cooperation with relevant organisations and seeks it is protected and interest in complaint and seeks it is protected and interest in cooperation with relevant organisations and seeks it is protected and interest in complaint and seeks it is protected and interest in complaint and seeks it is protected and interest in complaint and seeks it is protected and interest in complaint and seeks it is protected and interest in complaint and seeks it is protected and interest in complaint and seeks it is protected and it is pro

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

		on 6.2 - The entity has a child-focused complaints handling n that is understood by children, families, carers and personnel.	Managed & Measurable	Defined & Developed	Initial/ Ad-Hoc	Not Addressed
6	/	The complaints handling system prioritises the safety and well-being of children.	✓			
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.		√		

Observations:

6.2.2 Complaints handling procedures are located within the Safeguarding Policy and Complaints Resolution Policy. These documents should be easily accessible on the website once established. Refer <u>recommendation #1</u>.

	on 6.3 - Complaints are taken seriously, and responded to otly and thoroughly.	Managed & Measurable	Defined & 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.	√			
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.	√			
6.3.4	Complainants are responded to promptly and kept informed as to the progress of dealing with their complaint.	√			
6.3.5	Support and care are provided to a child who has experienced or is alleging abuse, and other affected parties.	√			
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.	√			
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.	√			
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.	√			
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.	√			

Observations:

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

addre wheth	ion 6.4 - The entity has policies and procedures in place that ss reporting of complaints and concerns to relevant authorities, ner or not the law requires reporting, and co-operates with law cement.	Managed & Measurable	Defined & Developed	Initial/ Ad-Hoc	Not Addressed
	The Complaints Handling Policy requires that:				
6.4.1	concerns and complaints of child abuse occurring within the entity be reported to the appropriate statutory authority/ies, regardless of whether the reporting is mandated; and	√			
	 personnel cooperate with law enforcement procedures and directives. 				
Obser	vations:				
Requir	rements of the Indicators are in place. No recommendations for improv	ement noted			
Criter are m	ion 6.5 - Reporting, privacy and employment law obligations et.	Managed & Measurable	Defined & Developed	Initial/ Ad-Hoc	Not Addressed
6.5.1	The Complaints Handling Policy requires that all relevant reporting, privacy and employment law obligations are met.	✓			
	vations: rements of the Indicators are in place. No recommendations for improv	ement noted	l		
	ion 6.6 - The Church Authority ensures mechanisms are in place e for adult complainants.	Managed & Measurable	Defined & Developed	Initial/ Ad-Hoc	Not Addressed
6.6.1	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.	√			
6.6.2	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.	√			
	vations: rements of the Indicators are in place. No recommendations for improv	ement noted	l.		
	ion 6.7 - The Church Authority ensures mechanisms are in place nitor and support respondents facing allegations.	Managed & Measurable	Defined & Developed	Initial/ Ad-Hoc	Not Addressed
6.7.1	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.	√			
6.7.2	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.	√			

Observations:

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

Standard 7 Ongoing education and training

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

	ion 7.1 - Personnel are trained and supported to effectively ment the entity's child safeguarding policies and procedures.	Managed & Measurable	Defined & Developed	Initial/ Ad-Hoc	Not Addressed
7.1.1	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).		√		
7.1.2	The entity's induction and refresher safeguarding training must as a minimum cover: Code of Conduct; safeguarding risk management; Child Safeguarding Policy and procedures; Complaints Handling Policy and procedures; reporting obligations; and e-safety training.		✓		
7.1.3	The entity keeps records of participation to ensure all personnel attend induction and refresher safeguarding training.		√		
7.1.4	The entity ensures that personnel who have specific child safeguarding responsibilities, such as those appointed to the role of safeguarding co-ordinator and those appointed to the Safeguarding Committee, receive ongoing support and professional development relevant to their role.	√			

Observations:

A safeguarding induction/training program has recently been developed. Refer <u>recommendation #4</u>.

effect	Criterion 7.3 - Personnel receive training to enable them to respond effectively to child safeguarding risks, concerns, disclosures and allegations of child abuse.		Defined & Developed	Initial/ Ad-Hoc	Not Addressed
7.3.1	The entity provides training to equip relevant personnel to appropriately respond to and support those bringing forward concerns, disclosures and allegations of child abuse.	√			
7.3.2	The entity provides training to ensure personnel are aware of information sharing and record keeping policies and procedures.		√		
	The entity provides training to ensure personnel are aware of their reporting obligations under state/territory legislative requirements including:				
7.3.3	 reporting criminal behaviour to police; 		✓		
	 mandatory reporting to child protection authorities; 				
	Reportable Conduct Scheme; and				
	• reporting to regulatory authorities/government departments.				

Observations:

A safeguarding induction/training program has recently been developed. Refer recommendation #4.

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

	ion 8.2 - The online environment is used in accordance with the 's Code of Conduct, and safeguarding policies and procedures.	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.	~			
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.			√	

Observations:

8.2.2 A process for monitoring of internet activity is being developed. Refer recommendation #6.

	ion 8.3 - Risk management plans consider risks posed by the '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.	√			
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.	Not relevant to current operations			

Observations:

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

	ion 8.4 - Entities that contract facilities and services to and from parties have procurement policies that ensure safeguarding of en.	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.		~		
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.	Not relevant to current operations			

Observations:

8.4.1 A policy on safeguarding requirements for the management of third parties and contractors who conduct work on RNDM premises has recently been developed and now needs to be implemented. Refer <u>recommendation #7</u>.

Standard 9 Continuous improvement

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

	ion 9.1 - The entity regularly reviews and improves child safeguarding 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 Safeguarding Implementation Plan is regularly reviewed, progress is tracked and actions/strategies updated.				
9.1.4	The entity's Child Safeguarding Policy is subject to regular review – at least every three years.	✓			

Observations:

9.1.1 A Safeguarding Implementation Plan has recently been developed and will be further populated by the results of the audit. Refer recommendation #8.

Criterion 9.2 - The entity analyses concerns and complaints to identify causes and systemic failures to inform continuous improvement.			Defined & Developed	Initial/ Ad-Hoc	Not Addressed
9.2.1 Processes are in place to analyse individual incidents or 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.	√			

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.			Defined & Developed	Initial/ Ad-Hoc	Not Addressed
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 CPSL			
9.3.2	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			ave been	
Obser	Observations:				

Standard 10 Policies and procedures support child safety Policies and procedures document how the entity is safe for children Criterion 10.1 - Policies and procedures address National Catholic Managed & Defined & Initial/ Not Measurable Developed Ad-Hoc Addressed Safeguarding Standards. All relevant policies and procedures reference appropriate 10.1.1 safeguarding approaches, requirements and responsibilities. **Observations:** Requirements of the Indicators are in place. No recommendations for improvement noted. Criterion 10.2 - Policies and procedures are accessible and easy to Managed & Defined & Initial/ Not Measurable Developed Ad-Hoc Addressed understand. The entity's policies and procedures relevant to safeguarding are 10.2.1 readily available and accessible to personnel. **Observations:** Updated safeguarding policies have been scheduled to be disseminated, along with the associated training, to all staff and volunteers in September 2020. Refer recommendation #1 and recommendation #4. Criterion 10.3 - Best practice policy models and stakeholder Defined & Initial/ Managed & Not consultation inform the development and review of policies and Developed Measurable Ad-Hoc Addressed procedures. The entity has processes in place to monitor adherence to policies 10.3.1 ✓ and procedures relevant to safeguarding. 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. 10.3.1 A formal process of monitoring adherence to policies and procedures as part of the Safeguarding Implementation Plan has not yet been developed. Refer recommendation #8. 10.3.2 A formal review schedule to ensure policies and procedures are reviewed and updated regularly has not yet been developed. Refer recommendation #8. Criterion 10.4 - The Church Authority and leaders model compliance Managed & Defined & Initial/ Not Ad-Hoc Measurable Developed Addressed with policies and procedures. The Church Authority and leaders promote and enact all policies and 10.4.1 procedures relevant to safeguarding. Observations: Requirements of the Indicators are in place. No recommendations for improvement noted. Criterion 10.5 - Personnel understand and implement the policies and Managed & Defined & Initial/ Not Measurable Ad-Hoc procedures. Developed Addressed The entity encourages regular discussion and feedback from 10.5.1 personnel on their understanding and practical implementation of / policies and procedures.

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

Observations:

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 1.1 The en	Priority 2		
	of Conduct provides guidelines for personnel on expected behavioural		
standards and respon	isibilities		
Details of finding	 The following points were noted: RNDM has a comprehensive suite of safeguarding policies including a Safeguarding Commitment Statement, Policy for the Safeguarding of Children and Vulnerable Adults (Safeguarding Policy), Code of Conduct and Complaints Resolution Policy. However, RNDM does not have its own website and therefore these documents are only publicly available in the office or by request. There has previously been no requirement for signing/acknowledgement of the Code of Conduct by all personnel. 		
Recommendation	 RNDM will be establishing its own website in the latter part of 2020. We recommend that all relevant safeguarding documents be easily accessible on the website once operational. In the interim, we recommend the following documents be publicly displayed in a prominent area of RNDM's office: Safeguarding Commitment Statement; Code of Conduct; and Child-friendly poster for raising concerns or complaints. Commitment Statement on complaints. Complete the statement of the		
Agreed Action	 All safeguarding policies and procedures are available in the office and the key policy documents are also appropriately displayed. The website will be live by the end of October 2020 and we will upload the safeguarding documents to ensure they are easily accessible to the public. Following the training workshops which are scheduled to be held in September 2020, all staff and Sisters will be required to sign the Code of Conduct and return the signed copy to the office for filing. 		
Responsibility	Province Secretary		
Due date	Oue date 31 October 2020		

Recommendation #2

Criterion 1.2 A child safeguarding culture is championed and modelled at all levels of the entity from the top down and bottom up

Priority 2

Criterion 1.5 The entity has risk management strategies focusing on preventing, identifying and mitigating risks to children

and mitigating risks t	and mitigating risks to children		
The following points were noted: 1. Safeguarding is discussed by the leadership team as matters arise and this has incorproviding updates to members on safeguarding policies, changes to legislation an safeguarding requirements. However, the topic of safeguarding/professional standards was not a regular agenitem at leadership meetings. 2. A safeguarding risk assessment has recently been conducted for RNDM's activitie ministries as well as for RNDM premises and communities. However, a procedure to be established for the regular review and update of the risk assessment.			
Recommendation	 The topic of safeguarding/professional standards should be included as a standing agenda item at leadership meetings, with any pertinent discussions minuted. The risk assessment should be reviewed regularly (at least six monthly) by the leadership team to ensure there is visibility at the congregational level over those activities or ministries conducted by Sisters which have a higher safeguarding risk and which may require increased monitoring, training or support. The review of the risk assessment should be minuted, in line with the recommendation in point 1. 		
Agreed Action	 Safeguarding is now a regular item on the leadership team meeting agenda and discussions are minuted. Following the leadership team meeting, pertinent issues are disseminated to the Sisters via a newsletter, which will include any relevant matters in relation to safeguarding. The Province Board has established a Risk Management Committee which is responsible for a full assessment of all risks, including those related to safeguarding. Twice a year at the leadership team meeting, a full review of the safeguarding risk assessment and risk register will be completed. 		
Responsibility	Province Leader and Vicar		
Due date	Implemented and ongoing		



Standard 5: Robust human resource management

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

Recommendation #3	Priority 2		
Criterion 5.2 - Relevant personnel (including all seminarians, clergy and religious) have current working with children checks or equivalent background checks			
Details of finding	The majority of Sisters and staff have had a National Criminal History (police) check or are in the process of having this conducted. However, we note that some of the existing checks are more than three years old.		
Recommendation	 We recommend the following: Relevant staff, such as those in leadership positions or those with access to keys, monetary funds or other assets, should undergo a National Criminal History (police) check. Sisters who are in leadership positions or who represent the entity in a formal capacity should undergo a National Criminal History (police) check. National Criminal History (police) checks should be undertaken regularly, at least every three years. 		
Agreed Action	1. Sisters that are in leadership positions or have ministry requirements will be required have National Criminal History (police) checks. Using this criteria, we have identified to Sisters in this category whose checks are now more than three years old. They will be requested to obtain new police checks. We have also identified the relevant staff who are required to have police checks and have confirmed that their checks are recent, and within the three year timeframe. 2. Our Safeguarding Policy will be updated to include a term of three years for undertaking National Criminal History (police) checks.		
Responsibility	Province Secretary		
Due date	31 October 2020		

30 September 2020

Due date

Recommendation #				
Criterion 5.5 - Robust processes exist for screening candidates before and during seminary and religious formation. Robust processes are implemented for ongoing formation, support and supervision of clergy and religious				
Details of finding	A section on professional/pastoral supervision has been added to the Safeguarding Policy are is in the process of being implemented.			
Recommendation	We note that many Sisters are retired and no longer in formal ministry and therefore the requirements for professional/pastoral supervision would likely not apply to these Sisters. However, this needs to be assessed and documented for each Sister and appropriate supervision (as distinct from spiritual direction) organised for those Sisters who may find themselves in higher risk environments as part of their ministry. This could take the form of group supervision sessions or other similar mechanisms to fulfil the Supervision requirements. Each member assessed as requiring Supervision should keep a log of these sessions and provide this information to the Provincial office on an annual basis.			
All Sisters have been assessed for requirements of supervision and the outcome has been noted in the safeguarding risk assessment relevant to each Sister's ministry/activity. We need that this has resulted in only three Sisters being identified as requiring supervision based of the nature of their ministry and this requirement will be implemented. Records of attendance at supervision will be kept by the member and provided to the Provincial office at the end of each year.		y/activity. We note ervision based on		
Responsibility	Responsibility Province Leader			
Due date	Due date Implemented - logs of attendance at supervision to be submitted by 31 December each ye			



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 #6			
Criterion 8.2 - The or Conduct, safeguardir	Priority 3		
Details of finding	The following points were noted: 1. RNDM has an IT, Internet, Email & Social Media Policy (IT Policy) as part of the draft master workplace policies developed in 2017. The IT Policy contains comprehensive guidance on the use of technology and internet but has not been formally rolled out to all Sisters, staff and volunteers. 2. The IT Policy states that the Province leadership team has the right to check (devices) where private use is considered excessive or inappropriate. However, a program for monitoring of internet activity is still to be developed.		
Recommendation	1. The IT, Internet, Email & Social Media Policy (IT Policy) should be formalised and rolled out to all Sisters, staff and volunteers. 2. In relation to monitoring of internet activity, we understand that many of the Sisters do not use technology on a regular basis. For those who have personal laptops, we recommend the congregation re-emphasises the requirements of the IT policy, in conjunction with reinforcement of the e-safety requirements in the Code of Conduct. For all other computers (other than personal laptops) owned by RNDM and used by Sisters, staff or volunteers, a process should be established whereby the devices are monitored for appropriate use and content. This could take the form of an annual check by the party/firm that provides IT services to RNDM.		
 The IT Policy will be shared with the Sisters, staff and volunteers during the training in September 2020. At this time, we will reinforce the e-safety requirements in the Cod Conduct for all Sisters using their personal laptops. We have been liaising with our IT provider, who is in the process of developing a plan monitor the internet activity of all office users. 		ents in the Code of	
Responsibility Due date	Province Leader and Secretary 1. 30 September 2020 2. 31 December 2020		

Recommendation #			
Criterion 8.4 - Entiti procurement policie	Priority 3		
Details of finding RNDM has recently developed a formal contractor management policy which includes safeguarding elements.			
Recommendation	The contractor management policy should be finalised, approved and implemented for all premises owned by RNDM.		
Agreed Action	The contractor management policy has been finalised and will be shared w staff and volunteers at the training in September 2020. Each property will of the policy for their application as required.	•	
	Existing and new contractors will be provided with a copy of the updated safeguarding policy and asked to acknowledge receipt.		
Responsibility Province Leader, Province Secretary and Sisters in each community			
Oue date 30 November 2020			



Standard 9: Continuous improvement

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

Recommendation #8			
Criterion 9.1 - The e	Priority 2		
Details of finding	The following points were noted: 1. RNDM has recently developed a Safeguarding Implementation Plan and will be using the results of the CPSL audit to further populate the plan. 2. A process to monitor ongoing compliance with safeguarding policies is yet to be developed. 3. Whilst safeguarding policies have recently been updated, a formal review schedule for the regular review and update of the policies, incorporating ongoing feedback from all personnel, is yet to be developed.		
Recommendation	We recommend the Safeguarding Implementation Plan be updated to address the points noted above, with target dates identified and monitored.		
 The Safeguarding Implementation Plan will be updated at completion of the audit to address the points that have been identified. The Safeguarding Committee will meet every six months to review the Implementation Plan and monitor ongoing compliance with safeguarding requirements. A policy review schedule will be developed for the regular review and update of safeguarding policies. 		Implementation 5.	
Responsibility	1 and 3 - Province Secretary 2 - Safeguarding Committee		
Due date	31 December 2020		

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

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.

Priority 2

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.

Priority 3

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: https://aifs.gov.au/cfca/publications/cfca-resource-sheet/reporting-child-abuse-and-neglect
	 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

	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 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.
Complainant	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.
Conflicts of interest	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.
Cultural safety	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.
Dicastery	means departments of the Roman Curia, including the Secretariat of State, congregations, tribunals, councils and offices.
Diocese	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.
Entity	means an entity that has been identified as Catholic by a competent authority within the Catholic Church.
Eparchy	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).
Exposure to family violence	refer to 'child abuse'.
Formation/formation program	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.
Grooming/grooming behaviour	refer to 'child abuse'.
Institutional 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.
	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.
Lay/lay person	means members of the Catholic Church other than bishops, priests, deacons and religious.
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.

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.