

P24 Notifiable Issues Procedure (HSQF)

1. Purpose

The purpose of this document is to define the roles and responsibilities when a notifiable incident occurs or is seen to be occurring during a Human Services audit.

The Department of Communities Group (Child Safety, Youth and Women; Communities, Disability Services and Seniors) funds state based human service organisations through service contracts or other agreements. All such contracted organisations are required to comply with various legislative, regulatory and/or contractual safeguards.

2. Scope

This procedure covers all staff and contract auditors and lead auditors conducting HSQF certification audits for QIP Certifications.

3. Referenced Documents

PY05	Privacy Policy
F81	Notifiable Issues Form

Table 1-Referenced Documents

4. Workplace Health & Safety

1	Stressors due to direct observation and reporting of a Notifiable Issue
2	Stressors due to management of the Notifiable Issue post observation and reporting

5. Terms and Definitions

HSQF	Human Services Quality Framework v4.1
Notifiable Issue	See Appendix 1
QIP Certifications	<i>Quality Innovation Performance Certifications Pty Ltd</i>
Statement of Standards	See Appendix 2

Table 2-Terms and Definitions

6. Procedure

The HSQF auditing guidelines developed by the department in partnership with the Joint Accreditation System of Australia and New Zealand (JAS-ANZ) require auditors to notify the department and/or other relevant authorities such as Queensland Police or the Coroner, should they become aware of serious issues of concern during an audit. Auditors are required to make a notification to the department as soon as practicable.

The department has provided guidance to auditors around the type of issues which are likely to meet the threshold of a Notifiable Issue. This information is summarised in Appendix 1.

Note: Where an auditor becomes aware of an issue that is not included in the department's list, they will use their professional judgement to assess whether the issue should be referred to the department for investigation.

6.1. Identifying a Notifiable Issue

6.1.1. Step 1

- Where an auditor becomes aware of a potential notifiable issue they will assess any immediate concerns for the safety and wellbeing of the persons involved and take appropriate action.
- Issues relating to suspected harm or risk of harm to children and young people in care or other breaches of the Statement of Standards are required to be immediately reported to Child Safety Service Centres.
- Contacts for relevant Child Safety Service Centres can be found on the department's website at: <https://www.communities.qld.gov.au/childsafety/about-us/contact-us/child-safety-service-centres>;

6.1.2. Step 2

- As a general rule, an auditor will immediately advise their certification body as well as an organisation's Chief Executive Officer or equivalent member of the governing body of their intention to refer a potential notifiable issue to the department.
- This provides an opportunity for the organisation to take immediate action to consider and address the issues identified.

6.1.3. Step 3

- The auditor or their certification body will refer the matter to the department for investigation.
- Following this, the organisation will be contacted by relevant departmental officers to discuss the issues in more detail, including any corrective action that has been taken to address the cause/s of the issue, such as gaps in systems and processes and reporting.
- The auditor can continue with the audit process once the matter has been referred to the department if the department indicates they may do so. However, they cannot complete their audit findings until they are advised by the department that the investigation has been completed.
- This may mean a delayed timeframe for receiving the draft audit report or HSQF certificate.
- In the event where it seems necessary to disclose information regarding a child in custody or guardianship of the Director-General of the department, QIP Certifications shall obtain the departments consent to do so.

6.1.4. Step 4

The department will notify the certification body or their auditor when the notifiable issue is closed or the investigation is completed so that the certification process can proceed.

6.2. Impact of the Notifiable Issue on the Audit Outcome

A notifiable issue in most cases relates to a matter of serious concern or noncompliance with key legislative safeguards and it is likely that the auditor will give a Major Non-conformity rating to the standard or indicator relevant to the issue identified.

An organisation will have three months to take corrective action to either close-out or downgrade the major non-conformity. The auditor will normally conduct an onsite follow-up audit within the three month period to assess the effectiveness of these corrective actions.

If an organisation is licensed, there may be a requirement to close out a major non-conformity in a shorter timeframe, to ensure ongoing legislative compliance in line with its licence conditions. This would be discussed with Child Safety Licensing.

6.3. Reducing the Risk of a Notifiable Incident

There are a number of strategies that organisations can implement to reduce the risk of not meeting the standards or complying with key legislative safeguards for protecting vulnerable service users.

These strategies include:

- Ensuring that the organisation understands the safeguards and mandatory requirements that need to be implemented to meet HSQF. These are detailed in the HSQF User Guide-Certification, which is used by auditors to assess whether an organisation is meeting the standards;
- Conducting a self-assessment or internal review against the standards prior to an audit, based on the requirements outlined in the HSQF User Guide–Certification;
- Ensuring that the governing body, management, staff and volunteers are aware of their roles and responsibilities and receive ongoing training and supervision relevant to their roles;
- Implementing processes for the regular review of compliance with requirements and legislative safeguards–this helps to identify any gaps or issues and allow for prompt action to be taken;
- Implementing processes for addressing issues relating to customer/client safety and wellbeing (including incident and harm reporting, customer/client feedback and complaints) and regular monitoring of the effectiveness of these processes;
- maintaining adequate records that address departmental requirements as well as the requirement for ongoing monitoring processes;
- Accessing the tools and resources available from the department’s website and Queensland Council of Social Service (QCOSS) Community Door;
- Implementing and maintaining a quality framework that supports continuous improvement, including information from previous audits.

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7. Revision History

Revision	Effective Date	Section	Change Description
1	27/11/2018	All	Initial document release.
2	7/08/2019	All	Additional wording added in response to JAS-ANZ Document review

Appendix 1 - List of issues that meet the threshold for referral as a Notifiable Issue

Issue	Details
<p>An issue that meets the definition of ‘serious concern’ in Section 16 of the Community Services Act 2007.</p> <p>Applies to all organisations</p>	<p>The legislation provides that a serious concern for funding received by a funded entity exists if any of the following happen or there is a serious risk that any of the following will happen:</p> <ul style="list-style-type: none"> • the funding received by the funded entity is improperly used; <i>Examples of improper use of funding:</i> <ul style="list-style-type: none"> ○ Funding is used for a dishonest or fraudulent purpose. ○ funding is used for a purpose other than providing a funded product or service • the funded entity significantly fails to deliver a funded product or service; <i>Example of significantly failing to deliver a product or service:</i> <ul style="list-style-type: none"> ○ Closing an emergency accommodation service delivered with funding where the service is required, under the funding agreement, to be continually open. • an act done or omission made by the funded entity in providing a funded product or service results in harm to an individual; <i>Example:</i> <ul style="list-style-type: none"> ○ An individual uses a funded service delivered by a funded entity and the individual suffers physical, psychological, emotional or financial harm as a result of neglect, abuse or exploitation by the funded entity. • If the funded entity received the funding to deliver disability services to which the <i>Disability Services Act 2006</i> applies - the funded entity contravenes a provision of the Disability Services Act 2006 (until transition to NDIS is completed in 2020).

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Issue	Details
<p>Professional misconduct</p> <p>Applies to all organisations</p>	<p>Evidence of misconduct involving the organisation, including criminal activities or breaches/ potential breaches of relevant professional standards [e.g. <i>Statement of Standards</i>; Professional Practice Standards – Working with men who perpetrate domestic violence].</p> <p>Evidence of fraud, bankruptcy, or trading when insolvent.</p>
<p>Failure to report a death in care as defined in section 7 of the Coroner’s Act 2003</p> <p>Applies to Relevant Organisations</p>	<p>Evidence that an organisation has failed to report:</p> <ul style="list-style-type: none"> the death of a person with disability living in an accommodation service run by the organisation or in hospital after being moved from the direct care of the organisation. The death of a child in the custody and guardianship of the Chief Executive under <i>the Child Protection Act 1999</i>. <p>Note: In the above circumstances, <i>the Coroner’s Act 2003</i> imposes a statutory duty on the auditor to report the matter to the Coroner.</p>
<p>Non-compliance with criminal history screening requirements</p> <p>Applies to all relevant organisations</p>	<p>Absence of a current:</p> <ul style="list-style-type: none"> Positive notice, exemption notice or Blue Card (for any or all that require one) or Failure to lodge an application, as required and relevant to the person’s role with the organisation.

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Issue	Details
<p>Noncompliance with harm reporting requirements</p> <p>Applies to all organisations providing services to children and families (including child protection placement services)</p>	<p>Evidence of the failure to report to the department and respond to:</p> <ul style="list-style-type: none"> • Potential or actual harm, abuse and/or neglect of a child that may occur (“Harm” is defined in Section 9 of <i>the Child Protection Act 1999</i>).
<p>Noncompliance with key legislative safeguards</p> <p>Applies to all Child Protection Placement Services</p>	<p>Absence of clear outcome of Child Safety and Personal History screening for:</p> <ul style="list-style-type: none"> • The Nominee, Directors, managers and staff of a licenced care service, as required and relevant to the person’s role with the service (unless the manager or staff will not be undertaking a role in a care service until an outcome is received). <p>Evidence of the failure to:</p> <ul style="list-style-type: none"> • Report the use of a prohibited practice and/or reactive response to the department in the required timeframe (unless the use has already been reported to the department).
Issue	Details
<p>Noncompliance with key legislative safeguards</p> <p>Applies to Child Protection Placement Services and Disability Services</p>	<p>Absence of:</p> <ul style="list-style-type: none"> • A current positive behaviour support plan and • Appropriate current approval for the use of restrictive practices (where required). <p>Evidence of the use of a restrictive practice that has not been reported to the department.</p> <p>Engagement of a person at a service outlet without compliance with criminal history screening requirements under <i>the Disability Services Act 2006</i>.</p>

Appendix 2—Standards of Care (*statement of standards*)

Statement of standards (*Child Protection Act 1999, section 122*)

Foster and kinship carers are required to provide a level of care which is consistent with the standards of care as outlined in the *statement of standards* in the *Child Protection Act 1999* (the Act), section 122.

The *statement of standards* provides a way to measure quality of care and forms a basis for assessing whether a care environment is acceptable. The standards are interpreted with consideration to the needs of each individual child.

The Act outlines the following standards:

1. The Chief Executive (Director-General) must take reasonable steps to ensure a child placed in care under section 82 is cared for in a way that meets the following standards (the statement of standards):
 - the child's dignity and rights will be respected at all times
 - the child's needs for physical care will be met, including adequate food, clothing and shelter
 - the child will receive emotional care that allows him or her to experience being cared about and valued and that contributes to the child's positive self-regard
 - the child's needs relating to his or her culture and ethnic grouping will be met
 - the child's material needs relating to his or her schooling, physical and mental stimulation, recreation and general living will be met
 - the child will receive education, training or employment opportunities relevant to the child's age and ability
 - the child will receive positive guidance when necessary to help him or her to change inappropriate behaviour
 - the child will receive dental, medical and therapeutic services necessary to meet his or her needs
 - the child will be given the opportunity to participate in positive social and recreational activities appropriate to his or her developmental level and age
 - the child will be encouraged to maintain family and other significant personal relationships
2. If the child has a disability-the child will receive care and help appropriate to the child's special need.
3. For subsection (1)(g), techniques for managing the child's behaviour must not include corporal punishment or punishment that humiliates, frightens or threatens the child in a way that is likely to cause emotional harm.
4. For subsection (1)(j), if the chief executive has custody or guardianship of the child, the child's carer must act in accordance with the chief executive's reasonable directions.
5. The application of the standards to the child's care must consider what is reasonable having regard to:
 - The length of time the child is in the care of the carer or care service;
 - The child's age and development.