Responding to Abuse:

A guide to accompany the Zero Tolerance Responding to Abuse films

# Disclaimer

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# Acknowledgements

National Disability Services would like to acknowledge the funding from the NSW Government Industry Development fund which allowed these resources to be developed.

We would like to express our gratitude for the time and expertise many people gave in the development of these resources, including:

**Project Reference Group**

* Carol Berry, Christine Regan – Rights Project for People with Disability, NSW Ombudsman
* Anthony Holton – Disability Reportable Incidents Division, NSW Ombudsman
* Leigh Creighton, Jen Cush and Tania Lewis – Community Disability Alliance Hunter
* Tracy Wright – Council for Intellectual Disability
* James Bannister and Liz Collier – NDS Zero Tolerance
* Jessica Lobo – NDS NSW
* Emily Dash, Matt Cartwright, Peta Khan – Maitree House

**People with disability consumer reference groups**

* Community Disability Alliance Hunter (CDAH)
* Victorian Advocacy League for Individuals with Disability (VALID)

**Responding to Abuse frontline staff reference group**

* Lorenzo Rojas-Diaz – ACL Disability Services
* Liz Rogan – Cerebral Palsy Alliance
* Rochelle Morris – The Disability Trust
* Jennifer Madsen – Sunnyfield Disability Services
* Beau Isaac – New Horizons

We would also like to say a very special thank you to the cast, crew and actors who brought these characters and ideas to life on screen. Thank you all!

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# About the Zero Tolerance Initiative

*Zero Tolerance* is an initiative led by NDS in partnership with the disability sector. Using a human rights approach, *Zero Tolerance* outlines strategies for service providers to improve prevention, early intervention and responses to abuse, neglect and violence experienced by people with disability. Put simply, ***Zero Tolerance* means abuse is never OK**. It urges providers to focus on rights and target abuse to create safer, more empowering environments for people they support.

An expanding range of Zero Tolerance tools and resources for the disability sector is available to support safeguarding approaches for people with a disability. See the NDS website for more information: [link](https://www.nds.org.au/resources/zero-tolerance).

# Who is this guide for?

This guide accompanies the NDS Zero Tolerance *Responding to Abuse* films. The films and this guide have been made to help disability workers and service providers think about the best way to support people with disability who experience abuse, neglect or violence.

We hope they will help you and your team have important conversations about responding to abuse and neglect and the best way to support people with disability.

You can use this guide to work through the films for self-reflection, team discussions or as part of supervision and training.

Abuse, neglect, violence and exploitation of people with disability is a significant and serious issue. The *Zero Tolerance Responding to Abuse* films and guide should only be used as part of your organisation’s policies and procedures. You will need to comply with local legislation and – in the case of criminal matters – the police in your state and territory. In case of any doubt around your legal obligations, refer to the police in the first instance.

Links to further information and resources are provided at the end of the guide.

# Using this guide

The *Responding to Abuse* films have been developed for people who work in the disability sector. They are designed to help you to recognise and know how to respond quickly and appropriately to acts of poor practice, abuse, neglect, and violence. There is an introduction film, and seven themed films which cover:

* Recognising early warning signs
* Understanding trauma
* Being a bystander
* A ‘safety first’ approach
* Responding to a disclosure
* Preserving evidence
* The role of supervisors and managers

Each film includes an acted scenario to watch and use for reflection and conversation. Watch the scenario on your own or with your team. Pause the film then consider the following questions:

* What did you observe?
* What impact do you think this has on the people involved?
* What would you question about this scenario?
* What could be done differently?

Once you have finished, press play again to hear what people from across the disability sector observed. Think about how the points raised in the films relate to the people you support and discuss anything that you might need to change in your current work. Discuss with your team and think about where else you can go for support and information.

# Content Warning

These films includes scenes of abuse and neglect of people with disability, which some people may find upsetting. Words or images can cause distress or trigger traumatic memories for survivors of abuse, violence or trauma. Please speak with your supervisor or manager if you need to discuss any of the issues covered in these films.

You can also call Lifeline on **13 11 14** for confidential 24-hour telephone crisis support.

# 1. Recognising Early Warning Signs

* People with disability can experience violence and other forms of abuse in very subtle ways. Sometimes these things can be hard to spot.
* People communicate in different ways such as facial expressions, moods and actions.
* You need to be alert and respond to changes in people’s behaviour, actions and moods.
* Get to know the people you support and how they communicate.
* Create opportunities for people to tell you if something’s wrong

Steve, Anna and Greta

In this scenario, we see: Steve and Anna are chatting excitedly about an upcoming trip to the football. Greta, another worker, arrives. Anna notices that Steve suddenly becomes much quieter with Greta around. She asks if he is OK, but Greta interrupts and makes a joke about Steve’s football team. Later, we see Anna talking to her supervisor Mandy. Anna asks Mandy if she has noticed anything strange between Steve and Greta.

Things to talk about

* What do you think is happening for Steve?
* How do people you support tell you if things are not OK? Do they always use words?
* Is Anna just jumping to conclusions about Greta? What else could be going on?
* How comfortable would you be speaking up to your manager like Anna did?
* What else can Anna and Mandy do to make sure Steve is OK?

Translating a gut feeling into action

* Sometimes we know something is wrong by the way it feels or looks.
* We call this feeling by many different names including intuition, sixth sense and gut feeling … however it can be hard to translate that feeling into something concrete.
* One example might be observing changes in a person’s behaviour, such as:
	+ Changes in mood, anxiety, nervousness, withdrawal – especially related to specific people
	+ Comments about specific individuals
	+ Sudden requests for changes to routines or not wanting to do regular things
	+ Cancellations and no-shows
	+ Increased aggression or self-injurious behaviour
	+ Unexplained injuries – bruises and cuts
	+ Changes in how a person uses or stops using or positions certain body parts
	+ Observations or concerns from parents, friends, carers, advocates, other service providers or health services
* You can also use the *Zero Tolerance Understanding Abuse Handbook* examples of Green (Good), Orange (Poor or Neglectful) and Red (Criminal or Abusive) practice. The examples cover all aspects of a person’s life and suggest some signs and signals that something is not right. Use them to help to speak about it with others **(**[PDF](https://www.nds.org.au/images/events/files/zt_worksheets.pdf) **|**[Word](http://www.nds.org.au/images/events/files/zt_worksheets_accessible.docx)**)**.

Staff behaviour ‘red flags’

The way that your colleagues and other staff act can also be clues to something else happening. This might include:

* + Staff secrecy, evasiveness, ‘heads down’
	+ Rumours, gossip or chatter
	+ Allusions, hints, euphemisms, veiled comments
	+ Concerning or inappropriate comments
	+ Casual sexism, racism or homophobia
	+ Over-the-top teasing, friendly insults or examples of controlling behaviour
	+ Blaming people - “She was being manipulative and trying to get her own way.”

Work together as a team to call out these behaviours and always report any concerns to your supervisor or manager.

# 2. Don’t be a Bystander

* A bystander is someone who sees or hears something wrong happening, but doesn’t do anything about it or get involved.
* There are lots of reasons why people don’t get involved in situations, including:
	+ being scared
	+ not knowing what to do
	+ hoping someone else will do something
	+ worrying about what will happen afterwards
* A Zero Tolerance approach needs people to act when something is wrong. As a disability worker, you have a responsibility to speak up when you see someone experiencing abuse, neglect or violence. This is not always easy, but it is important.

Just a bit of fun?

In this scenario, we see: Two support workers, Cindy and Paul, are supporting a group of people with disability in an outdoor café. They step away from the group to talk and start making jokes about Bradley, a young man in the group. Another support worker, Jasmine, arrives for her shift. She overhears Cindy and Paul talking and is shocked. When she questions them, they tell her it’s just a joke and the people in the group can’t understand what they’re saying anyway.

Things to talk about

* How do you think Bradley is feeling?
* Would you feel comfortable talking to Cindy and Paul? If not, why not?
* What are some of the things that might make it hard for Jasmine to speak up?
* What else could Jasmine do in this situation?
* How can Jasmine make sure Bradley is OK in this situation, now and in the future?
* How can organisations support people to speak up in these situations?
* Have you ever seen something and kept quiet. Why?

The Bystander Effect

The Bystander Effect describes a situation where people watch something bad happening but they don’t get involved. Research shows that where there are others present, people are less likely to speak up and take action. Different responses might include:[[1]](#footnote-1)

* Laughing along and encouraging perpetrators
* Sharing text messages, photos or videos of abuse by phone or social media
* Giving silent approval or encouragement
* Watching or knowing about abuse but not doing anything because you are too scared or do not know what to do
* Speaking up, showing support for victims
* Taking safe steps to stop abuse, challenge perpetrators and find help for victims

Remember: This is not limited to the actions in Empowerment Circle Red Zone. It includes actions in the Orange Zone as well.

Adapted from Australian Human Rights Commission: [link](https://www.humanrights.gov.au/what-you-can-do-stop-bullies-be-supportive-bystander-violence-harassment-and-bullying-fact-sheet)

Group Activity

Watch this film by Lieutenant General David Morrison about sexism in the Australian Army [[link](https://www.youtube.com/watch?v=QaqpoeVgr8U)]. What do you think David Morrison means by, “The standard you walk past is the standard you accept?” What does it mean for you as a disability worker?

Don’t be a bystander – take action

1. Notice
	* Be alert and aware of risks
	* Know what to look for – What are the signs and signals
2. See the Problem
	* Commit to stand up for what’s right
	* Have the courage and confidence to do something
3. Take Responsibility
	* Take a stand – Don’t wait for others to do something
	* You may need to be the first, you may be the only one
4. Know what to do
	* Learn how to support people who may need assistance
	* Be ready – just in case
5. Act
	* Act quickly and early, before the issue becomes bigger
	* What would you expect from others if it was you?
6. Advocate
	* Your support may be needed afterwards
	* Be ready to assist with any reports or investigations

# 3. Understanding Trauma

* People with disability may have experienced things in the past which have not been addressed or have had a long-term impact on them. This might include experiences of abuse, neglect or violence. Sometimes things that are happening right now can be made worse by things that happened in the past.
* It’s hard to know everything about a person’s past. They may choose not to share their experiences, or have no easy way of talking about traumatic events.
* Try not to make assumptions or leap to conclusions. Be ready to listen and to support people to get help.

‘Mel calls for Angela’

In this scenario, we see: Angela has been called to Mel’s house. Curtis, a male support worker, leaves when she arrives. Mel tells Angela she is upset because her provider sent a male worker to support her. Angela becomes frustrated and tells Mel she thought it was an emergency and that she is lucky to have support. Mel feels bad and apologises to Angela.

Things to talk about

* What did you observe in this scenario?
* Why might Mel be feeling distressed about the male support worker?
* How do you think Mel is feeling about Angela’s reaction?
* What do you think Mel needs from Angela in this situation?
* Think about people you work with and whether they may have experienced trauma. What do you have in place to support them?

Group discussion

* Does your organisation support people to choose the gender of their support worker?
* What happens if you can’t meet their request? How can you plan ahead?

Take 2 – What could have been done differently?

In the second scenario, Angela calmly listens to Mel. She explains that she asked not to have male support workers. Although Mel does not go into detail, she tells Angela that this is something that is important to her because of something that happened in the past. Angela offers to remind her organisation about this and is very clear that Mel has a right to choose her workers. Angela also offers to help Mel speak to some other services if she wants to. Mel says she’ll let her know if she does.

Compounding trauma - Group activity

Compounding trauma is where the response to an expression of trauma is linked to the initial trauma. Have a look at this example:

Karim has an intellectual disability. He uses a communication device and a wheelchair. He recently moved into a shared home from a larger shared accommodation setting. Karim is very sociable and does not like being alone. One of Karim’s new support workers, Callum, gets a phone call and leaves him alone in a room. After a while, Karim begins to worry, and then panics, using loud noises to get Callum’s attention. Not knowing what to do, Callum moves Karim to his bedroom and leaves him there on his own to calm down. Karim continues to panic and use loud noises. Later on, Callum tells his manager that he thinks Karim has ’challenging behaviours’.

* How do you think Karim felt in this situation?
* What would have prevented this situation happening for Karim?
* What can Callum and his manager do to ensure this never happens for Karim again?

Getting the right help

* Trauma-informed care is a complex and multi-faceted discipline that requires expertise. There are many services and organisations that are ready to help people who have experienced different types of trauma. This includes counselling services and Centres Against Sexual Assault (or [CASA](https://www.casa.org.au/about-us/what-are-the-victorian-casas/)).
* 1800 RESPECT is a national sexual assault and domestic and family violence service. They can provide confidential information, counselling and support. They have developed information about working with people with disability: [link](https://www.1800respect.org.au/inclusive-practice/supporting-people-with-disability/)
* The Victorian South East CASA has developed some Easy Read resources for people with intellectual disability and their supporters as part of the *Making Rights Reality* project. They cover a range of topics and can be downloaded here: [link](https://www.secasa.com.au/pages/making-rights-reality/)

**Remember!** Do not take action without talking to people about their options. You could make things worse, even if you have good intentions.

Other resources

* ‘Working with people experiencing the effects of trauma’ is a film developed by 1800 RESPECT ([link](https://www.youtube.com/watch?v=C6INGpSzLJU)). It will give you some more insights into trauma-informed care.
* The NSW Government and Berry Street have developed Taking Time: a Trauma Informed Framework for Supporting People with Intellectual Disability. It outlines six key elements for trauma informed care, including:
	+ Foundations values for trauma-informed practice
	+ Guiding principles to inform practice
	+ Knowledge and skills required
	+ Physical and social environments to promote safety
	+ Policies and Procedures for organisations
	+ Leadership and organisational culture
* Download a copy of *Taking Time* here: [link](https://www.adhc.nsw.gov.au/__data/assets/file/0004/340447/Taking_Time_Framework.pdf)

# 4. Responding to disclosures

* A disclosure is when a person tells someone else about something that has happened to them. This might be a first step in speaking up and taking action.
* As a support worker, you have an important and trusted role in people’s lives. It’s vital to understand and respect that trust and to always listen to people with disability.
* It may have taken the person a long time to speak up about their experiences. Some people never speak up about abuse.
* A person may tell you abuse that is happening now, happened recently, or happened in the past. These are all important.
* A disclosure is an act of trust. You may be the first person they have told. They may be telling you because they trust you and think that you can help.
* Responding appropriately to a disclosure is an essential step to supporting someone.

Anton speaks up

In this scenario, we see: Anton and his support worker Wally are taking a break. Wally sees Anton flinch as he helps him get up. In the car, Anton says he has something he wants to share. He shows Wally bruises on his arm and says that someone has hurt him. Wally is shocked and starts to ask Anton lots of questions about what happened. Anton becomes quiet again and looks away.

Things to talk about

* What did you observe in this scenario?
* Why do you think Anton spoke up to Wally?
* What do you think about Wally’s response to Anton’s disclosure?
* What would you do Wally’s situation?

‘Just enough’ information

* Victims of abuse disclose in different ways. This can depend on what they feel comfortable sharing, the nature of their relationship with you, what they can remember, their preferred communication style or language, and their understanding of their rights.
* When disclosing, people mightprovide information about:
	+ what abuse and/or neglect they are referring to
	+ where it took place
	+ when it happened and if they are still in danger
	+ who was involved
* This information should be reported in line with your organisation’s reporting policy as soon as possible. However, where a person does not immediately provide this level of detail, it is important to stop and think before you go any further.

Quote: When a client has provided information that gives you a general understanding of their allegation, DO NOT keep questioning them – You might affect an investigator’s interview. Taken from the NSW Ombudsman Initial and Early Response to Abuse or Neglect in Disability Services.

NSW Ombudsman Initial and Early Response to Abuse or Neglect in Disability Services guide

The NSW Ombudsman has developed best practice guidelines about responding to disclosures as part of their *Initial and Early Response to Abuse or Neglect in Disability Services* guide*.* These guidelines can be applied in any state or territory to help you and your organisation achieve the best outcomes for people with disability. They contain advice on responding to disclosure, including but not limited to:

* Use of open-ended questions (that can’t be answered with ‘yes’ or ‘no’). For example “Tell me more about that”; or “what happened next?”
* Do not use leading questions. For example don’t ask, “Was it Fred who did this to you?” but instead ask “Who did this to you?”
* Support people to use communication aids if needed.
* Do not ask people to repeat or go over what has been said.
* Do not make promises you can’t keep for example do not promise to keep secrets or not to tell anyone else
* Do not make an audio recording of your conversation
* Be clear on what will happen next for example who they can talk to
* Stay calm, and take your time
* Always remember to give people information about their choices and let them decide what they want to do next. Do not take over or exclude people from next steps.

Remember! A disclosure can be direct (such as “Mary did this to me”) or indirect (such as, “I don’t want to work with Mary any more” or “My friend does not like Mary”).

Take 2: What could have been done better?

Anton shows Wally bruises on his arm and says that someone has hurt him. Wally is shocked but reacts calmly. He asks Anton if he would like to talk some more in a quiet place. Anton says yes and Wally parks the car. Anton talks in his own time and Wally listens patiently. He tells Anton that he has done the right thing, and that it isn’t his fault. He also says they will need to let the manager know.

More things to talk about

* How was Wally’s response to Anton different?
* Anton says “I don’t like Vera” (another support worker). Why do you think he says this?
* How would you feel if a disclosure of abuse involved a friend or colleague?
* How would you respond if the disclosure involved your supervisor or a manager?
* Do you know what your responsibilities are in relation to reporting to the police?

Responding to disclosures – Practical checklist

|  |  |
| --- | --- |
| **Listen** | * Move to a suitable environment, free of distractions
* Be calm and patient — Allow the person to be heard
* Let the person use their own words — Avoid leading questions
* Avoid quizzing about specific details of the abuse
* Listen supportively
 |
| **Reassure** | * Reassure the person it is good they told you
* Address any immediate concerns about the person’s safety
* Be clear they are not at fault
 |
| **Respect**  | * Respect that they might only reveal some details
* Acknowledge the person’s bravery and strength
* Avoid making promises you can’t keep
* Explain that you will need to report their experience to someone else
 |

Adapted from AIFS: *Responding to children and young people’s disclosures of abuse:* [link](https://aifs.gov.au/cfca/sites/default/files/disclosure-infographic.pdf)

# 5. Safety first

* Emergency situations can be very intense. People can feel shocked, scared, anxious and confused. It can be difficult to think and to know what to do.
* In any situation, the most important factor is the safety of the people you support. This means attending to any immediate medical needs of anyone who is injured. You might need to call an ambulance, the police or fire brigade.
* Any risk of further harm also needs to be dealt with. Is there a risk that something else could happen? Has the person causing harm been separated from others? Are other people safe?

‘At the basketball court’

In this scenario, we see Roy and Aaron are playing basketball with friends. Support workers Joe and Todd are outside the court looking at their mobile phones. Joe and Todd look up suddenly after hearing a scuffle on court. Roy is injured and is bleeding from a cut on his head. Joe wants to call an ambulance but Todd tells him that they can handle it themselves.

Things to talk about

* Why do you think Todd doesn’t want to call an ambulance?
* How do you think Joe is feeling?
* What are the immediate priorities that Todd and Joe need to focus on?
* What other things need to be considered in this situation?

**Responding to incidents and ensuring safety**

Different states and territories have different rules about responding to critical incidents, including abuse and violence. You must read, understand and follow your organisation’s policy and practice guidelines about responding to serious incidents.

Good policy and procedures should include the following steps:

* Ensure the safety of the people you support, yourself and other staff - Make sure everyone in the situation is safe and supported.
* Protect the person from any further harm.
* Dial an ambulance if a person is injured. If in doubt, still call an ambulance.
* Contact the police if there is risk of more harm.
* Contact your supervisor or manager as soon as it is safe to do so.

**Group reflection**

* How can you manage the tension of two people having different opinions on managing an emergency situation?
* What can you do to be ready for these situations:
	+ as a worker
	+ as a team
	+ as an organisation

# Preserving Evidence

* Despite an increase in reporting of abuse and violence against people with disability, the number of successful prosecutions is still relatively small.
* Investigators and the police need as much evidence as possible to make sure that people who abuse other people or commit crimes are held accountable for their actions.
* It is important not to interfere with a crime scene in any way. Even well-meaning actions can destroy or compromise evidence and limit the chances of conviction.

Nina’s Story

In this scenario, we see: it is late at night and Nina has experienced an assault. Her bedroom is now a crime scene and there are signs of a struggle. The police have been called and she is waiting with her support worker Bonnie for them to arrive. Nina is clearly upset and Bonnie tries to comfort her. Bonnie starts to tidy up the room as they wait.

Things to talk about

* What did you observe in this scenario?
* How do you think Nina is feeling? Would you know how to support her?
* How is Bonnie feeling? Why do you think she tidies up things in the room?
* How might Bonnie’s actions impact on the police investigation?
* What is the best thing for Bonnie to do in this situation?

What is evidence?

* Evidence is anything that supports an investigation to understand what has happened:
	+ Statements from victims, witnesses and defendants
	+ Medical / forensic evidence from:
	+ Examination of a victim or offender following an alleged offence
	+ Samples/swabs taken from a crime scene and victim’s clothing or bedding
	+ Medication which has been used or not used
	+ Records of the crime scene, including any objects that might have been disturbed
	+ Documents including emails, rosters, progress notes, communication books and reviews
* It is not your job to decide what evidence is important. It is your job to make sure that any evidence is protected and kept safe.

Protecting evidence: What you need to know

* Try not to disturb any evidence that may be needed in an investigation.
* Protect the scene – Do not clean up or allow anyone to enter until police arrive.
* Report as quickly as possible so people can recall events without outside influence.
* Evidence may be lost if people bathe, shower or wipe themselves clean soon after the assault. Try to delay this until police arrive or the person has seen a sexual assault service.
* Encourage the person not to change their clothing unless they have to for their wellbeing. If possible, keep clothing as evidence after any assault. Do not wash bed linen.
* Take time to explain to the person why the above is important, if needed.
* Make sure relevant documents (electronic and hard copy) are kept securely and cannot be changed or deleted.

Examples adapted from NSW Ombudsman Initial and Early Response to Abuse or Neglect in Disability Services, p19 and NDS Zero Tolerance: Conducting Investigations: A guide for Victorian disability service providers.

Part 2: In the second scenario, we see support worker Kartika ask Nina and Bonnie to move to another room. Nina asks if she can have a shower. Kartika explains that she should wait until after the police have been and that she may also need to see a doctor. A police officer visits the house to talk with Nina and Kartika. She gives Nina her card so she can contact her if she needs to ask any questions.

Supporting people in their interactions with the police

* This scenario shows how staff can support people in interactions with the police: e.g.,
	+ Supporting the person to understand the process and what will happen next.
	+ Providing information to police about how the person communicates including communication aids, interpreters and any other supports they might need.
* The NSW Ombudsman has developed best practice advice about what police need from you to do their job. This includes:
* Reporting any alleged or suspected crime as soon as possible.
* Being clear about the crime or suspected crime you are reporting
* Providing basic information about who was on duty at specific times and what else happened during the shift before police start their investigation.
* Informing the police that the victim has a disability/disabilities and any communication support needs that should be considered.
* Doing everything possible to help the person to tell their story their way and make their wishes known to police.
* Assisting police to identify any other evidence that might help, such as witnesses, and physical and electronic evidence.
* If the person has to go to a police station to be interviewed, ensure they understand and agree to go. If the person has a guardian, they should be involved in this decision.
* The person’s family and/or other supporters should be involved as soon as possible if the person gives consent (or isn’t able to give informed consent).
* See NSW Ombudsman *Initial and Early Response to Abuse or Neglect in Disability Services* sections 11 and 12 for more detailed advice ([link](https://www.ombo.nsw.gov.au/__data/assets/pdf_file/0007/39490/Resource-guide-for-disability-services-Initial-and-early-response-to-abuse-or-neglect-in-disability-services.pdf)).

**Making Rights Reality:** *Making Rights Reality* is a program by the Victorian South Eastern Centre Against Sexual Assault (SECASA) that gives extra help to adults who have been sexually assaulted and who have intellectual disability, acquired brain injury, or use aids to communicate. It includes a series of easy read resources about sexual assault and family violence, including information about counselling, medical examinations, and appearing in court. For more information, click [here](https://www.secasa.com.au/pages/working-with-intellectual-disability-clients/)

# The critical role of managers and supervisors

* Sometimes people report abuse but nothing happens. In some cases, this is because managers and supervisors do not act or follow up on information.
* Supervisors play a critical role in setting expectations so people know they can speak up and that something will happen if they do.
* A Zero Tolerance approach needs commitment from *everybody* in the organisation. People with disability, families and support workers need to know that everyone – from volunteers to the board of management – are committed to the human rights and safety of people being supported.

‘Billie speaks up’: in this scenario, we see support worker Billie notices that all is not well with Jocelyn. She talks about Jocelyn’s support with her team leader Joy. Joy is dismissive of Billie’s concerns and suggests that it is unreasonable to expect the team to follow support plans all the time. Joy tells Billie that as long as everything is written in the book, it’s fine. Billie decides to follow up with the Marchetta, the manager. Marchetta says she doesn’t have time to look into everything and can only go by what’s written in the book.

Things to talk about

* How did Billie know that all was not OK for Jocelyn?
* How do you think Billie felt speaking up for Jocelyn about Joy? How would you feel?
* Would you be comfortable reporting your supervisor to your manager, like Billie did? Why/why not?
* What do you think about Marchetta’s response to Billie?
* What would you expect your manager to do in this situation?

**Setting an example**

Supervisors and team leaders play a critical role in ensuring high-quality, safe services for people with disability. This includes preventing and responding to abuse and neglect.

**Supervisors can act as positive role models** **by**:

* reinforcing the importance of listening to people with disability
* demonstrating good practice in their actions and approaches
* setting positive expectations about culture and staff behaviour and reinforcing as required
* ensuring staff are trained in organisational values and the rights of people with disability
* training staff to understand safeguarding-related policies and procedures
* responding to requests promptly and respectfully and delivering tangible outcomes to people, families and workers
* encouraging and celebrating good practice by workers

**Supervisors must recognise and challenge poor practice,** and:

* be skilled in identifying signals of unacceptable practice and behaviour
* have confidence to address unacceptable behaviour
* encourage and support staff to reflect on and improve their practice
* monitor incidents and note any trends in the staff involved
* create formal and informal opportunities for people with disability and staff to speak up, provide feedback, share concerns or make complaints
* ensure people with disability and staff know and understand complaints procedures.

**Preventing and responding to abuse requires a whole of organisation commitment. Organisations should ensure that supervisors:**

* have the skills and time to do their jobs properly and balance workload demands
* understand organisational values, expectations, policy and practice
* have regular contact with people with disability and staff they support
* know what is actually happening on the ground for people accessing services
* have time to mentor and provide ongoing support.

Take 2: In the second scenario we see: Marchetta thanks Billie for bringing Jocelyn’s support to her attention. She expresses concerns about Joy’s response. She outlines a number of steps she will take to look into what’s happened and to ensure this doesn’t happen again.

Question: Is there anything else you think Marchetta should do to follow up?

* See also NDS Zero Tolerance Practice Advice: Supervision and Safety: [link](https://www.nds.org.au/images/resources/resource-files/ZT_Practice_Advice_2_-_Supervision_and_Safety.pdf)

# Be ready to listen when people speak up

**Remember!** People with a disability do not always speak up about abuse and neglect. This might be because they:

* Worry about getting into trouble or have their service taken away
* Worry about or have already experienced not being believed
* Don’t want to get other people into trouble
* Don’t know their rights or what abuse is
* Don’t know who to speak to or how to speak up

As a support worker, you should always be **ready to listen**.

* Actively seek feedback from people you support
* Get to know people as individuals
* Know and use their preferred communication
* Create formal and informal opportunities for people to speak up including different spaces and places
* Remind people that it’s OK to complain – and show people how to make a complaint
* Listen to other people in the person’s life
* Document any changes (and raise them)

Follow up on conversations later. Some people need more time.

# Further information, resources and support

|  |  |
| --- | --- |
| Jurisdiction | Supporting materials |
| ACT | * ACT Human Rights Commission: [link](http://hrc.act.gov.au/disability/information-disabilty-service-providers/complaints-process-providers/)
 |
| Northern Territory | * NT Government Quality and Safeguarding Framework: [link](http://digitallibrary.health.nt.gov.au/prodjspui/bitstream/10137/1155/4/NT%20Quality%20and%20Safeguarding%20Framework.pdf)
 |
| NSW | * NSW Ombudsman Initial and early response to abuse or neglect in disability services: [link](https://www.ombo.nsw.gov.au/news-and-publications/publications/guidelines/disability-reportable-incidents/initial-and-early-response-to-abuse-or-neglect-of-disability-services)
* ADHC Abuse and Neglect Policy: [link](https://www.adhc.nsw.gov.au/__data/assets/file/0006/372165/Abuse-and-Neglect-Policy.pdf)
 |
| Queensland | * Department of Communities, Disability Services and Seniors - Responding to Abuse, Neglect and Exploitation: [link](https://www.communities.qld.gov.au/disability/support-services/service-providers/preventing-responding-abuse-neglect-exploitation/responding-abuse-neglect-exploitation)
 |
| South Australia | * DCSI Safeguarding People with Disability Management of Care Concerns Policy: [link](http://www.dcsi.sa.gov.au/__data/assets/pdf_file/0011/13412/safeguarding-people-with-disability-management-of-care-concerns-policy.pdf)
 |
| Tasmania | * DHHS Preventing and Responding to Abuse in Services: [link](http://www.dhhs.tas.gov.au/disability/publications/policies%2C_procedures_and_guidelines/preventing_and_responding_to_abuse_in_services_procedure)
 |
| Victoria | * DHHS Responding to allegations of abuse involving people with disabilities guidelines: [link](https://providers.dhhs.vic.gov.au/responding-allegations-abuse-involving-people-disabilities)
* OPA Interagency Guideline for Addressing Violence, Neglect and Abuse: [link](http://www.publicadvocate.vic.gov.au/our-services/publications-forms/5-interagency-guideline-for-addressing-violence-neglect-and-abuse-iguana?path=)
* DHHS Client Incident Management System: [link](https://providers.dhhs.vic.gov.au/cims)
 |
| Western Australia | * DSC ‘What do I do if I am concerned about the wellbeing or safety of a person with disability?’ factsheet: [link](http://www.disability.wa.gov.au/Global/Publications/For%20disability%20service%20providers/Quality/Factsheet_What_do_I_do_if_I_am_concerned_about.pdf)
 |
| National | * NDIS Quality and Safeguarding Framework: [link](https://www.dss.gov.au/disability-and-carers/programs-services/for-people-with-disability/ndis-quality-and-safeguarding-framework)
* National Disability Abuse and Neglect Hotline: [link](https://www.jobaccess.gov.au/complaints)
 |

# Cast and Crew

**Presenters:** Samson Hailu and Sarah Hirst, Project ABLE

**Talking Heads**

* Janene Cootes, Intellectual Disability Rights Service
* Leigh Creighton, Disability Advocate, Community Disability Alliance Hunter
* Amelia Gillies, Sunnyfield Disability Services
* Anthony Holton, Director, Disability Reportable Incidents Division, NSW Ombudsman
* Tania Lewis, Disability Advocate, Community Disability Alliance Hunter
* Eban Pollard, NSW Council for Intellectual Disability (CID)
* Christine Regan, Rights Project for People with Disability, NSW Ombudsman
* Aaron Williams, ConnectAbility Australia
* Natalie Ransom, ConnectAbility Australia

**Actors**

Rob Mockler

Zindzi Okenyo

Cassandra Linehan

Susan Ling Young

Roddy Salinas

Mitch Garling

Jude Bowler

Cheryn Frost

Stacey Copas

Kellie Jones

Mark Inwood

James Penny

Warwick Allsopp

Chris Bunton

Tom Hancock

Nicholas Gell

Craig Meneaud

Georgia Cranko

Brianna Harris

Nicole Yardley

Suzanne Dunne

Jordana Goodman

Anna Martin

Shellee King

Margaret Liddy

Kerrie-Anne Bezzina

Emma Plant

Larry B

Zoe Peroulis

Michael Maggioros

Rohan Fullwood

Adelaide Johnson

**Production Crew**

Emily Dash

Scarlet McGlynn

Matt Cartwright

Leigh Bramall

Martin Demian

Jerold Chan

Nicola Freedman

Zhi Xian Li

Peta Khan

Liz Collier

James Bannister

1. [↑](#footnote-ref-1)