

Updated response by the State of NSW to issues arising in certain case studies

Royal Commission into Institutional Responses to Child Sexual Abuse

1. By a letter dated 3 February 2017 from the Solicitor Assisting the Royal Commission, the Royal Commission has requested the State of NSW to provide an update to the information provided in the State's response of 16 November 2016 concerning issues arising in case studies involving the State of NSW. Two of the case studies addressed in the State's response were Case Study 27 and Case Study 19.
2. The present document is intended to update the Royal Commission on steps taken since 16 November 2016 in relation to issues arising in Case Study 27 ('Healthcare providers and regulators') and Case Study 19 ('Bethcar Children's Home').

Case Study 27 - Healthcare providers and regulators

Communication to medical practitioners about legislative amendments

3. As noted at [12]-[18] of the State's Response of 16 November 2016, legislative amendments were made on 6 May 2016 to allow a broader range of health professionals to participate in the scheme for the exchange of information under Chapter 16A of the *Children and Young Persons (Care and Protection) Act 1998*.
4. The NSW Ministry of Health (**the Ministry**) developed a communication strategy for the public and private health sectors regarding the legislative amendments. The NSW Health website now contains updated information for health professionals regarding information exchange and the role of the Health Child Wellbeing Unit. Communication with the public and private sectors regarding the legislative amendments is ongoing.
5. The Ministry is liaising with the Royal Australian College of General Practitioners (RACGP) regarding the development and provision of targeted training (principally by online seminars) to their members regarding information exchange under Chapter 16A and the availability of support and advice through the NSW Health Child Wellbeing Unit.

Development of new Standards and Guidelines for NSW Health Sexual Assault Services

6. As noted at [19]-[25] of the State's response of 16 November 2016, the Ministry is developing new Standards and Guidelines for NSW Health Sexual Assault Services.
7. Stakeholder consultation on the draft Standards and Guidelines is complete and feedback has been incorporated into the draft policy. The Ministry of Health is currently reviewing a number of related draft policies to ensure consistency. Following this process, the new Standards and Guidelines for NSW Health Sexual Assault Services will be released. The new Standards and Guidelines will proceed for final sector consultation in April 2017 and for release in mid-2017.
8. An overarching policy addressing the role of health workers in responding to children, young people and adults disclosing violence abuse and neglect is being developed and is to be released in late 2017 (to incorporate the Standards and Guidelines). This forms part of NSW Health's commitment to respond to adult survivors of child sexual assault. In addition, the mandatory online training on child protection is being redeveloped by the Ministry; the Education Centre Against Violence (**ECAV**) and the Health Education and Training Institute (HETI). It is intended that the mandatory online training will include a component specifically addressed to disclosures by male adult survivors of child sexual assault. The new mandatory online training will be ready for release October 2017.

Review of Child Wellbeing and Child Protection Policies and Procedures for NSW Health' (PD2013_007)

9. Further to [26] of the State's response of 16 November 2016, the review of *Child Wellbeing and Child Protection: Policies and Procedures for NSW Health (PD2013_007)* is ongoing. Time critical policy amendments, including:
 - a. legislative amendments to Chapter 16A,
 - b. changes to the Child Protection Helpline number, and
 - c. inclusion of further practice guidance in Chapters 7 and 10,are anticipated to be issued via an Information Bulletin by end of March 2017.
10. The broader review will be finalised once the implications of the whole of Government review of the child protection and Out of Home Care system in NSW are

known. The timeframe for that work, which is expected to include a redesign of the intake, assessment and referral system for child protection, is determined by the Department of Family and Community Services.

Targeted Training for doctors

11. As noted at [27] to [31] of the State's response of 16 November 2016, the Ministry has been conducting a review of mandatory child protection training in NSW Health. In this regard, a range of tasks are progressing including:

- Redevelopment of HETI online child protection mandatory training (for completion by October 2017).
 - The HETI online child protection mandatory training module is being redeveloped, with stronger messaging about the role of health workers in supporting vulnerable children and families.
 - The new online module will consist of three parts: part one is a short emotive film; part two is generic child protection content; part three is case streaming for particular workplace settings. The new online module will include information about responding to disclosures from adult survivors of child abuse.
 - A working group consisting of HETI, ECAV, Ministry of Health representatives and a clinical subject matter expert group have been established to guide development of the new online module.
 - Production of the module commenced in January 2017. HETI has appointed an instructional designer who is working closely with an independent film-maker engaged by the Ministry on this project.
 - The new online module is due for completion by October 2017. It will be mandatory for the whole of the NSW Health workforce.
- Review of one day face to face child protection training (to commence in first half of 2017)
 - The one day face-to-face child protection training that is mandatory for specific (targeted) health workforces is also being updated to ensure consistent messaging with the new HETI online child protection mandatory training.

12. In addition, the following work has also commenced:

- The Royal Australian College of Physicians (RACP) has developed an innovative postgraduate training module for trainee paediatricians called ‘The Vulnerable Child’. The Ministry of Health is exploring options to formally collaborate with the RACP to promote and extend this module to other clinical workforces; and
- The Ministry of Health is working closely with the Emergency Care Institute (ECI) and NSW Health doctors to develop a targeted child protection training package that can be tailored to Emergency Departments around NSW. This will include a series of short 2-5 minute videos demonstrating best practice Health responses to complex child protection cases based on reviews of child deaths. These products are expected to be available on the ECI website from mid to late 2017.

Strengthening the Joint Investigation Response Teams (paragraphs 32-34)

13. Paragraph 32-34 of the State’s response of 16 November 2016 notes that the JIRT program is undergoing a comprehensive interagency review under the oversight of the NSW Deputy Ombudsman.
14. The NSW Deputy Ombudsman’s Report on the Interagency Review of JIRT is due to be released at the end of March 2017. Issues raised by the Deputy Ombudsman’s report will be incorporated in the policy ‘NSW Health JIRT Policies and Procedures’, which is currently being developed by the Ministry of Health.

Case Study 19 – Bethcar Children’s Home

15. This update concerns the Crown Solicitor’s Office.
16. The Crown Solicitor’s Office continues to manage child sexual abuse matters. Currently these matters are overseen by Senior Executive Band 1 and Band 2 solicitors who are highly experienced in dealing with claims for damages arising out of trauma.
17. The number of claims has increased since the Royal Commission, such that a team of staff have day to day carriage of the matters. Currently, all staff with day to day carriage of the matters are required to read and acknowledge the recommendations of Case Study No 19 and the Guiding Principles. Staff are also mentored and

assisted by Grade V and Grade VI lawyers through daily discussion, with all advices and recommendations authorised by the Senior Executive solicitors. Staff are monitored for their personal wellbeing and adherence to the Guiding Principles and to ensure maintenance of high standards in terms of management of matters.

18. Mediations are attended by Senior Solicitors who are highly experienced in these particular matters and compassionate.
19. Staff with carriage of these claims have been required to attend training conducted by iCare (or, for those unable to attend, repeated internally by the Director of Torts (Services)) in relation to the Guiding Principles. This training also included training on cultural awareness (indigenous persons), redress and minimising trauma to victims.
20. Senior staff attend meetings with relevant agencies in relation to management of the claims and then disseminate information through scheduled team meetings.
21. Due to the increase in claims, meetings to discuss child sexual abuse claims will now be held outside of team meetings on a monthly basis, with a standard agenda item of Model Litigant Policy/Guiding Principles.

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