



Response to

**Royal Commission into Institutional Responses to Child Sexual Abuse
Issues Paper 1 – Working with Children Check**

Submission of

Association of Nursing Recruitment Agencies (ANRA)

Association of Medical Recruiters Australia & New Zealand (AMRANZ)

Member Group of

The Recruitment and Consulting Services Association (RCSA)

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Introduction to Association of Nursing Recruitment Agencies (ANRA)

The Association of Nursing Recruitment Agencies (ANRA) is the representative body for nursing and healthcare recruitment agencies in Australia. ANRA is a Special member Group of the Recruitment and Consulting Services Association (RCSA), the leading industry body for talent management and workforce solutions in Australia and New Zealand.

Our Membership comprises nursing and healthcare recruitment agencies that work with public and private healthcare facilities and the Aged Care and Community Care sectors to manage their workforce requirements. All members of ANRA abide by the [RCSA Code for Professional Conduct](#) and [Disciplinary and Dispute Resolution Procedures](#) (DDRP).

Introduction to Association of Medical Recruiters of Australia and New Zealand (AMRANZ)

The Association of Medical Recruiters of Australia and New Zealand (AMRANZ) was established in 2005, as a Special Interest Group, under the auspices of the Recruitment and Consulting Services Association (RCSA).

AMRANZ provides a focal point for recruitment consultancies whose business is the recruitment of medical practitioners into and within Australia and New Zealand.

All AMRANZ Members abide by the [RCSA Code for Professional Conduct](#) and [Disciplinary and Dispute Resolution Procedures](#) (DDRP). AMRANZ has an elected Council whose role it is to represent the views of Members and to develop training and information to assist with their business growth and provision of excellent service.

Introduction to RCSA

The Recruitment and Consulting Services Association Australia & New Zealand (RCSA) is the leading industry and professional body for the recruitment and the human resources services sector in Australia and New Zealand. It represents over 4,400 Corporate and Individual members. RCSA members provide permanent full time, permanent part time, casual and on-hire workers to a range of businesses across almost all industries throughout Australia and New Zealand. On-hire workers are often referred to as 'labour hire workers', 'agency workers', 'temporary employees' and a range of other titles. The term on-hire has been incorporated into Modern Awards and will be used for the purpose of clarity.

Members of RCSA provide advice, information, support and guidance in relation to recruitment and employment matters to employers and workers from small and medium sized businesses to multinationals.

The RCSA membership is focused on ensuring the most positive outcomes for business, workers and workplace relations across Australia. The RCSA sets the benchmark for industry standards through representation, education, research and business advisory support so Members may concentrate on their core business. All RCSA Member organisations and Accredited Professionals agree to abide by the ACCC authorised RCSA Code for Professional Conduct.

RCSA members work first hand with the Fair Work Act and Modern Awards on a day to day basis. Their knowledge, understanding, interpretation and support of the aims of the Act are evident in dealings that they have with their clients and employees on a day to day basis.

RCSA Code for Professional Conduct

The RCSA has a [Code for Professional Conduct](#) which is authorised by the ACCC. In conjunction with the [RCSA Constitution](#) and [By Laws](#), the Code sets the standards for relationships between Members, best practice with clients and candidates, and general good order with respect to business management, including compliance. Acceptance of, and adherence to, the Code is a pre-requisite of Membership.

The Code is supported by a comprehensive resource and education program and the process is overseen by the Professional Practice Council, appointed by the RCSA Board. The Ethics Registrar manages the complaint process and procedures with the support of a volunteer Ethics panel mentored by RCSA's Professional Practice barrister.

RCSA's objective is to promote the utilisation of the Code to achieve self-regulation of the on-hire worker services sector, wherever possible and effective, rather than see the introduction of additional legislative regulation.

Introduction

The Association of Nursing Recruitment Agencies (ANRA) and the Association of Medical Recruiters of Australia and New Zealand (AMRANZ) have for several years been calling on the Government and regulators to put in place a national Working With Children Check (WWCC) and Police Check in-line with the existing national registration framework for doctors, nurses and healthcare workers.

ANRA and AMRANZ are pleased to provide this submission and whole-heartedly support the recommendation for a national WWCC. ANRA and AMRANZ would also recommend the framework and capability created to facilitate a national WWCC is extended to include a National Federal Police Check.

Members of ANRA are collectively among the largest employer of healthcare workers in Australia, employing over 275,000 nurses and healthcare workers. An important characteristic of the modern healthcare workforce is mobility and the strong desire of nurses and healthcare workers for flexible work arrangements that meet professional and personal outcomes.

Members of AMRANZ work closely with Health Services and providers of health services around Australia to identify and recruit the most appropriate medical personnel and skills.

Effective workforce planning for the healthcare sector inherently embraces mobility and flexibility which requires a national approach to the certification, accreditation and registration of healthcare workers as these workers are engaged frequently across jurisdictions.

In 2010 the Australian Health Practitioners Registration Board (AHPRA) was established as a national registration body for health and allied health workers. The result is national registration and accreditation to practise for doctors, nurses and allied health workers. AHPRA advises that over 90% of annual re-registration by nurses is completed on-line.

AHPRA registration is now a national registration applied across all jurisdictions in Australia.

1. Should there be a national WWCC?

ANRA and AMRANZ fully support the proposal for a national and consistent approach to the WWCC. A national framework for WWCC, and similar verification such as Police Checks, will greatly enhance the ability of healthcare workers to work across different states and territories.

Example: In some states of Australia, a nurse or healthcare worker may commence work once they receive a receipt of payment for a WWCC, while their WWCC may take a further one to three months to be completed.

Or, in other states the employer signs a declaration without the need for a completed WWCC prior to the person commencing work in a healthcare environment.

2. What features should be included in any national scheme?

ANRA and AMRANZ believe the following should be considered in the design of a national WWCC:

- Duration of national WWCC: ANRA and AMRANZ believe a WWCC could be conducted three yearly. In the event a discloseable event appears on an applicant's record, advice is flagged and posted on the system much as existing updates are posted to a nurses registration in the event of a discloseable event.

As a rule recruitment agencies will verify the registration and profile of a candidate at the time of placing them into an assignment or role. As such, if a candidate has something that goes on their record, then it will appear during those pre-employment or pre-assignment checks.

- The cost for obtaining a WWCC should not be prohibitive. We suggest \$100 for a three-year national WWCC, as in many cases the doctor, nurse or healthcare worker pays for their own WWCC.
- The WWCC remains the property of the individual doctor, nurse or healthcare worker, and not of the employer undertaking the check.
- Expanded scope of a national WWCC to include checks conducted both for WWCC and the existing Federal Police Check: spent crime, past criminal history including both child related and other criminal history.
- Prompt processing of WWCC applications, or on-line lodgement. In the event lodgement is required in-person, a broader network of lodgement locations beyond Capital Cities is required ie: Post Office or Police Stations as is the case for Passport applications through the Post Office or postal centres across Australia.
- Easily recognised and tamper proof card with embedded photograph and fraud-proof technologies. This may incur a greater cost at the outset, however will provide long-term benefits.

3. If there is national scheme, should there be minimum requirements for each state and territory scheme?

ANRA and AMRANZ whole-heartedly support the recommendation for a national WWCC. The associations would also recommend the framework and capability created to facilitate a national WWCC is extended to include the existing Federal Police Check.

4. How long should any clearance be granted for?

ANRA and AMRANZ believes a National WWCC could be conducted three yearly. In the event a discloseable event appears on an applicant's or WWCC holders record, advice is flagged and posted on the registration system much as existing updates are posted to a nurses registration in the event of a discloseable event or pending action.

As a rule recruitment agencies will verify the registration and profile of a candidate at the time of placing them into an assignment or role. As such, if a candidate has something that goes on their record, then it will appear during those pre-employment or pre-assignment checks.

5. Should a person be able to commence work before a check is completed?

ANRA and AMRANZ recommends not. Prompt processing of WWCC applications, or on-line lodgement will greatly reduce the bottlenecks and time for processing currently experienced.

In the event a discloseable event appears as a result of a check during the processing of an application, lodgement may be required in-person, through a broader network of lodgement locations beyond Capital Cities; ie Post Office or Police Stations as is the case for Passport applications through the Post Office or postal centres across Australia.

Following approval of a WWCC application, in the event a discloseable event appears on an applicant's or WWCC holder's record, advice is flagged and posted on the registration system much as existing updates are posted to a nurses registration in the event of a discloseable event or pending action.

6. How should child-related work be defined?

ANRA and AMRANZ believe child-related work should be defined as anyone who comes into contact with children in an unsupervised capacity, even for short periods of time.

Example: In Queensland a nurse working in a Paediatrics ward is not currently required to have a WWCC, unless they are a school nurse or youth worker.

7. How should child-related work be defined?

ANRA and AMRANZ submit the definition of child-related work should extend to any healthcare worker who comes into contact with children.

Example: It is not useful for healthcare personnel to be required to undertake a WWCC, if unsupervised ward assistants responsible for transporting children around a hospital to procedures do not require a WWCC.

While the inclusion of all healthcare staff who have contact with Children does expand the size of a national scheme, we believe the broader scope is highly recommended.

8. Are current exemptions for a WWCC adequate or appropriate – in particular should a WWCC apply to those:

- a. Living in the homes of children in out-of-home care?**
- b. Parent volunteers?**

ANRA and AMRANZ recommends a WWCC apply in both circumstances. More specifically, we recommend in the case of persons responsible for out-of-home care monitor the environment and ensure that all regular and systematic visitors to the home hold a current WWCC.

Example: An agency places a carer in the home of a parent with a disability. The parent is often home alone with children and supervises the children, whilst the carer is present and hence the carer is in contact and exposed to the children. Is it the Agency's obligation to undertake a WWCC from a risk management perspective? Where does the funding body stand with this?

ANRA and AMRANZ believe the WWCC of the person responsible for the out-of-home care environment should be suspended in the event a regular visitor to the out-of-home care environment does not hold a current WWCC.

9. What records should be included in the check? For example, should the check include juvenile records?

ANRA and AMRANZ recommend all records should be included within a WWCC check, including juvenile records in the event these charges are of a sexual nature or charges related to violent acts. Other juvenile offences related to property or person could be expunged.

12. The adequacy of the risk assessment process.

ANRA and AMRANZ members will generally not place a healthcare worker into any work environment unless they are fully cleared within the WWCC process.

In the event a record appears during a WWCC check of an applicant the agency is notified and the candidate requested to contact WWCC to discuss their record. The agency is then notified whether the person is a low, medium or high risk. However as indicated, ANRA and AMRANZ members will not place a worker until a full clearance has been received.

13. To what degree should the WWCC minimise the need for institutions to establish clear processes for responding to inappropriate behaviour of staff in child-related positions?

ANRA and AMRANZ regard the WWCC as separate to the obligations of an institution to have in place sufficient and systematic processes to deal with inappropriate behaviours of staff toward any person in any situation, including children and young people.

Members of both associations believe an institutional response should include a documented framework and process for managing the reporting of inappropriate actions which is specifically designed to deal with these sensitive situations so as not to disenfranchise or discourage a participant.

Members of ANRA and AMRANZ are generally required by Health Services and healthcare facilities to have in place fully documented complaints, issues and dispute resolution process to deal with a variety of matters.

More importantly, a process needs to be in place to deal sensitively with complaints and reports related to inappropriate behaviours within the workplace, which in the case of medical, Home and Community as well as Acute and Aged Care environments includes contact with children and young people.

14. How should the effectiveness of any existing or proposed WWCC be evaluated and/or monitored?

A nationally consistent WWCC will greatly improve the efficiency with which checks are processed and greatly improve the consistency of a WWCC. At present, applications for a WWCC may take anywhere from one week to three months.

Anecdotally our members are told the time allocated for processing a WWCC depends on the number of applications and the urgency and volume of other tasks administrators have at any given time.

Example: In one state of Australia, administrators have contacted agency staff to advise they will only process WWCC applications if the nurse or healthcare worker is currently working in that state – if not, the application is set aside until such time as the nurse or healthcare worker recommences work in that state. Meaning a worker may move into and out of that state without a WWCC ever being completed.