

Missionary Oblates of Mary Immaculate





Audit Report

February 2021

Australian Catholic Safeguarding 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.

Australian Catholic Safeguarding Ltd is committed to fostering a culture of safety and care for children, and adults at risk.

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

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1. Executive Summary

1.1 Context

Australian Catholic Safeguarding Ltd (ACSL) was established in December 2020 and is a company limited by guarantee, owned by the Australian Catholic Bishops Conference, Catholic Religious Australia and the Association of Ministerial Public Juridic Persons. ACSL has safeguarding responsibilities at a national level and brings together the work of two previous entities, Catholic Professional Standards Ltd (CPSL) and the Australian Catholic Centre for Professional Standards (ACCPS).

ACSL works with the Catholic Church in Australia to support the maintenance of a Safe Church for all and is committed to fostering a nationally consistent culture of safety and care throughout the Church. ACSL provides a range of services to the Church to support the implementation of the National Catholic Safeguarding Standards (NCSS), a framework for the protection and care of adults at risk and children.

ACSL's core organisational values are courage, compassion and honesty. These values guide the way we manage our organisation and inform cultural change within the Catholic Church and the wider community. ACSL takes its duty to care for and protect all children and adults at risk seriously, and has zero tolerance for abuse of any kind.

ACSL continues the mandate of CPSL in the maintenance of the NCSS and the publication of reports which demonstrate a Church entity's adherence to the NCSS. This audit report includes the results of the NCSS compliance assessment for the Missionary Oblates of Mary Immaculate (OMI).

1.2 Background

The Oblates of Mary Immaculate is a religious congregation of priests and brothers engaged in missionary work of the Catholic Church under the patronage of Our Lady, Mary Immaculate and founded by St Eugene de Mazenod in France, 1816.

The congregation's mission in Australia began in 1894 and is characterised by daring, passion, community and service, with particular emphasis on service to the poor. Currently there are 38 Oblates in the Australian Unit, working in a variety of ministries, including administration of nine parishes across six dioceses, directing three boys' colleges, providing chaplaincy to hospitals, youth ministries, homeless ministries, as well as a variety of other services.

OMI has governance of two Catholic secondary schools in Australia – Iona College in Queensland and Mazenod College in Western Australia. Declarations of Assurance were provided and reviewed during the audit for both of these colleges as part of the ACSL audit framework (see further commentary on "Audit Approach in Section 1.3). OMI also operates the Mazenod College in Victoria, however this arrangement is by contract and under the governance of the Archdiocese of Melbourne, and as such the activities of this college were out of scope for the ACSL audit.

OMI operates three volunteer ministries focused on youth outreach work: Oblate Youth Australia (OYA), Rosies Oblate Youth Mission Victoria and Rosies Queensland. Rosies Queensland is an associated corporation, managed by an independent board and is not under the sole governance of the Oblates Provincial. As such, the activities of Rosie Queensland were out of scope for the ACSL audit.

The OMI Province of Australia also includes a Delegation of China and Hong Kong, where an additional 19 Oblates serve in parishes, schools and chaplaincies, providing services to youth, the homeless, universities, hospitals and migrant workers across Hong Kong and mainland China. The governance of the Delegation is entrusted to a Delegation Superior (based in Hong Kong) with the same authority as a Provincial Superior (except in relation to a limited number of matters which are specifically reserved to the Provincial Superior or Superior General).



The Provincial of the Australian Province supports the Delegation in its missionary focus and assists with the management of human and financial resources where required, however the Delegation is essentially autonomous in its work to fulfill its missionary goals. As such, the implementation of the NCSS does not extend to the Delegation, and its activities were out of scope for the ACSL audit.

OMI has been assessed as a "Category One" Church entity for application of the NCSS (Working with Children).

There are 10 NCSS Standards, 49 NCSS Criteria and 111 NCSS Indicators that apply to Category One 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 ACSL website.

Our assessment of OMI's compliance with the Category One Indicators is detailed in Section 2 of this report. Our recommendations for improvement, including OMI'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 ACSL 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.

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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 OMI and the extent of its compliance with the requirements of the NCSS.

Our testing procedures included the following:

- interviews, observations and enquiry with the OMI Leadership Team, Safeguarding Coordinator, individual OMI members and relevant personnel;
- review of key safeguarding documents, policies and procedures; and
- assessment of the design, and testing of the operation of safeguarding controls implemented by OMI.

This included a review of safeguarding practices implemented by OYA and Rosies Victoria, as well as interviews with eight (25%) OMI members in active ministry across Australia, in relation to how safeguarding activities are applied in their daily work. Safeguarding requirements were also reviewed for OMI candidates in formation.

As part of this audit, we also met with key personnel from Iona College Queensland and Mazenod College Western Australia. The activities of these entities, including their child safety practices, are subject to existing regulatory requirements and external accreditations – under the ACSL audit framework, these entities are not re-audited by ACSL, although both entities were required to provide declarations to ACSL regarding the extent of regulation and audit processes that are in place.

As such, it should be noted that the findings, recommendations and management actions in this report pertain only to safeguarding practices and activities related to OMI as a religious institute and do not apply in any way to the activities of Iona College Queensland or Mazenod College Western Australia.



1.4 Overall Audit Findings

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

Our assessment indicates that OMI has fully implemented or has substantially progressed in the implementation of 105 (98%) of the 107^2 of the Indicators which are relevant to their operations. A further two Indicators (2%) are in the initial stages of implementation.

The key findings from the audit are summarised below.

NCSS Standard 1 – Committed leadership, governance and culture

OMI has a dedicated Safeguarding Co-ordinator and Safeguarding Committee which is responsible for overseeing the implementation and monitoring of the NCSS.

OMI is intrinsically linked with the colleges which it operates and as such, has a comprehensive suite of safeguarding policies which operate in conjunction with, and in support of, the college safeguarding policies. These policies have been disseminated to all personnel and ministries, along with associated training, resources and support materials.

OMI is substantially progressed in the development of a formal risk management framework, with risk assessments having been completed for the Oblate members' key activities, Oblate premises, as well as the youth ministries - OYA and Rosies Oblate Youth Mission Victoria. OMI is now collating this information into a congregational risk register which will be utilised by the safeguarding committee to monitor key safeguarding risks across the entity. Whilst Rosies Queensland was out of scope for this audit (refer comments in Section 1.2 of this report), OMI will be using the learnings and results of this audit to provide information and feedback to Rosies Queensland, to assist then with the implementation of the NCSS.

Whilst the NCSS do not apply to the Delegation of China and Hong Kong and the Delegation's activities were out of scope for this audit (refer comments in Section 1.2 of this report), our discussions with the Delegation Superior indicate that the Delegation is strongly aware of safeguarding requirements and has specific policies in place regarding investigating and managing alleged misconduct, including child abuse. We recommend that the Delegation be requested to provide an annual attestation to the Australian Oblate leadership team to confirm that they have the appropriate safeguarding practices in place, and to provide additional assurance to the leadership team regarding their management of key safeguarding risks.

NCSS Standard 2 – Children are safe, informed and participate

NCSS Standard 3 – Partnering with families, carers and communities

The majority of Oblate members conduct their activities and ministries under the governance of other Church entities, e.g., Dioceses, and as such the majority of their engagement with children, families and the community would be undertaken under the governance of these entities.

However, OMI does engage directly with children and families through its youth ministry work. OMI conducts feedback surveys with children, families and staff after its youth camps and other activities, and these surveys have been recently updated to include specific safeguarding questions.

Feedback is reviewed by OMI leadership and the Safeguarding Co-Ordinator, with a view to continuous improvement of OMI's safeguarding policies and practices.

Child-friendly complaints materials, as well as information for children on safe and respectful peer relationships, including through social media, have also been developed.

NCSS Standard 4 – Equity is promoted and diversity is respected

OMI has a strong focus on equity and diversity and is in the process of incorporating the topic of cultural safety into its general safeguarding training.



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

 $^{^{2}}$ Of the 111 NCSS Indicators applicable to Category One, 4 of these are not relevant to OMI's operations.

This is specifically relevant for the youth ministries, as these personnel would come into contact with diverse groups of people through their social outreach work in the community.

NCSS Standard 5 - Robust human resource management

OMI has comprehensive recruitment policies and procedures that outline safeguarding requirements in all aspects of its advertising, vetting and screening of personnel.

A process to annually assess employees' compliance with safeguarding policies has recently been developed, as well as a specific review template to assess volunteers' compliance with safeguarding policies.

OMI has a comprehensive safeguarding induction for candidates in formation and is in the process of developing specific curriculum around safeguarding, for inclusion in future formation programs.

The requirement for professional/pastoral supervision is included in the Safeguarding Policy and is also encouraged by the leadership team. However, processes for monitoring and support related to professional/pastoral supervision are still being formally developed.

NCSS Standard 6 - Effective complaints management

The ACSL 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.

OMI has comprehensive complaints handling procedures in its Safeguarding Policy as well as in the Safeguarding Policy Support Document, which provides greater detail on handling and managing complaints.

Audit procedures indicate that OMI's complaints handling procedures are operating effectively.

NCSS Standard 7 - Ongoing education and training

Interviews with OMI members indicate a strong understanding of the requirements for child safeguarding, including knowledge of the appropriate response should a concern be raised.

OMI has provided various safeguarding training sessions to the Oblate members and child facing employees. OMI is in the process of rolling out general safeguarding training to non-child facing employees.

The youth ministries run comprehensive training sessions, which include relevant elements of safeguarding, which all volunteers must undertake before participating in these ministries.

NCSS Standard 8 – Safe physical and online environments

OMI has a draft Social Networking and Online Policy which details its expectations regarding use of technology, including acceptable online conduct and access to external websites. This policy is currently being finalised to ensure appropriate guidance is provided for the various categories of personnel (i.e. Oblate members, employees and volunteers).

Contractor management procedures are in place, with all visitors and contractors signing in/out of Oblate premises and internet monitoring is in place for networked devices.

NCSS Standard 9 - Continuous improvement

OMI will be developing a formal Safeguarding Implementation Plan, which will be updated to include the actions arising from the ACSL audit.

NCSS Standard 10 – Policies and procedures support child safety

Key policies and procedures relating to safeguarding requirements are in place and operating effectively.



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

| | | | Asse | ssment o | f Complia | ince |
|---|---|---|-------------------------|------------------------|---------------------|------------------|
| National Catholic Safeguarding Standard | # NCSS Indicators (Category Two) Not Relevant to DS | | Managed & measurable | Defined & developed | Initial / Ad hoc | Not addressed |
| 1: Committed leadership, governance & culture | 16 | - | 14 | 2 | - | - |
| 2: Children are safe, informed and participate | 5 | - | 5 | - | - | - |
| 3: Partnering with families, carers and communities | 6 | - | 6 | | - | - |
| 4: Equity is promoted and diversity is respected | 4 | - | 4 | - | - | - |
| 5: Robust human resource management | 23 | - | 19 | 4 | - | - |
| 6: Effective complaints management | 24 | - | 24 | - | - | - |
| 7: Ongoing training & education | 9 | - | 5 | 4 | - | - |
| 8: Safe physical and online environments | 10 | 2 | 8 | - | - | - |
| 9: Continuous improvement | 8 | 2 | 4 | - | 2 | - |
| 10: Policies and procedures support child safety | 6 | - | 6 | - | - | - |
| TOTAL | 111 | 4 | 95 | 10 | 2 | - |
| | | | 105 (| 98%) | 2 (2 | 2%) |

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

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

There are three 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 OMI's response to the audit finding, including management actions.

We would like to thank the OMI leadership team and all personnel who were involved in the audit for their cooperation and assistance.



 $^{^{\}rm 3}$ Refer Appendix B for definitions of the Priority ratings used for audit recommendations.

2. Assessment of Compliance with NCSS Indicators

| | | * | | | | | | | |
|---------|--|---|-------------------------|------------------------|--------------------|------------------|--|--|--|
| Stand | Standard 1 Committed leadership, governance and culture | | | | | | | | |
| Child . | Child safeguarding is embedded in the entity's leadership, governance and culture | | | | | | | | |
| | | entity publicly commits to child safeguarding lerance approach to child abuse. | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed | | | |
| 1.1.1 | endorsed by t | a Child Safeguarding Policy that is approved and he Church Authority and/or relevant leadership ublicly available. | ✓ | | | | | | |
| 1.1.2 | | olishes a Child Safeguarding Commitment ich is openly displayed and publicly available. | ✓ | | | | | | |
| Obser | vations: | | | | | | | | |
| Requir | rements of the | Indicators are in place. No recommendations for in | nprovement r | noted. | | | | | |
| | | | | | | | | | |
| | lled at all leve | lld safeguarding culture is championed and els of the entity from the top down and | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed | | | |
| 1.2.1 | maintain an of promoting emphasis responsible actively remanagen | | √ | | | | | | |
| 1.2.2 | level of leade implementat | points a Safeguarding Committee at the highest ership to oversee the effective ongoing ion of child safeguarding practices, including the arding Policy and related procedures and | √ | | | | | | |
| 1.2.3 | ordinator(s), | points and promotes the role of Safeguarding Cowith clearly defined responsibilities for children at diocesan, religious institute or IP level. | √ | | | | | | |
| 1.2.4 | | derstand that child safeguarding is everyone's and are empowered to provide input on child practices. | √ | | | | | | |
| Obser | vations: | | | | | | | | |
| Requir | rements of the | Indicators are in place. No recommendations for in | nprovement r | noted. | | | | | |
| | | | | | | | | | |
| imple | | ernance arrangements facilitate a Child Safeguarding Policy across the | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed | | | |
| 1.3.1 | | rrangements are transparent and include roles and responsibilities to ensure accountability ng is clear. | √ | | | | | | |
| 1.3.2 | other than Au | urch Authority's governance includes countries stralia, the entity must apply these Standards count relevant international declarations and local | | ✓ | | | | | |



1.3.2 Whilst the NCSSS do not apply to the Delegation of China and Hong Kong, the OMI leadership team should obtain attestations from the Delegation Superior that child safeguarding risks are being identified and appropriately managed. Refer <u>recommendation #1</u>.

| I nersonnel on expected behavioural 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:

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

| tociising on preventing identitying 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. | √ | | | |
| 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 assessment of the activities of the Oblate members has been performed in addition to a risk assessment for the Oblates' premises. This now needs to be translated into an overall risk register at the congregational level. Refer recommendation #1.

| | Criterion 1.6 - Personnel understand their obligations on information sharing and record keeping. | | 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 Indicators are in place. No recommendations for improvement noted.



| Stand | Standard 2 Children are safe, informed and participate | | | | | | | | |
|--------|--|--|----------------------|------------------------|--------------------|------------------|--|--|--|
| Childi | Children are informed about their rights, participate in decisions affecting them and are taken seriously | | | | | | | | |
| | Criterion 2.1 - Children are informed about their rights, including Safety, information and participation. Managed & Defined & Initial/ Not Measurable Developed Ad-Hoc Addres | | | | | | | | |
| 2.1.1 | children; seek ch affect them; and | ge-appropriate strategies to proactively engage with ildren's views; consult children about decisions that consult children about what makes them feel safe be recognised and implemented by the entity. | √ | | | | | | |
| 2.1.2 | their right to be | es children are made aware of their rights, including safe from abuse, and are informed whom to contact if rns about their safety or the safety of their peers. | √ | | | | | | |
| | vations: rements of the Inc | licator are in place. | | | | | | | |
| | ort from peers is | portance of friendships is recognised and encouraged, helping children feel safe and less | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed | | | |
| 2.2.1 | | des children with age-appropriate information about ful peer relationships, including through social media. | √ | | | | | | |
| | vations: rements of the Inc | licator are in place. | | | | | | | |
| famili | es may be offere | relevant to the setting and context, children and ed access to abuse prevention programs and nat is age-appropriate. | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed | | | |
| 2.3.1 | Where relevant, information, acc | the entity provides children and families with ess and/or referral to abuse prevention programs, ne child's age, development, ability and level of | √ | | | | | | |
| | vations: rements of the Inc | licator are in place. No recommendations for improve | ment noted. | | | | | | |
| - 1 | inspection of the manager are in place. He recommendations for improvement noted. | | | | | | | | |
| child- | Criterion 2.4 - Personnel are attuned to signs of harm and facilitate child-friendly ways for children to express their views, participate in decision-making and raise their concerns. Managed & Measurable Defined & Developed Ad-Hoc Addressed | | | | | | | | |
| 2.4.1 | | he knowledge, skills and awareness to identify f harm and actively support children to raise any | √ | | | | | | |
| | vations: rements of the Inc | licator are in place. No recommendations for improve | ment noted. | | | | | | |



| Standard 3 | Partnering with families, carers and communities | es | | | |
|---|--|-------------------------|------------------------|--------------------|------------------|
| Families, carers ar | nd communities are informed and involved in promo | oting child s | afeguardin | g | |
| Criterion 3.1 - Fam their child. | ilies and carers participate in decisions affecting | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed |
| | pports and encourages families/carers to take an active oring children's safety when participating in activities. | √ | | | |
| Observations: Requirements of the | Indicator are in place. No recommendations for improve | ment noted. | | | |
| families, carers an | e entity engages and openly communicates with d communities about its child safeguarding evant information is accessible. | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed |
| 3.2.1 families, care | omotes open dialogue and provides a range of ways for ers and communities to contribute to discussions about guarding approach. | √ | | | |
| 3.2.2 safeguarding | ovides families, carers and communities with relevant information including contact details of the Safeguarding nd/or Safeguarding Co-ordinator(s). | √ | | | |
| Observations: Requirements of the | Indicator are in place. No recommendations for improve | ment noted. | | | |
| Criterion 3.3 - Fam entity's policies an | illies, carers and communities have a say in the d practices. | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed |
| | e in place to engage families, carers and communities iews on policies and practices for keeping children safe. | ✓ | | | |
| Observations: Requirements of the | Indicator are in place. No recommendations for improve | ment noted. | | | |
| | ilies, carers and communities are informed about ions and governance. | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed |
| 3.4.1 roles and res | isures families, carers and communities are aware of the ponsibilities of personnel providing ministries or ectly to their children. | √ | | | |
| Observations: Requirements of the | Indicator are in place. No recommendations for improve | ment noted. | | | |
| | e entity takes a leadership role in raising community dignity and rights of all children. | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed |
| 3.5.1 and/or partic | to the context or setting, the entity actively promotes cipates in civic engagement activities/campaigns which ole of community awareness of children's rights and child attion. | √ | | | |
| Observations: Requirements of the | Indicator are in place. No recommendations for improve | ment noted. | | | |



| Stand | lard 4 | Equity is promoted and diversity is respected | | | | | | |
|--------------------------|--|---|-------------------------|------------------------|--------------------|------------------|--|--|
| Equity | Equity is upheld and diverse needs respected in policy and practice | | | | | | | |
| circur | nstances and ba | tity actively anticipates children's diverse ockgrounds, and provides support and responds who are vulnerable. | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed | | |
| 4.1.1 | understanding, | d Safeguarding Policy and practices reflect an and identification, of diverse circumstances and tincrease a child's vulnerability to abuse. | √ | | | | | |
| 4.1.2 | understanding of and barriers for | nplaints Handling Policy and practices demonstrate an if barriers that prevent children from disclosing abuse adults recognising and/or responding to disclosures, processes that reduce barriers to disclosure. | √ | | | | | |
| | vations: rements of the Inc | dicator are in place. No recommendations for improve | ment noted. | | | | | |
| comp | | dren have access to information, support and in ways that are culturally safe, accessible and | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed | | |
| 4.2.1 | formats that pro | uces child-friendly material in accessible language and omotes inclusion and informs all children of the applaints processes available to them. | √ | | | | | |
| | vations: rements of the Inc | dicator are in place. No recommendations for improve | ment noted. | | | | | |
| Abori disabi backg | Criterion 4.3 - The entity pays particular attention to the needs of Aboriginal and Torres Strait Islander children, children with a disability, and children from culturally and linguistically diverse backgrounds, those who are unable to live at home, and children of diverse sexuality. Defined & Developed Ad-Hoc Addressed | | | | | | | |
| 4.3.1 | and behaviours | d Safeguarding Policy and practices reflect attitudes that respect the human rights of all children and are sponsive to diverse needs. | √ | | | | | |
| | vations: rements of the Inc | dicator are in place. No recommendations for improve | ment noted. | | | | | |

| Stand | Standard 5 Robust human resource management | | | | | | | |
|--|--|--|-------------------------|------------------------|--------------------|------------------|--|--|
| People | People working with children are suitable and supported to reflect child safeguarding values in practice | | | | | | | |
| Criterion 5.1 - Recruitment, including advertising, interview questions, referee checks and personnel pre-employment screening, emphasises child safeguarding. | | | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed | | |
| 5.1.1 | ' ' | nmmitment to child safeguarding and zero- abuse in all aspects of its advertising, or personnel. | √ | | | | | |
| 5.1.2 | The entity documents its sa screening procedures and p | feguarding approach in recruitment and rocesses. | ✓ | | | | | |
| 5.1.3 | | ne expected level of contact with children uarding recruitment procedures are | √ | | | | | |



| | Position descriptions, selection criteria, referee checks and interview questions articulate: | | | |
|-------|--|---|--|--|
| 5.1.4 | 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. | ✓ | | |

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

| clergy | ion 5.2 - Relevant personnel (including all seminarians, and religious) have current working with children checks or alent 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:

5.2.2 Some Oblates' working with children checks have been obtained through other organisations and need to be linked to the congregation. Refer recommendation #2.

| Criterion 5.3 - Personnel receive an appropriate induction and are aware of child safeguarding responsibilities, including reporting obligations. | | 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:

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

| | ion 5.4 - Ongoing supervision and people management is ed on child safeguarding. | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed |
|-------|--|-------------------------|------------------------|--------------------|------------------|
| 5.4.1 | Support, mentoring, oversight and professional supervision processes for personnel include child safeguarding. | √ | | | |
| 5.4.2 | Annual performance reviews for personnel include child safeguarding responsibilities relevant to their role. | | ✓ | | |

Observations:

5.4.2 Formal performance reviews are not conducted for personnel, however a process has been developed to assess ongoing compliance with safeguarding policies. A performance review template has also been developed for volunteers which will formally assess their compliance with safeguarding policies. Refer recommendation #3.



| before | ion 5.5 - Robust processes exist for screening candidates and during seminary and religious formation, as well as for ng formation, support and supervision of clergy and ous. | 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. | ✓ | | | |
| 5.5.2 | Seminary and initial formation programs have robust screening processes for candidates for religious ministry, including external psychological and psychosexual assessments. | < | | | |
| 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. | √ | | | |

5.5.3 Supervision is encouraged, however a record of which Oblate members are undertaking Supervision is not maintained. Refer <u>recommendation #4</u>.

| religio | ion 5.6 - Seminary and formation programs for clergy and us have appropriate curriculum to build the knowledge and of candidates to understand and lead child safeguarding ves. | 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. | √ | | | |
| 5.6.2 | Seminary and initial formation programs ensure promotion of pastoral responses to victims/survivors of sexual abuse. | √ | | | |
| 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. | √ | | | |

Observations:

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

| | 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:

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



| for we | ion 5.8 - Entities which receive overseas clergy and religious ork in ministry have targeted programs for the screening, tion, professional supervision and development of these duals. | 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. | √ | | | |
| 5.8.2 | All overseas clergy and religious participate in a Safeguarding Induction program, documented by the entity, before work with children begins. | √ | | | |
| 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. | ✓ | | | |
| 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. | | √ | | |

5.8.4 Supervision is encouraged, however a record of which Oblate members are undertaking Supervision is not maintained. Refer <u>recommendation #4</u>.

| Stan | tandard 6 Effective complaints management | | | | | |
|--|---|---|-------------|------------------------|--------------------|------------------|
| | Processes for raising concerns and complaints are responsive, understood, accessible and used by children, amilies, carers, communities and personnel | | | | | |
| Criterion 6.1 - The entity has an effective Complaints Handling Policy and procedures which clearly outline the roles and responsibilities, approaches to dealing with different types of complaints, reporting obligations and record keeping requirements. | | | | Defined & Developed | Initial/ Ad-Hoc | Not Addressed |
| 6.1. 1 | | cies, procedures and practices ensure that all rting obligations are met. | √ | | | |
| 6.1. | guidance on wha | nented procedures that provide step-by-step at action to take for different types of complaints, es of Codes of Conduct, disclosures, allegations or se of a child, be they historic or current. | > | | | |
| 6.1. 3 | | procedures for identifying and mitigating actual and cts of interest in complaint management. | < | | | |
| 6.1. 4 | | in cooperation with relevant organisations and seeks from statutory child protection services when | ✓ | | | |
| 6.1. 5 | | sponsibilities in relation to handling complaints are n the Complaint Handling Policy and procedures. | √ | | | |
| 6.1. 6 | appropriate, bet | landling Policy and procedures differentiate, where ween a child victim and an adult bringing forward a use suffered as a child. | √ | | | |
| 6.1. 7 | allegations, discl | lace to record all child abuse complaints, incidents, osures, concerns and referrals. The system must be onfidential information is stored, protected and years. | √ | | | |

Observations:



| | 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 |
|-------|--|-------------------------|------------------------|--------------------|------------------|
| 6.2.1 | The complaints handling system prioritises the safety and well-being of children. | √ | | | |
| | 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. | | | | |

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

| | ion 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.



| (riter | ion 6.4 - The entity has policies and procedures in place that | | | | |
|----------------------------|--|-------------------------|------------------------|--------------------|------------------|
| addre whetl | ess 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. | | | | |
| | vations: rements of the Indicator are in place. No recommendations for improve | 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 | rement noted | l. | | |
| | ion 6.6 - The Church Authority ensures mechanisms are in place te for adult complainants. | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed |
| to car | e for addit complaniants. | IVICUSUIUSIC | • | | |
| to car 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. | √ √ | · | | |
| | The entity offers appropriate pastoral care to adult complainants, which recognises their unique needs. This should include an offer | | | | |
| 6.6.1 6.6.2 | 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. 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 | √ √ | | | |
| 6.6.1 6.6.2 Obser Requii | 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. 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. | √ √ | Defined & Developed | Initial/ Ad-Hoc | Not Addressed |
| 6.6.1 6.6.2 Obser Requii | 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. 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 improvious 6.7 - The Church Authority ensures mechanisms are in place | vement noted | Defined & | Initial/ | Not Addressed |



Standard 7 Ongoing education and training

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

| | Criterion 7.1 - Personnel are trained and supported to effectively implement the entity's child safeguarding policies and procedures. | | 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:

- 7.1.1 Not all Oblate members and employees have undertaken safeguarding training. Refer recommendation #5.
- 7.1.3 Records of attendance at training are kept however there are no formal follow-up procedures for those who don't attend training. Refer <u>recommendation #5</u>.

| i | ndica | on 7.2 - Personnel receive training to recognise the nature and tors of child abuse, including harmful behaviours by a child ds another child. | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed |
|---|-------|---|-------------------------|------------------------|--------------------|------------------|
| 7 | 7.2.1 | The entity provides regular training to relevant personnel which equips them with the knowledge to: understand the nature and impact of child abuse; understand the nature, factors and impact of institutional abuse; identify risk factors, such as grooming behaviours; and understand, identify and respond to abusive behaviours | √ | | | |

Observations:

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

| effect | ion 7.3 - Personnel receive training to enable them to respond cively to child safeguarding risks, concerns, disclosures and ations of child abuse. | Managed & Measurable | 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. | | √ | | |



| | rep | entity provides training to ensure personnel are aware of their orting obligations under state/territory legislative requirements uding: | | | |
|-------|-----|--|----------|--|--|
| 7.3.3 | • | reporting criminal behaviour to police; | √ | | |
| | • | mandatory reporting to child protection authorities; | | | |
| | • | Reportable Conduct Scheme; and | | | |
| | • | reporting to regulatory authorities/government departments. | | | |

7.3.2 Safeguarding training has recently been updated to include information sharing and record keeping requirements. Refer recommendation #5.

| | ion 7.4 - Personnel receive training and information on how to culturally safe environments for children. | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed |
|-------|---|-------------------------|------------------------|--------------------|------------------|
| 7.4.1 | The entity provides cultural safety training to equip relevant personnel to create culturally safe environments for Aboriginal and Torres Strait Islander children and children from culturally and linguistically diverse backgrounds. | | ✓ | | |

Observations:

Safeguarding training has recently been updated to include the topic of cultural safety. Refer <u>recommendation #5</u>.

| Stand | ard 8 | Safe physical and online environments | | | | |
|------------------|---|---|-------------------------|------------------------|--------------------|------------------|
| | cal and online en ildren to be har | nvironments promote safety and contain appropri med | ate safegua | rds to minir | nise the op | portunity |
| physic privac | cal environment | nel identify and mitigate risks in online and see without compromising a child's right to prmation, social connections and learning | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed |
| 8.1.1 | and online risks | eguarding risk management plan addresses physical including risks arising from child to child and adult to is, and the nature of physical spaces. | √ | | | |
| 8.1.2 | | cies require the use of safe online applications for n, communicate and seek help. | √ | | | |
| 8.2.1 | | s and use online environments in line with the entity's and relevant communication protocols. | √ | | | |
| 8.1.3 | Personnel are proposed online risks to cl | roactive in identifying and mitigating physical and nildren. | √ | | | |
| 8.1.4 | one interactions conducted in an of another adult counselling, one | mented and implemented that ensures where one-to- between an adult and child take place, they are open or visible space, or within the clear line of sight This includes ministries/services such as e-to-one tuition, the sacrament of reconciliation, hal direction and mentoring. | √ | | | |
| | vations: | diantara ana in alama. Na ananana andatia a fara'ara a a | | | | 1 |
| Kequir | ements of the inc | dicators are in place. No recommendations for improve | ement notea. | | | |

| | ion 8.2 - The online environment is used in accordance with the 's Code of Conduct, safeguarding policies and procedures. | Managed & Measurable | 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. | √ | | | |
|--------|--|-------------------------|------------------------|--------------------|------------------|
| Observ | vations: | | | | |
| Requir | ements of the Indicators are in place. No recommendations for improve | ement noted. | • | | |
| | | | | | |
| | 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 c | urrent opera | tions |
| Observ | vations: | | | | |
| Requir | ements of the Indicators are in place. No recommendations for improve | ement 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 c | urrent opera | tions |
| Observ | vations: | | | | |
| Requir | ements of the Indicators are in place. No recommendations for improve | ement noted. | | | |

| Stand | ard 9 | Continuous improvement | | | | |
|---------|--------------------------------------|---|-------------------------|------------------------|--------------------|------------------|
| Entitie | es regularly revi | ew and improve implementation of their systems | for keeping | children saj | îe | |
| | ion 9.1 - The en uarding practice | tity regularly reviews and improves child ss. | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed |
| 9.1.1 | , | clearly documented Safeguarding Implementation nes the monitoring and continual improvement of practices. | | | √ | |
| | | larding Implementation Plan is regularly reviewed, ed and actions/strategies updated. | | | | |
| 9.1.2 | | nority monitors compliance with the National Catholic andards during systematic visits to parishes, ministries ational works. | √ | | | |



| 9.1.3 | The Safeguarding Committee co-ordinates annual self-audits at a local level (parishes, ministries and/or congregational works). | | ✓ | |
|-------|---|---|---|--|
| 9.1.4 | The entity's Child Safeguarding Policy is subject to regular review – at least every three years. | ✓ | | |

- 9.1.1 A Safeguarding Implementation Plan is being developed and will be populated by the results of the audit. Refer recommendation #6.
- 9.1.3 Self-audit processes are in the process of being developed, as part of the Safeguarding Implementation Plan. Refer recommendation #6.

| | ion 9.2 - The entity analyses concerns and complaints to identify s and systemic failures to inform continuous improvement. | Managed & Measurable | 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.

| releva | ion 9.3 - The Church Authority reports on the findings of ant reviews to personnel, children, families, carers and aunity. | Managed & Measurable | 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 applic | cable – this is | the first aud | lit by ACSL |
| 9.3.2 | The Church Authority reports on findings of relevant reviews of safeguarding policies, procedures and practices to its stakeholders. | Not appli | | uch reviews hed to date | ave been |

Observations:

N/A

| Standa | rd 10 | Policies and procedures support child safety | | | | |
|---------------------------|-------------------------------------|--|-------------------------|------------------------|--------------------|------------------|
| Policies | s and procedur | es document how the entity is safe for children | | | | |
| | on 10.1 - Policie arding Standar | es and procedures address National Catholic ds. | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed |
| 10.1.1 | | icies and procedures reference appropriate oproaches, requirements and responsibilities. | √ | | | |
| Observa Require | | licator are in place. No recommendations for improve | ment noted. | | | |
| Criterio | | es and procedures are accessible and easy to | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed |
| 10.2.1 | , · · | licies and procedures relevant to safeguarding are e and accessible to all personnel. | √ | | | |
| Observa Require | | licator are in place. No recommendations for improvei | ment noted. | | | |



| | on 10.3 - Best practice policy models and stakeholder tation inform the development and review of policies and lures. | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed |
|--------------------------|---|------------------------------------|------------------------|--------------------|------------------|
| 10.3.1 | The entity has processes in place to monitor adherence to policies and procedures relevant to safeguarding. | √ | | | |
| 10.3.2 | The entity has processes in place to develop and review its policies and procedures relevant to safeguarding. These processes include consulting with and incorporating advice from experts, children, families, carers and communities. | ✓ | | | |
| Observ Require | ations: ements of the Indicators are in place. No recommendations for improve | ement noted. | | | |
| | on 10.4 - The Church Authority and leaders model compliance olicies and procedures. | Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed |
| 10.4.1 | The Church Authority and leaders promote and enact all policies and procedures relevant to safeguarding. | √ | | | |
| | | | | | |
| Observ Require | ations: ements of the Indicators are in place. No recommendations for improve | ement noted. | | | |
| Require | ements of the Indicators are in place. No recommendations for improve on 10.5 - Personnel understand and implement the policies and | ement noted. Managed & Measurable | Defined & Developed | Initial/ Ad-Hoc | Not Addressed |



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

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 1.3 - Govern | Priority 2 | |
| Details of finding | The following points were noted: OMI has completed risk assessments for its various ministries, including a risk assessment for the community houses and premises. A risk register at the congregational level now needs to be developed and a process established to review the congregational register on a regular basis (at least every six months). The risk register should ultimately encompass all OMI ministries and activities, including any specific high risk activities that individual OMI members may be engaged in (e.g. involvement with overnight school camps etc.). Whilst the Minutes of the China Delegation Council meetings are sent to the Australian Provincial for reference, there is no specific safeguarding reporting in place. | |
| Recommendation | Whilst the Minutes of the China Delegation Council meetings are sent to the Australian Provincial for reference, there is no specific safeguarding reporting in place. We recommend the following: OMI develops a risk register at the congregational level to give visibility over those activities or ministries which have a higher safeguarding risk and which may require increased monitoring, training or support. The risk register should include an assessment of the safeguarding risk (e.g. high, medium or low) as well as the mitigating controls in place and could be organised into the following categories: | |
| Agreed Action | A congregational risk register will be developed as per the recommendation. We will work with the Delegation Superior to ensure that an appropriate safeguarding attestation/report is provided to the Australian leadership team on an annual basis | |
| Responsibility | Safeguarding Co-Ordinator Australian Provincial | |
| Due date | 1. 30 June 2021 2. 31 December 2021 | |



Standard 5: Robust human resource management

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

| Recommendation #2 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 | Some Oblate members have working with children checks which have been another organisation or diocese. | n obtained through |
| Details of finding | These need to be linked to the congregation, to ensure there is notification to the Oblate leadership team if the card is subsequently withdrawn/suspended. | |
| Recommendation | A process be implemented to ensure that all working with children checks for Oblate members are linked to the congregation. | |
| Agreed Action A process will be implemented to ensure that all working with children checks are linked to the congregation. | | |
| Responsibility | onsibility Safeguarding Co-Ordinator | |
| Due date | ue date 30 June 2021 | |

| Recommendation #3 | Priority 2 | | |
|-------------------------------------|---|-------------|--|
| Criterion 5.4 – Ongoi safeguarding. | Criterion 5.4 – Ongoing supervision and people management is focused on child safeguarding. | | |
| Details of finding | Formal performance reviews are not conducted for employees, however recently been developed to annually assess their compliance with safe. | • | |
| Details of Illianing | A performance review template has been developed for the volunteer ministries which will formally assess volunteers' compliance with safeguarding policies. | | |
| | We recommend that the process to annually assess compliance with s policies be rolled out for all personnel. | afeguarding | |
| Recommendation | In relation to volunteers, formal performance reviews should be conducted for all key volunteers and ministry leaders, with these individuals then allocated the responsibility of monitoring the performance of other support volunteers within their area/pool of ministry. | | |
| | | | |
| Agreed Action | The process to annually assess compliance with safeguarding policies with annual training program, which includes signing the Code of Conduction | - | |
| Agreeu Action | The use of the volunteer performance review form will be implemented for key volunteers from 2021. | | |
| Responsibility | Safeguarding Co-Ordinator | | |
| Due date | 31 May 2021 | | |



| Recommendation #4 | | | |
|---|--|------------|--|
| Criterion 5.5 – Robust processes exist for screening candidates before and during seminary and religious formation, as well as for ongoing formation, support and supervision of clergy and religious | | Priority 3 | |
| | Criterion 5.8 – Entities which receive overseas clergy and religious for work in ministry have targeted programs for the screening, induction, professional supervision and development of these individuals | | |
| Details of finding | The requirement for professional supervision is included in the Safeguarding Policy and is also encouraged by the leadership team. However, processes for monitoring and support related to professional/pastoral supervision have not been formally developed and there is no log/register of which members are attending/undertaking supervision. | | |
| Recommendation | We encourage OMI to continue to emphasise the importance of professional/pastoral supervision. This should include maintaining a record of which Oblate members are undertaking pastoral/professional supervision and providing support and assistance to members who are having difficulty in finding suitable Supervisors. | | |
| Agreed Action | We will assess the take-up of professional/pastoral supervision amongst our members and provide support to those who are having difficulty in finding a suitable supervisor. | | |
| Responsibility | Provincial | | |
| Due date | 31 October 2021 | | |



Standard 7: Ongoing education and training

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

| Recommendation #5 | | | |
|--------------------|--|----------------------|--|
| | Criterion 5.3 – Personnel receive an appropriate induction and are aware of child safeguarding responsibilities, including reporting obligations | | |
| | The following points were noted: | | |
| | Safeguarding training has not yet been provided to general employee facing). | s (non-child | |
| Details of finding | Safeguarding training has recently been updated to include the topics information sharing and record keeping, and cultural safety and will be Oblate members in 2021. | | |
| | A program for ongoing refresher training has recently been developed out in 2021. | d and will be rolled | |
| Recommendation | We recommend the following: | | |
| | Safeguarding training be provided to all general employees. | | |
| | 2. The updated safeguarding training including the topics of e-safety, information sharing and record keeping, and cultural safety be provided to Oblate members in the next safeguarding training session. | | |
| | 3. The refresher training should be tailored for 1) Oblate members: 2) go and 3) volunteers working in the Oblate youth ministries. This should to formally follow-up individuals who don't attend training. | | |



| | There are very few general employees - safeguarding training will be provided to them using the elements of the recently developed safeguarding induction process. | | | |
|----------------|--|--|--|--|
| Agreed Action | The updated safeguarding training will be rolled out at the next Oblate annual retreat day in 2021. | | | |
| Agreed Action | 3. The recently developed training program caters for tailored refresher training for 1) Oblate members: 2) general employees and 3) volunteers working in the Oblate youth ministries. This will include a process to formally follow-up individuals who don't attend training. | | | |
| Responsibility | Safeguarding working Co-Ordinator | | | |
| | 1. 30 June 2021 | | | |
| Due date | 2. 31 December 2021 | | | |
| | 3. 31 December 2021 | | | |



Standard 9: Continuous Improvement

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

| Recommendation #6 | | | |
|------------------------|---|-----------------|--|
| Criterion 9.1 - The en | Criterion 9.1 - The entity regularly reviews and improves child safeguarding practices | | |
| Details of finding | Details of finding | | |
| Recommendation | The Safeguarding Implementation Plan should include the actions arising for with target dates identified and monitored. | rom this audit, | |
| | The Safeguarding Implementation Plan should also include processes for se review of ongoing compliance with the NCSS on a regular (at least six months) | | |
| | | | |
| Agreed Action | Agreed Action A Safeguarding Plan will developed as per the recommendation. | | |
| Responsibility | Responsibility Safeguarding Co-Ordinator | | |
| Due date 30 June 2021 | | | |



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 other children or adults; |



| | 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; includes the backgrounds and interview staff; includes the backgrounds and interview staff; includes the backgrounds and interview 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. |

