

STANDARDS FOR THE DELIVERY OF

CHILD SEXUAL ABUSE THERAPEUTIC SERVICES

DEPARTMENT FOR CHILD PROTECTION AND FAMILY SUPPORT
WESTERN AUSTRALIAN GOVERNMENT

2014

Introduction

The Standards for the Delivery of Child Sexual Abuse Therapeutic Services (the standards) apply to all Child Sexual Abuse Therapeutic Services purchased by the Department for Child Protection and Family Support.

The purpose of the standards is to promote the delivery and continuous improvement of high quality services to children affected by sexual abuse.

Background

The Department for Child Protection and Family Support (the Department) and the Western Australian Police have primary responsibility for the statutory protection of children in Western Australia. The Department also has a broad responsibility for the provision of services that strengthen, protect and promote the safety and wellbeing of individuals, families and communities.

The Department seeks to address child sexual abuse through a multi-agency approach that promotes the coordination of support, treatment, medical and investigative responses¹.

Child Sexual Abuse Therapeutic Services are part of an integrated response to child sexual abuse. The Department funds many of these services, which aim to:

- reduce the harmful impacts of child sexual abuse;
- better protect children and young people from future child abuse; and
- reduce the likelihood of children and young people sexually abusing other children.

¹ Department for Child Protection and Family Support (2013) *Policy on child sexual abuse*. Department for Child Protection: East Perth

Structure of the standards

There are 16 standards organised under the following headings:

- Child focused service provision
- Professional service provision
- Staff capacity
- Privacy and confidentiality
- Access and equity
- Coordinated and integrated service provision
- Quality assurance and governance
- Continuous quality improvement

Each standard is associated with a set of practice goals. At any given point in time, a service may have achieved some goals and be working towards others.

Summary of the standards

The standards are summarised below:

- 1. Child focused service provision
 - 1.1 The child's safety is the primary focus of all work undertaken by service providers.
 - 1.2 Service providers have a clear commitment to the protection of children from harm and the prevention of child sexual abuse from recurring.
 - 1.3 Service providers support non-abusing parents or caregivers to develop an understanding of the issues associated with child sexual abuse.
- 2. Professional service provision
 - 2.1 Service providers have mechanisms in place to guide professional conduct in the work place.
 - 2.2 Service provision is planned, purposeful, client focused and professional.
 - 2.3 Evidence based theoretical and practice models inform and guide intervention.
- 3. Staff capacity
 - 3.1 Staff has appropriate qualifications and/or skills and knowledge to undertake the various activities they are required to perform.
 - 3.2 Services provide staff with appropriate orientation, professional supervision, debriefing, mentoring, support and ongoing professional development.

4. Privacy and confidentiality

- 4.1 Clients understand their right to have their privacy, and their data and personal information treated confidentially and protected from misuse and loss.
- 4.2 Clients understand service limits to client confidentiality.

5. Access and equity

- 5.1 Services are accessible
- 5.2 Service provision is fair, equitable and transparent.

6. Coordinated and integrated service provision

- 6.1 Services have a clear commitment to the delivery of a coordinated and integrated service achieved through sharing of information with relevant agencies that promote the protection of the child/children.
- 6.2 Clients access the most appropriate services to their needs in a timely manner.

7. Quality assurance

 7.1 Service providers have a documented system in place to ensure quality of service.

8. Continuous quality improvement

• 8.1 Service providers are committed to the continuous quality improvement of their service.

1. Child focused service provision

Standard 1.1 The child's safety is the primary focus of all work undertaken by service providers.

Standard 1.2 Service providers have a clear commitment to the protection of children from harm and the prevention of child sexual abuse from recurring.

- Service providers have clearly documented policies and procedures for the protection of children and young people that include strategies to:
 - o address the safety of individuals on the premises;
 - identify and assess the safety concerns and strengths for the child or young person within the family; and
 - support staff to contact the Department for Child Protection and Family Support or Western Australian Police in instances where the safety of children and young people is at risk.
- Service providers participate in Department for Child Protection and Family Support Signs of Safety meetings, where relevant.
- Service providers do not condone acts of violence and abuse.

Standard 1.3 Service providers support non-abusing parents or caregivers to develop an understanding of the issues associated with child sexual abuse.

- Service providers are knowledgeable in the therapeutic needs of the child victim, non-abusing parent or carer, siblings and other family members, perpetrator and caregivers, including working with families where the abuse is denied.
- Service providers demonstrate the capacity to provide counselling, therapeutic support and/or educational support to children, young people and families to address issues of child sexual abuse.

2. Professional service provision

Standard 2.1 Service providers have mechanisms in place to guide professional conduct in the work place.

Practice goals

- The service's code of ethics and the ethics and/or standards of relevant professional associations guides the work of staff in the organisation.
- Service providers work with their staff to maintain and improve practices that do not meet the standards, prioritising those that affect clients of the service.
- Service providers encourage their staff to continually reflect on and develop their practice.
- Service providers provide a model of appropriate behaviour in resolving conflicts constructively.

Standard 2.2 Service provision is planned, purposeful, reflective and client focused.

- Relevant frameworks, policies and procedures are in place to guide practice, including engagement, assessment, intervention and exit/transition planning.
- The service manages cases within a recognised case management and intervention model that includes:
 - o engagement;
 - assessment;
 - development of individual treatment or therapeutic plans, including managing ongoing safety for the child and safety of other children;
 - o intervention; and
 - o review of the effectiveness of the intervention.

Practice goals for the various phases of practice are described in further detail below:

Engagement

- Service providers understand the importance of establishing trust and rapport, and pace the engagement process to enhance the development of a constructive therapeutic relationship between the client and the practitioner.
- Activity and approaches during the engagement phase are tailored to the needs
 of each client and informed by their age, development, culture and expressed
 preferences.

Assessment

- Assessment of children is informed by up-to-date theoretical and practice knowledge of issues related to child sexual abuse.
- Assessment takes a holistic view of the child including their cultural, environmental and family situation, which informs the therapists' understanding of the likely impact of the abuse, issues for the child's recovery, and how to manage any ongoing safety concerns for the child.
- Service providers explain the assessment process to children in a culturally and age appropriate manner.
- Clients actively participate in an assessment of their strengths, risks and needs according to their age and capacity.
- Assessment is based on the service provider's knowledge and understanding of the individual child, and not unduly influenced parents/carers and other adults.
- Assessment for group work includes consideration of the risk of re-traumatisation for participants through sharing their own experience or listening to the experience of others.
- The outcome of the assessment is a written therapeutic plan.

Development of an individual therapeutic plan

- Clients have a documented therapeutic plan(s) that includes:
 - therapeutic goals that relate to the harm experienced by the child and address the likelihood of any future harm;
 - o describes how these goals will be achieved;
 - describes any specific interventions that will be used to achieve these goals;
 - documents actions to increase safety, particularly for children and young people; and
 - o includes input from family, carers and other services as appropriate.
- Planning takes into account the client's age, ability, gender, sexual identity, culture religion and spirituality.
- Children and therapists have a shared understanding of their therapeutic plan.

Reviewing the effectiveness of the intervention

• Processes are in place for a systematic review of Therapeutic plans.

Standard 2.3 Evidence based theoretical and practice models inform and guide intervention

- Service providers apply contemporary, culturally sensitive, evidenced based theoretical and practice models.
- Service providers are aware of research and developments in the sector that may enhance their practice.

3. Staff capacity

The delivery of a high quality, professional service is dependent on the experience, skill and supervision of service providers.

Standard 3.1 Staff has appropriate qualifications, skills and knowledge to undertake the various activities they are required to perform

Practice goals

- Service providers maintain an understanding of the dynamics, context and complexity of issues involved in child sexual abuse.
- Staff providing therapeutic services are appropriately qualified (ideally have completed a relevant undergraduate degree) and skilled for the tasks they are required to perform or working towards attaining a relevant qualification.
- Therapeutic staff without a relevant qualification have access to appropriately
 qualified and experienced supervisors who can assist them to assess and
 respond to common issues of child sexual abuse.
- Staff providing therapeutic services demonstrate self-awareness and an ability to reflect on their practice and interactions with clients.
- Service providers are trained to use interpreters in counselling practice, including
 Telephone Interpreter Service, face-to-face and AUSLAN sign interpreters.

Standard 3.2 Services provide staff with appropriate orientation, professional supervision, debriefing, mentoring, support and ongoing professional development.

- The service provider has a clearly documented policy on supervision, including the supervision of students and volunteers.
- Service providers receive regular supervision through an appropriate supervision model.
- Supervisors of staff providing a therapeutic service have a relevant tertiary
 qualification in human services or health sciences and a minimum of five years
 relevant clinical experience.
- Service providers support their staff to access professional development opportunities to maintain and further develop their knowledge and skills related to

the treatment of child sexual abuse.

4. Privacy and confidentiality

Standard 4.1 Clients understand their right to have their privacy respected, and their data and personal information treated confidentially² and protected from misuse and loss.

Standard 4.2 Clients understand service limits to client confidentiality.

Practice goals

- The service is located in premises that promotes the privacy, anonymity and safety of individuals, children and families.
- The service provider has a clearly documented policy on confidentiality, and procedures for the exchange of relevant information with other agencies and the disclosure of sensitive information.
- The service provider communicates the service's policies and procedures on client confidentiality, exchange of relevant information with other agencies and the disclosure of sensitive information to clients in a format that enables their understanding.
- The service provider stores confidential information securely to prevent unauthorised access, modification or disclosure of sensitive information.
- Clients are provided with information about their rights to privacy and the service's limits to client confidentiality.

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² Confidentiality, however, should not be interpreted so as to create an obstacle to disclosing or sharing relevant information with other professionals and agencies or reporting to statutory services. This is so especially when "it is believed that the use or disclosure is necessary to lessen or prevent a serious and imminent threat to an individual's life, health or safety. *Privacy Act* 1988, National Privacy Principles, Schedule 3, Clause 2.1 (e) (i)

5. Access and equity

Standard 5.1 Services are accessible

Practice goals

- The service environment is safe and encourages clients to make contact with and participate in the service.
- The service is physically accessible to clients³ and/or provides a flexible response to enhance accessibility where possible.
- The service delivery environment uses resources and symbols that are responsive to client's needs, cultural or Aboriginal or Torres Strait background, disability, age or developmental stage.
- The service has documented policies and procedures on the use of qualified interpreters, including Telephone Interpreter Service, face-to-face and AUSLAN sign interpreters.
- The service provider has mechanisms in place to identify barriers to service accessibility and uses a range of strategies to address these.

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³ Service providers can demonstrate that there is a service outlet/s that is physically accessible to all to meet service demand.

Standard 5.2 Service provision is fair, equitable and transparent.

- Service provision reflects the cultural make-up of the target group.
- Service providers use language and apply their skills and resources to ensure
 that all clients experience respect, empathy and a skilled response to the
 presenting issues. This includes Aboriginal and Torres Strait Islander peoples,
 people from culturally and linguistically diverse backgrounds, people with
 disabilities and people who are in same-sex relationships.
- Priority of access for services is based on relative need, available resources and considers the best interest of children and young people.
- Information is provided to all clients and family members in a format that facilitates their understanding of:
 - o criteria for entering and leaving the service;
 - o criteria to determine priority for service;
 - o conditions that may apply to services being provided; and
 - o any fees or charges, if applicable.
- Policies and procedures are in place that document:
 - o screening and eligibility;
 - o priority of access; and
 - o waiting list management.

6. Coordinated and integrated service provision

Coordinated and effective service provision to address complex family situations is achieved through collaboration and partnerships between all relevant agencies.

Standard 6.1 Services have a clear commitment to the delivery of a coordinated and integrated service achieved through sharing of information⁴ with relevant agencies that promote the protection of the child/children.

- Written policies and procedures are in place for the disclosure and exchange of relevant information, with other professionals, agencies and the reporting to statutory services⁵.
- Service providers are clear about their role and have an understanding of the roles and responsibilities of all services identified as being involved with the client.
- Strategies are in place to promote effective collaboration and appropriate information sharing with other agencies who are working with the child/family.
- The service provider develops and maintains effective referral and support linkages with relevant services to support clients, particularly when dealing with the issues of family and domestic violence, substance misuse, and/or mental health issues.

⁴ Social Workers have an ethical obligation to share appropriately information that will enhance such protection (the protection of vulnerable persons) or that will inform relevant decision-making. Such disclosures may constitute a legitimate breach of confidentiality (*Source: Australian Association of Social Workers Code of Ethics 2010*). Standard A.5, Australian Psychological Society Code of Ethics 2007 states that 'members must respect the confidentiality of

information obtained from consumers in the course of their professional work. It also states that they may reveal such information to others only with the consent of the person or the person's legal representative. However in those unusual circumstances where failure to disclose may result in clear risk to the client or to others, the member may disclose minimal information necessary to avert such risk. Members must inform their clients of the legal and other limits of confidentiality. The APS also has published Guidelines on the reporting of child abuse and neglect, and criminal activity.

⁵ Refer to Section 23 'Exchange of information' and Section 129 'Protection from liability for giving information' in the *Children and Community Services Act 2004*.

Standard 6.2 Clients access the most appropriate services to their needs in a timely manner.

Practice goals of minimum standard being met

- Service providers are responsive to referrals and requests for services.
- Service providers work collaboratively with other relevant services and agencies to manage demand for services.
- Services provide information about alternative services or a referral to another service when they are unable to provide a service to an individual or family.

7. Quality assurance and governance

Standard 7.1 Service providers have a documented system in place to ensure quality of service.

- Services have a code of conduct that establishes boundaries and lists acceptable and unacceptable behaviours in relation to the children with whom the service has contact.
- Service providers create and sustain values that promote trust, respect, teamwork and openness.
- Clients are well informed of their rights, what to expect of the service, how to make a complaint and the limits to client confidentiality by the end of the engagement process.
- Services' quality assurance systems incorporate methods to check that tasks are carried out as specified and written policies are implemented including:
 - staff's responsibility to consult and/or report to the Department for Child Protection and Family Support or the Western Australia Police regarding concerns for the child's wellbeing, including allegations of abuse and neglect;
 - o documenting the rationales for decision making;
 - regular supervision;
 - management systems and employment practices, recruitment, selection and training of staff and volunteers;
 - national criminal record checks are completed prior to the employment of staff and workers including students and volunteers;
 - o compliance with the Working with Children (Criminal Record Checking) Act 2004.
 - safety and security of staff and clients;
 - o confidentiality of client records; and
 - the right to fair investigation of complaints.

8. Continuous quality improvement

Standard 8.1 Service providers are committed to the continuous quality improvement of their service.

- The service provider complies with the reporting requirements outlined in the Service Specifications and Service Agreement.
- The service provider is aware of research and developments in the sector that may inform the continuous improvement of service delivery.
- The service provider encourages clients to reflect and provide feedback on the services they receive in a way that is appropriate to their age and level of understanding.
- The service provider has mechanisms in place to obtain, analyse and act upon feedback from clients, particularly from children and young people.