

# National Redress Scheme

For people who have experienced  
institutional child sexual abuse

# Direct Personal Response Guidance Handbook

**Version 1.1 – November 2018**

## Revision history

Version	Revision date	Summary of changes
1.1	November 2018	Initial development and distribution

## Abstract

Direct personal response (DPR) is one of the three elements of redress available under the National Redress Scheme (the Scheme) for people who have experienced institutional child sexual abuse. This DPR Guidance Handbook is designed to support institutions participating in the Scheme to implement a DPR in accordance with a best practice approach to restorative practice.

Participating in a DPR is an opportunity for survivors to engage with the institution responsible for their abuse to share their experience, to the extent they wish to do so, and have the institution hear, recognise and acknowledge their story.

Evidence from the Royal Commission into Institutional Responses to Child Sexual Abuse (the Royal Commission) indicates that a meaningful, effective restorative engagement between the survivor and the institution responsible for their abuse is fundamental to healing and redress for many survivors. Many survivors told the Royal Commission that it is important for them, and their sense of having achieved justice, to have an opportunity to speak to about their experience and have the story heard and acknowledged by a representative of the responsible institution. They expressed that they wanted the institution, through a current, senior representative, to engage genuinely with them and to provide a meaningful expression of acknowledgement, regret and apology, so that they could have confidence that the lessons from their experience will support ongoing efforts to prevent abuse into the future.

A demonstration of accountability by the responsible institution's representative is a crucial element of a DPR. Accountability is evident when an institution takes ownership of its failure to prevent abuse and acknowledges the often poor responses institutions made to survivors when abuse was made known. Institutions can also demonstrate accountability to survivors by implementing a trauma-informed and survivor-focussed approach to a DPR under the Scheme. Whether survivors are listened to, understood and respected is likely to have a significant impact on whether they consider they have received justice through a DPR.

An important secondary objective of a DPR is the opportunity for institutions to gain insight into the impacts of sexual abuse for survivors and the institution. These lessons are important to inform how the institution may prevent future abuse and to achieve meaningful cultural reform.

The preferences and needs of the person who has experienced abuse should inform and guide all instances of DPR. The fundamental principle that should underpin all actions in the DPR process is to *do no further harm*.

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# 1. Purpose

The DPR Guidance Handbook (the handbook) is a best practice guide provided to support institutions participating in the Scheme to establish and implement effective and safe DPR processes. It draws on academic resources, including various reports published by the Royal Commission, and lessons from similar previous Government approaches within a redress context. The approach to DPR detailed in the handbook is underpinned by the principles and values of restorative practice and trauma-informed care.

The handbook builds on the legislative base for DPR, which consists of relevant sections of the *National Redress Scheme for Institutional Child Sexual Abuse Act 2018* (the Act) and the Direct Personal Response Framework (DPR Framework). Section 55 of the Act provides for the Minister to declare guidelines about how DPR is to be provided under the Scheme. Subsection 55(2) of the Act provides for a Framework to be established under which a participating institution must engage in a DPR under the Scheme.

The initial sections of the handbook provide an overview of the underpinning principles and process of a DPR, while the Guidance Notes elaborate on key elements in further detail. Sample templates of key documents institutions may seek to develop to support the implementation of a best practice approach are attached. Updates to this handbook will be communicated as required.

## **Interactions with key documents**

The handbook should be read in conjunction with:

- the Act
- the DPR Framework and Explanatory Statement, and
- other official documents as relevant.

## Terms used throughout the handbook:

- **Survivors:** For consistency, the term *survivors* is used throughout this document to refer to people who have experienced institutional child sexual abuse. We acknowledge not everyone identifies with this term. The term *applicant* is preferred in most of the Scheme's communications. However, once at the stage of engaging in a DPR, individuals are no longer an *applicant* as their application has reached an outcome. Institutions should address survivors by their names when interacting directly with them.
- **Support person(s):** A person nominated by a survivor to support them through a DPR.
- **Institutional representative:** the senior staff member participating in an agreed form of DPR with a survivor. A representative of an institution must only participate in a DPR where they have the appropriate authority to apologise on behalf of the institution.
- **Contact person(s):** Describes the staff member(s) within the institution that survivors will speak to in relation to seeking and arranging their DPR.
- **Further action(s):** An agreement made during the DPR between the survivor and institutional representative for actions to occur following the DPR, i.e. a survivor may seek a letter of apology following a verbal apology, provision of records or certificates, visits to particular sites or other symbolic gestures to assist healing.
- **Facilitator:** A facilitator's role is to maximise the effectiveness of a DPR. It is best practice for an institution to engage a facilitator to prepare participants for and conduct the DPR. A facilitator is a person who possesses skills and experience in facilitation, mediation, group work and/or experience working in a range of settings with people who have experienced trauma.
- **Scheme Operator:** This role is held by the Secretary of the Department of Social Services, as the agency responsible for the Scheme.

See **Guidance Note 3: Role of participants in a DPR** for a more detailed explanation of the roles outlined above.

## 2. Overview of DPR requirements and principles of the Act

All institutions participating in the Scheme are responsible for engaging in a DPR with survivors that request it, in compliance with the Act and the DPR Framework. Your institution must consider how it will engage in a DPR and prepare itself accordingly by implementing relevant administrative arrangements ahead of having contact with survivors. See **Guidance Note 5: Considerations for participating institutions** for detail on implementation and operational considerations.

In providing a DPR, participating institutions are required to adhere to the following principles, as outlined in section 56 of the Act.

- (1) All participating institutions should offer and provide on request by a survivor:
  - (a) meaningful recognition of the institution's responsibility by way of a statement of apology, acknowledgement or regret, and
  - (b) an assurance as to steps taken to protect against further abuse.
- (2) Engagement between a survivor and a participating institution should occur only if, and to the extent that, a survivor wishes it.
- (3) Participating institutions should make clear what they are willing to offer and provide by way of a DPR to survivors.
- (4) In offering DPRs, participating institutions should be responsive to survivors' needs.
- (5) Participating institutions that already offer a broader range of DPRs to survivors and others should consider continuing to offer those forms of DPR.
- (6) DPRs should be delivered by people who have received training about the nature and impact of child sexual abuse and the needs of survivors, including cultural awareness and sensitivity training where relevant.
- (7) Participating institutions should welcome feedback from survivors about the DPRs they offer and provide.

Where the Scheme Operator finds that a survivor has suffered abuse in more than one institutional setting, the survivor can request to participate in a DPR with each or any of these responsible institutions, if they wish to do so. If your institution has previously engaged with the survivor in any similar processes outside of the Scheme, the survivor remains able to request and engage in a DPR under the Scheme with your institution.

### 3. Introduction to DPR

#### A restorative approach

For the purposes of the Scheme, a DPR is considered to involve one or more of the following:

- an acknowledgement of the impact of the abuse on the survivor
- an apology or a statement of acknowledgement or regret
- the opportunity to meet with a senior official of the institution, and/or
- an assurance as to the steps the institution has taken, or will take, to prevent abuse occurring again.

To achieve this in the context of the Scheme, the model for a DPR is based on restorative practice as recommended by the Royal Commission. The underlying principles of restorative practice promote:

- wellbeing
- voice
- safety
- respect
- confidentiality
- accountability, and
- a survivor focus.

Important concepts to remember:

- *Do no further harm* - Every action in the DPR process should be based on this core principle. A DPR should not be a negative experience or cause a survivor to relive trauma. Prior to engagement in a DPR, the readiness of all participants to safely engage should be carefully considered.
- *Do not question a survivor's story* - Once a survivor is engaging in a DPR, their claim for redress under the Scheme has been accepted based on standards of reasonable likelihood. As such, the abuse should never be in question during a DPR. Survivors engaging with your institution for the purpose of a DPR should never be made to feel that they are not believed. Their story and experience should never be questioned.
- *Implement trauma-informed care* – Every action involved in making a DPR happen, from the early preparation to completion, should be designed and implemented according to a trauma-informed approach that puts the survivor's needs at the centre.
- *"Working with" rather than "doing to"* – For a DPR to be survivor-focussed, all actions must be done with them, rather than "for" or "to" them.

A DPR may occur through one or more of the following formats:

- a face-to-face meeting between a survivor and a representative from the responsible institution, where the survivor is able to speak to their experience to the extent they wish
- written engagement between a survivor and a representative from the institution, where this is preferred by the survivor
- group healing, such as multiple survivors of the same institution meeting with representatives of the institution

- a public response or expression by the institution, such as a memorial, service, reunion, commemoration or public apology
- access to personal records or the opportunity to correct inaccurate historical records
- a memory project, and/or
- any other method of DPR a participating institution is able to participate in and provide safely, subject to the survivor agreeing to participate it this method.

Crucially, a DPR enables a survivor to voice their experience and the impacts of the abuse, both at the time and now, to someone who is able to do something with these lessons. A DPR is also an opportunity for the institution to demonstrate its accountability to a survivor. The elements involved in the process that enable effective and enduring DPR are discussed throughout the handbook.

### **Setting relations right**

Restorative practices such as a DPR are intended to “set relations right.” Setting relations right may involve:

- reducing physiological and psychological suffering
- improving relationships with family, friends and colleagues, and/or
- some form of resolution with the institution where the abuse occurred.

Relationships may be restored to something positive, be neutralised to no longer involve intense distress and conflict, or be formally ended. Participation in a DPR may be one of many activities a survivor engages in to achieve healing. A DPR alone may not fully repair the damage caused by a significant harm. However, restorative approaches such as a DPR recognise and draw on survivors’ resilience in the face of trauma.

In a prior, similar government program of redress involving a restorative component similar to a DPR, survivors reported that engagement with the institution supported them to achieve a more positive, or less destructive, relationship:

- within themselves (e.g. their own actions, thoughts and feelings)
- between themselves and others (e.g. individual family members, friends and other members of their social network), and/or
- between themselves and a group or institution (e.g. an institution where the abuse occurred, as represented by someone involved in that institution).

### **The DPR process**

The standard form of a DPR is a facilitated meeting between a survivor and institutional representative. There are several variations on this standard version of a DPR.

Under certain circumstances, a direct face-to-face meeting is not practicable or not desirable. In these circumstances, an indirect, but nonetheless personal, response may be appropriate. This may involve a contact officer or facilitator meeting separately with the survivor and with the institutional representative, conveying necessary information between the parties, and then arranging for outcomes such as a formal letter of acknowledgment, accountability and apology.

In the DPR standard format, the process involves a facilitated meeting between the survivor, their designated support person(s), and a representative of the institution. The meeting will separately move through four stages:

- the survivor speaks to their experience, its impacts both at the time and now (to the extent they wish)
- the institutional representative provides a response
- a discussion between parties that enables a shared understanding of the abuse, its impacts and the future (lessons to be learned), and
- all parties discuss any further actions that might support healing and achieving a sense of justice.

There is also a broader process with regard to a DPR. This refers not only to the actual DPR meeting, but to the broader experience of engaging with all those involved in arranging, preparing for and participating in the DPR. This broader process involves:

- initial inquiries with the institutions contact person
- provision of information on the purpose and process of engaging a DPR
- deliberations about whether to participate in a DPR
- the process of choosing the appropriate support person(s), institutional representative(s) and facilitator
- preparatory meetings
- the DPR meeting, and
- subsequent follow-up, which includes debriefing with participants and ensuring that any agreed further actions are delivered.

Throughout the administrative process - before, during and after the DPR - all involved should be mindful that procedural justice requires administrators to be respectful, transparent, and clear as they address concerns, ask and answer questions, and make the requisite arrangements for a DPR that can successfully deliver a sense of justice.

### **Professional facilitation of a DPR**

While the Act and Framework do not stipulate that institutions must use a facilitator to prepare for and convene DPRs, professional facilitation can ensure a DPR is conducted in alignment with best practice to achieve ideal outcomes and safe engagement. Institutions should consider engaging a facilitator in all forms of DPR, particularly for face-to-face and group DPRs.

The role of a facilitator is to maximise the safety and effectiveness of a DPR process. This involves:

- exchanging information during preparation for the DPR and before the participants meet face-to-face
- working with the survivor and support person(s) to ensure that the survivor is well prepared to speak about their experience as effectively as possible and to the extent they wish
- working with the institutional representative to ensure that they hear, acknowledge and respond to the survivor's account as effectively as possible

- taking responsibility for ensuring all the elements necessary for an effective apology are produced through the DPR, and
- managing the dynamics and inherent power imbalances present in the DPR interaction, to enable effective and meaningful outcomes for participants.

The facilitator works with participants to ensure that:

- the circumstances of the abuse as told by the survivor have been formally acknowledged
- the institution clearly and transparently takes responsibility for failures in their duty of care
- the survivor is able to give a narrative account of their experience and impacts, to the extent they wish and are able to do so in a way that is safe for them
- the institutional representative expresses regret genuinely and believably, and
- those involved consider any actions needed during or following the DPR to set right relations, acknowledging this as a core element of reparation.

Professional facilitation is especially helpful in those cases where:

- the survivor faces particular difficulties, for example they have significant mental health issues and/or limited social and/or professional support, acknowledging these are often the result of trauma
- the DPR is attended by more than one survivor
- the DPR is attended by more than one institutional representative, or
- the DPR is attended more than one support person.

As a general rule, the more complex a DPR meeting, the more an experienced, professional facilitator can help ensure that the meeting is prepared, conducted and followed-up safely and effectively.

Where a facilitator is not engaged by the institution, the contact person may carry the additional responsibility in making decisions about the readiness of the survivor and any support person(s). They will also work with the institutional representative in anticipation of their engagement with the survivor in the DPR. The contact person may facilitate the DPR, but should only do this if they have the relevant skill set and experience.

Professional facilitation enhances the wellbeing of survivors and works to support the institutional representative in their role. By working with all parties to ensure their readiness and adequate preparation for the DPR, a facilitator enables the conditions for meaningful and equal interpersonal engagement in the DPR.

### **Participant readiness**

Regardless of the chosen method, the careful preparation of all DPR participants is crucial for maximising the effectiveness of a DPR. Readiness should take into account relevant considerations about participants' current personal circumstances and their ability at this time to engage safely in the DPR process.

To be considered ready to engage in a DPR, it is important that all participants (i.e. survivor, support person(s) and institutional representative) have an understanding of:

- the DPR process, i.e. the steps involved in getting to a DPR and timing of these
- the extent of their expected engagement in the DPR (i.e. their role)
- the role of other participants involved in the DPR
- what can reasonably be expected of the institution and its representative in a DPR
- factors relating to their readiness to participate and the importance of readiness
- any sensitivities about symbolic factors, such as the wearing of uniforms or other ceremonial clothing by an institutional representative or other participant, and
- logistical factors such as transport and accommodation.

Where there are concerns about a participant's readiness, the facilitator or contact person(s) should discuss the concerns and how they may be addressed with the person. Any concerns about a survivor's readiness to safely engage in a DPR should be discussed with the survivor, and with their designated support person(s) and any other relevant professional supports as appropriate.

It is important that the contact person(s) and/or facilitator works with the survivor prior to a DPR to assist them to craft the narrative of their experience they want to share with the institutional representative. This can assist in ensuring that elements relating to the context of the abuse, and its impacts in the present and implications for the future are captured as the survivor wishes them to be conveyed during the DPR.

### **Steps involved in a standard DPR process**

It is anticipated that a face-to-face, facilitated meeting will be the preferred format for survivors engaging in a DPR. The following information details the steps in a standard face-to-face DPR. See **Guidance Note 3: Participant readiness** and **Guidance Note 4: Roles involved in a DPR process** for additional information.

#### **Commencing arrangements for a DPR**

To begin the broader DPR process, survivors make contact with the institution to request a DPR. A contact person then liaises with the survivor about their interest in a DPR, their preferred format for engaging in a DPR, and what they hope to achieve through a DPR. The contact person works to ensure the survivor is comfortable with the choice of support person, facilitator, and institutional representative. The contact person may also fulfil the administrative requirements for the DPR (i.e. engaging the facilitator and making logistical arrangements). Consideration can be given to the institution facilitating the DPR but they should only do this if they have the relevant skill set and experience.

#### **Preparing for a DPR**

The facilitator, or the contact person where a facilitator is not engaged, must work sensitively to address any unrealistic expectations the survivor may hold in relation to the DPR, to ensure the survivor's interests and motivations for participating align with what the process may realistically achieve for them. This may take several conversations, and should be viewed as part of the process of determining a survivor's understanding and readiness. This process of consultation empowers the survivor to make informed decisions about the DPR.

Where an independent external facilitator is engaged, information relevant to the DPR held by the institution should be provided to the facilitator, as allowed under subsection 98(2) (b) of the Act. Access to this information assists the facilitator to undertake preparatory work for the DPR with both the survivor and institutional representative, as it enables the facilitator to have a sense of the survivor's story prior to meeting them and limits the need for a survivor to share their story in detail in their first meeting the facilitator. The contact person(s) should advise survivors that this information exchange will occur as part of preparing for the DPR.

The facilitator/contact person(s) clarifies their role and works with the survivor and their support person(s) about how to best support the survivor through the DPR. The facilitator/contact person confirms the survivor's expectations of the DPR and the outcomes it can achieve. Together, they will address any concerns or special needs in relation to the process, including any requests for further action the survivor may be considering. The facilitator/contact person will outline how the meeting will run. Together, they will determine how the survivor can tell their experience most effectively to achieve the outcome they are seeking. Typically, the preparatory meeting occurs around a week before the DPR.

The facilitator/contact person meets separately with the institutional representative, and provides some background context and information on the current circumstances of the survivor, such as their motivations and expectations for participating in the DPR, and whether they may request further action. The facilitator/contact person explains how the process is expected to unfold and responds to any questions or concerns the institutional representative may have, to ensure they feel ready and equipped to respond to the survivor. A facilitator/contact person also coaches the institutional representative to assist them to engage safely and effectively with a survivor in the DPR. This preparatory meeting typically occurs a week before the DPR.

There may be occasions where the selected institutional representative is not a suitable participant. It is the role of the facilitator/contact person to raise any concerns about this with the institutional representative and for the institution to nominate an alternative representative.

### **Holding the DPR meeting**

Once all arrangements are agreed and participants are prepared, the survivor, support person(s), and institutional representative meet for the first time face-to-face in the DPR meeting. The DPR moves through four basic stages (noting that participants or the facilitator may delay or cease the process at any time throughout if this is required to ensure the consent, safety and wellbeing of all participants):

- (1) With guidance from the facilitator, as required, the survivor speaks to their experience. This will generally provide those listening with a sense of what happened, the impact it had on them, and its ongoing effects. This first stage of the DPR is typically the longest.

- (2) When the survivor has talked to their experience in as much detail as they wish to provide, the institutional representative is invited to provide a response. This is the appropriate time to formally accept responsibility for the failure of a duty of care, and to offer a genuine and personal apology.
- (3) There is typically then a discussion about the lessons to be learned from the survivor's experience.
- (4) Finally, there is a discussion about further actions that the institution might take to support the survivor's wellbeing. This discussion does not extend to arrangements for other elements of redress under the Scheme such as counselling or reparation monetary payment.

### **Follow-up after the DPR**

The facilitator, or the contact person where a facilitator is not engaged, checks-in with the survivor and institutional representative separately directly following the DPR, to ensure their safety and wellbeing. They may provide a feedback survey at this time.

The facilitator or contact person should also follow-up with the survivor and institutional representative 2-4 days after the DPR. At this time, they can provide details about additional avenues for providing feedback, compliments or complaints.

### **Outcomes of participation in a DPR**

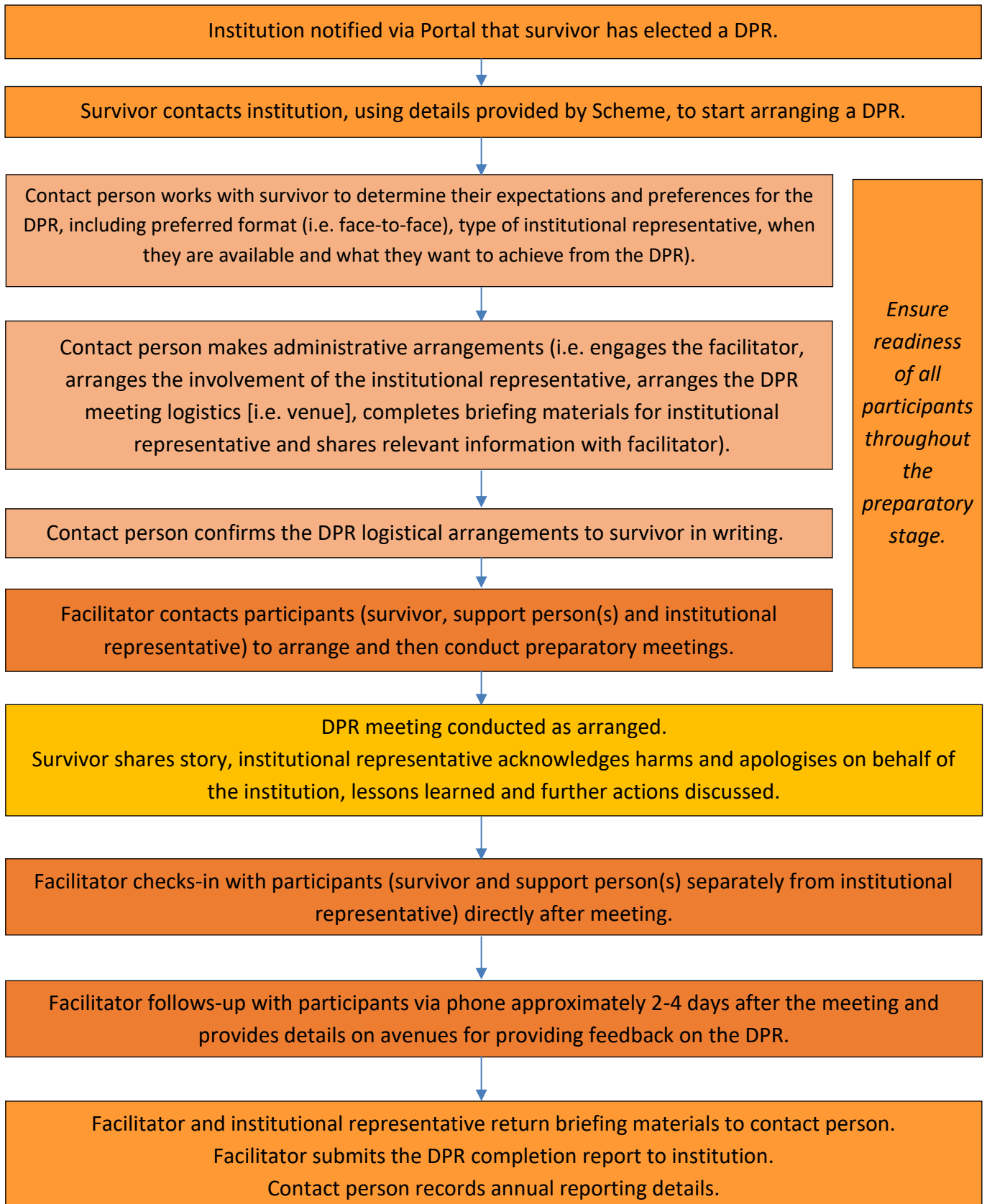
For survivors, seeing the culture of an institution in which they experienced abuse undergoing genuine reform is correlated with post-traumatic growth and recovery.

A DPR from the representative of an institution to a survivor of abuse is most likely to promote individual recovery and institutional reform when the institutional representative:

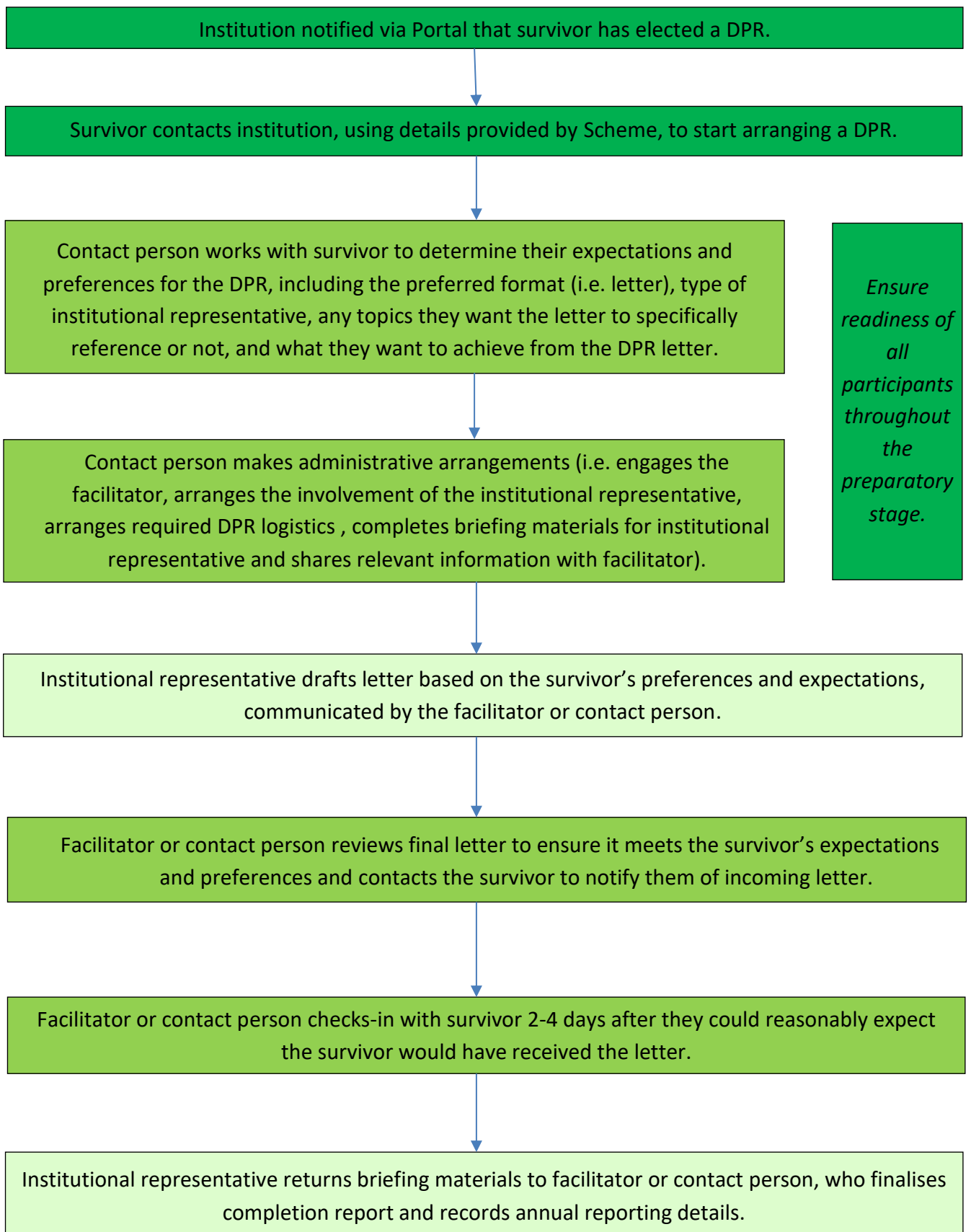
- acknowledges and validates the survivor's experience
- acknowledges the institution's accountability for what happened
- provides the survivor with important information about their time in care, where relevant
- provides the survivor with important information about steps the institution has taken, is taking, and will take, to protect children from sexual abuse, and
- draws lessons from the survivor's experience and resilience to support further and continuing reform.

See **Guidance Note 8: Providing an effective apology** for additional information.

## Sample process map for standard DPR (i.e. face-to-face, facilitated model)



## Sample process map for an indirect DPR (i.e. written letter model)



## GUIDANCE NOTE 1

### Trauma-informed and survivor-focused practice

A DPR must be undertaken in accordance with principles that support the safest and most effective engagement for survivors and institutions.

The impacts of child sexual abuse on mental health and functioning are well documented. Trauma affects survivors in many ways, including:

- *at the individual level* - mental health and physical health issues
- *at the interpersonal level* - emotional, behavioural and interpersonal capacities are effected, and
- *at the societal level* - impacts on quality of life and opportunity.

Trauma-informed service delivery involves working with people to establish safety, trustworthiness, work collaboratively, provide choice and control (to the extent possible) and empowerment.

The Royal Commission heard evidence from survivors who were re-traumatised by the experience of seeking assistance from institutions ill-equipped to respond to people presenting with underlying trauma. DPR processes that are not designed and implemented with a trauma-informed approach risk recreating trauma for survivors, for example, by producing a disjointed experience or requiring them to repeat their story. Institutions must develop their understanding of trauma-informed principles and build this into their contact with survivors to ensure their DPR processes *do no further harm* to survivors engaging with these processes.

All contact and interactions with survivors in the process of arranging a DPR should be underpinned by principles of trauma-informed care. The following principles of trauma-informed care, drawn from Blue Knot Foundation's Practice Guidelines for Treatment of Complex Trauma and Trauma Informed Service Delivery<sup>1</sup>, can guide interaction with survivors during the DPR process.

- **Safety:** establishing emotional and physical safety.
- **Trustworthiness:** providing clarity and consistency in information giving and sharing, doing what you say you will do and advising if there are limitations on being able to deliver or time frames for delivering and respectfully maintaining interpersonal boundaries.
- **Choice:** maximising the choice and control over the process for the survivor (to the extent possible) giving them opportunities to have input into the DPR process, consulting them on their preferences for the DPR format, where and when the DPR

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<sup>1</sup> Blue Knot Foundation's *Practice Guidelines for the Treatment of Complex Trauma and Trauma Informed Service Delivery* can be found here: <https://www.blueknot.org.au/ABOUT-US/Our-Documents/Publications/Practice-Guidelines>

will occur, and seeking preferences for who the institutional representative may be or their characteristics such as gender, background and experience.

- **Collaboration:** maximising collaboration and sharing of power. Working with the survivor, not doing things to or for them.
- **Empowerment:** providing opportunities for self-determination.

Where people engaging with survivors do not possess the appropriate skills to act in a trauma-informed way, there is the risk of re-traumatising survivors and replicating the inherent power imbalances present in child sexual abuse during the DPR process. Contact persons and institutional representatives should be appropriately trained to maximise the benefits of participation in a DPR for the survivor and minimise the risk of further harm.

### Checklist for trauma-informed practice

- Has your institution sought appropriate training in trauma-informed care for staff who will be involved in contact with survivors about the DPR process?
- Has your institution integrated trauma-informed principles into your practices for having contact with survivors?
- What mechanisms does your institution have in place to support the contact person(s) and institutional representatives in their engagement with survivors?
- Has your institution made sure that survivors will be engaging with one key contact person throughout the DPR process?
  - Have the logistics of this been considered and appropriately managed?

## GUIDANCE NOTE 2

### Core elements for achieving a meaningful DPR

#### **What does an effective DPR involve?**

For many survivors, the factors that enable a sense of healing or justice involve recognition of their experience: that is, that they are believed. It is crucial to note that in the context of the Scheme, the survivors' account of abuse has been accepted. Those engaged in a DPR should never question the survivors experience or invoke inquiries into the veracity of their story.

Effective redress involves being listened to and heard, validated and vindicated. It is most effective when the responsible institution demonstrates accountability for what happened, for taking action to prevent and respond to future abuse and for responding to the lessons learned through hearing survivors' accounts during a DPR. Institutional representatives must only participate in a DPR where they have the appropriate authority to acknowledge and be accountable to the survivor through apologies and other appropriate expressions of regret.

#### **Core elements of an effective DPR**

Following criminologist Kathleen Daly's theory of victim justice<sup>2</sup>, a DPR is likely to be most effective, achieving a meaningful outcome for the survivor, where the following elements are present.

##### *Active Participation*

Survivors should be consulted about their needs and preferences to participate in the DPR and the outcome they want to achieve. This empowers survivors to feel a sense of control throughout the process.

##### *Voice*

Survivors should be supported to share their story of abuse in a format that is safe for them and to the extent they are able. Allowing for a flexible format for engaging in the DPR is important to enable a survivor to express what is important to them in a way in which they are comfortable.

##### *Validation*

The institutional representative must provide a recognition that the abuse occurred and was wrong, and demonstrate that they believe the survivor and that they were not deserving or responsible for the abuse. This is crucial for shifting the sense of responsibility, shame and guilt survivors of institutional sexual abuse may feel as part of their response to trauma.

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<sup>2</sup> Kathleen Daly's 2016 paper *Sexual Violence and Victim's Justice Interests* can be found at [https://www.griffith.edu.au/\\_\\_data/assets/pdf\\_file/0018/223407/2017-Daly-SV-and-VJI-revised-23-Oct-2013.pdf](https://www.griffith.edu.au/__data/assets/pdf_file/0018/223407/2017-Daly-SV-and-VJI-revised-23-Oct-2013.pdf)

### *Vindication*

The institutional representative must affirm the abuse was morally and legally wrong. This could include expressing that the institution failed the survivor and that the institution's response to the abuse was wrong. Vindication may also include expressing regret, apology and remorse for the abuse and providing assurances about the policy, practice and cultural change that has occurred within the institution to prevent similar abuses, as well as poor responses to abuses, from occurring again. Institutional representatives should avoid asking for the survivor's forgiveness, as this shifts the focus of the DPR away from meeting the survivor's needs, towards a focus on the representative's need to alleviate the discomfort and shame they may feel in representing the responsible institution.

### *Accountability*

The institutional representative should demonstrate how the institution is taking accountability for the care of the survivor and for addressing its prior failings. This may include showing how the institution is learning lessons from survivors' experiences.

## **Core administrative practices for producing an effective DPR**

Institutions should consider the following when developing their DPR policies and procedures, to ensure they are equipped to engage in a DPR safely and successfully.

### **Voluntary participation**

Participation in a DPR is voluntary. A participant has the option to delay or withdraw from the process at any stage. Institutions should ensure they have flexibility built into their DPR procedures to manage changing circumstances such as delays to the process without disruption.

### **Consent to participate in a DPR**

It is good practice to have all participants sign a form indicating their consent to participate in a DPR, to reflect that all participants understand the purpose and parameters of the DPR and are fully informed about what is involved in participating. The form may include statements that reflect the participants understanding of:

- the voluntary nature of participation
- their role and that of others in the DPR
- the purpose of and the particular format of the DPR
- the confidentiality and privacy parameters of the DPR
- that the survivors account is undisputed, and
- that effective DPR relies on a safe and respectful participation of all.

It is the responsibility of the contact person and/or facilitator to provide each participant with a thorough explanation of the purpose of a DPR and the possible formats for engaging in a DPR prior to having them signing a consent form. See sample consent forms at **Attachments A, B and C**.

### **Participant safety**

The safety and wellbeing of all participants, particularly the survivor, must be upheld at all times. All participants should be able to access appropriate support and de-brief mechanisms before, during and after a DPR.

Any person involved in a DPR may delay or cease the engagement at any time if they reasonably believe that continuing the process may jeopardise the health or safety of the survivor, their support person(s), or the institution's representative engaging in the DPR. See **Guidance Note 3: Participant readiness** for further guidance on identifying participant readiness to engage in a DPR.

### Confidentiality

Engagement in a DPR is confidential. The personal details about others disclosed for the purpose of a DPR must not be disclosed to anyone outside of the process, unless:

- all participants agree otherwise
- disclosure to authorities is required by law, or
- there is an actual or potential threat to human life, health or safety.

If details must be discussed with a third party outside of the DPR process, institutions must ensure that any disclosure of information is within the limits agreed by the participants, and/or proportionate to the threat on a case-by-case basis.

### Managing power imbalances

Power imbalances are characteristic of child sexual abuse. It is important for institutional representatives to be aware of this and the risk of these power imbalances being replicated in the content or manner of the engagement in a DPR. Survivors will present with low levels of trust with the institution where the abuse occurred and will need assurances that their engagement with the institution engaging in the DPR is safe and genuine. Professional facilitators are skilled in managing the dynamics and inherent power imbalances to enable effective and meaningful outcomes for participants.

### Requests for further actions

The Scheme does not prevent or limit any agreements between participants and institutions in regard to further actions arising from DPR engagement. It is envisaged that the face-to-face meeting or letter (or what other method that is agreed on) is the intended outcome of the DPR.

When institutions agree to further actions, they should consider whether it is practical to do so. Further actions should be recorded in as much detail as possible. Where a representative has any doubt about their own or the institutions capacity to fulfil an action, wording that reflects this, such as, the representative will look into the possibility of providing (the action), is advisable. It is important not to agree to something if it may not be achievable, additionally, it is important to fulfil the action(s) as soon as practical, as long delays can impact on the effectiveness of the whole DPR process. See sample record of further action(s) form at **Attachment D**.

### Conflicts of interest

Where a contact officer or institutional representative believes that there may be a conflict of interest, perceived or real in relation to their participation in a particular DPR, this should be declared and managed as soon as possible. This may mean that an alternative contact person or institutional representative is required for the DPR.

### Training for institutional representatives to build skills for engaging effectively in a DPR

As outlined in the DPR Framework, institutional representatives, facilitators and contact persons should only be involved in a DPR if they have received training about the nature and impact of child sexual abuse and the needs of survivors. Training on the nature and impact of child sexual abuse should include developing an understanding of:

- what trauma is, including understanding the prevalence and impacts of complex trauma
- the stress response and strategies for coping with traumatic events, to develop a deeper understanding of survivor behaviour, and
- trauma-informed care and practice, including how to apply the principles of trauma-informed practice to support survivors' recovery and avoid re-traumatisation.

### Post-DPR check-in

It is best practice for the facilitator, or the contact person where a facilitator is not engaged, to check-in with the survivor and institutional representative separately following the DPR. When a DPR is conducted in-person, the facilitator or contact person should check-in with each participant in-person directly afterwards, and follow-up again 2-4 days later. Following indirect forms of a DPR (i.e. letter), check-in should occur 2-4 days after the survivor is reasonably likely to have received their DPR letter.

This contact is an opportunity to ensure:

- the DPR met the expectations and needs identified during the preparation phase
- participants have access to adequate supports to manage any emotional responses to the DPR, and
- participants are aware of how to contribute to the institution's and Scheme's feedback and complaints processes.

If an independent facilitator is involved, they return all documentation related to the DPR to the institution after the check-in stage. The institution files data internally for annual reporting to the Scheme Operator (see **Guidance Note 10: Reporting and evaluation** for additional information).

## Checklist: Achieving meaningful DPR

- Are the elements of an effective and meaningful DPR built into your institution's DPR processes and practices?
- Do the staff at your institution involved in a DPR have access to appropriate information about the elements of an effective DPR, and an understanding of how to implement a process that incorporates these elements?
- Has your institution considered using a professional facilitator?
- Does your contact person(s) have an understanding of how to ensure all participants in a DPR are equipped with the knowledge and information required for them to be able to give their informed consent to participate in a DPR?
- Do all DPR participants understand the confidentiality requirements?
- Does your institution know how to engage in a DPR in a culturally appropriate way?
  - Do you need to seek culturally specific advice to achieve this?
- Is the institutional representative aware of any possible requests for further actions and considered the ability of the institution to respond to this?
- Do you have processes in place for checking in with all participants after the DPR?
  - What will you do if a participant needs additional support afterwards?
- Do you have feedback processes in place, including mechanisms for proactively following up to receive feedback, to enable continuous improvement?

## GUIDANCE NOTE 3

### Participant readiness

#### Determining participant readiness

Readiness is determined through the process of engaging with both the survivor and the institutional representative in preparatory discussions led by the contact person and facilitator. This involves working with the participants to understand their motivations for participating and their understanding and expectations of the DPR process, including the possible benefits and limitations of a DPR for them.

Identifying participant readiness is a crucial component of achieving the *do no further harm* principle underpinning a DPR, as it ensures participants understand the scope and nature of their participation and are able to engage in the DPR through informed consent.

Throughout consultation with the survivor and institutional representative during preparation for a DPR, circumstances may arise where a contact person and/or facilitator considers there to be a risk to the wellbeing, health and safety of a survivor or institutional representative should they enter in or continue to participate in the DPR process.

#### Survivor readiness

Determining survivor readiness is entwined with preparing for a DPR, as a survivor's motivations and expectations of a DPR inform the determination of the format most appropriate for the DPR.

Considerations may include:

- What does the survivor want to achieve from a DPR?
- What are they expecting from the institution?
- Do they want the institutional representative to be particularly alert to something within their experience and its implications?
- What does justice and healing look like to them?
- What support does the survivor have?
- Has the survivor talked about what will assist them to be safe throughout the DPR?
- Has the survivor expressed any preferences in relation to the institutional representative – i.e. gender or attending in the institutional uniform?

Where any concerns exist about a survivor's readiness to safely engage in the DPR, the contact person should consider an alternative form of DPR that may be more suitable to the survivor's circumstances and needs, or delaying the DPR. This should be discussed and agreed to by the survivor.

Where a survivor indicates they are not engaged with support or therapeutic services, it may be appropriate for the contact person or facilitator to encourage the survivor to seek such support. Institutions may wish to consider exploring referral pathways that may be available to support survivors and ensuring contact persons are aware of how to assist survivors to access crisis helplines such as Lifeline and 1800 RESPECT. It may be appropriate

to delay the DPR until that support is established. This should be discussed and agreed to by the survivor.

If a contact person considers a survivor is not yet ready to participate in a DPR, the contact person should communicate this to the survivor, including the reasons they believe the survivor is not yet ready to participate. In such cases, if the institution has not already done so, consideration should be given to engaging a professional facilitator who can provide additional support or reasonable adjustments to help a survivor become ready. Alternative forms of DPR that may be more appropriate for the survivor's circumstances should be considered and offered to the survivor.

### **Institutional representative readiness**

Factors relating to the readiness of an institutional representative may include their:

- understanding of a DPR
- understanding of their role in a DPR
- ability to engage genuinely with the survivor, and
- professional background and training.

The institution must ensure that there is another suitable representative available to engage in the agreed form of a DPR with the survivor, should a representative for any reason not be ready to engage in a DPR.

### **Delaying or ceasing a DPR**

A DPR can be delayed or ceased at any point after the survivor has requested it. Any other participant in the process, such as the institutional representative or the survivor's support person, may also seek to delay or withdraw from the DPR process where they do not feel ready to engage.

A survivor may initially accept an offer of a DPR, but decide later, potentially numerous times, that they are unable to participate at the agreed time, need to delay, or fail to attend a preparatory meeting or a DPR meeting. Aligning with a trauma-informed approach, institutions should be flexible and understanding when considering how they can best support a survivor to become ready to participate in a DPR or to consider alternative arrangements. Institutions must attempt to reschedule or renegotiate arrangements for a DPR for the survivor as often as is reasonable. What is reasonable will have to be determined on a case-by-case basis. The institution must make reasonable efforts.

If the DPR is delayed or ceased by a person other than the survivor, the responsible institution must offer to resume the DPR process or seek to provide an alternative kind or method that can be undertaken without jeopardising the health or safety of the participants.

Institutions should support a survivor to become ready to engage in a DPR under the Scheme prior to the Scheme sunset date. If, despite efforts to support readiness, a survivor is not ready for a DPR prior to the Scheme sunset, institutions can consider providing a DPR in good faith outside of the Scheme. A DPR should not be provided to a survivor who is demonstrably not ready to participate safely.

## **Revisiting readiness**

A participant's readiness may change throughout the process of arranging a DPR, so a contact person should consider readiness factors on an ongoing basis.

A survivor considered as not ready to participate in a DPR should not be denied the opportunity to access a DPR in the future. The contact person should discuss with the survivor how they might become ready to participate in a DPR as well as agreeing to a timeframe for when the survivor's readiness can be revisited.

Circumstances where a survivor may be considered not ready to participate in a DPR include:

- The survivor is experiencing mental or physical health issues that impact on their capacity to engage in the process in a way that is considered safe for them and others. When these circumstances change, an institution should re-consider arranging a DPR, at the survivor's request.
- The survivor is assessed as having unrealistic or unattainable expectations of the DPR process, which do not align with what the participating institution can reasonably provide.

When an institutional representative is considered not ready to engage in a DPR, the institution should identify an alternative representative. This should not cause unreasonable delay to the DPR process. If the survivor has particular preferences for an institutional representative, whether to arrange an alternative representative who meets these preferences or wait for the chosen institutional representative to become ready should be agreed to through consultation with the survivor.

## Checklist: Participant readiness

- Have preparatory meetings occurred with all participants, including any support person(s) involved?
- What other components of redress has the survivor accessed?
- Have participants been provided with relevant information about the DPR, including their specific role in the process?
- Do the survivor's motivations and expectations of the DPR align with what may reasonably be achieved for them through the process?
- Is the survivor ready and able to participate in DPR in a way that is safe for them at this time?
- Have you explored local referral pathways and ensured relevant staff are aware of helpline numbers for providing to survivors as needed?
- Has the survivor identified what they need to participate safely, both in practical and psychological terms?
- Has the survivor nominated support people? These could be either personal or professional supports to support them before, during and/or after the DPR.
- Is the institutional representative ready and able to participate in DPR in a way that is safe for them and the survivor at this time?
- Has the institutional representative completed appropriate training to engage in DPR?
- Have all participants been given an explanation of what it means to provide their consent to participate, and have they provided written consent?
- Is the institutional representative aware of any possible requests for further action and considered the ability of the institution to fulfil the request?
- Have any potential conflicts of interests been declared and managed?
- Does the survivor have appropriate supports in place outside the DPR process to manage any concerns that arise before, during or after the DPR?
- Does the institutional representative have appropriate supports available to them before, during and after the DPR?
- Has the contact person advised and sought agreement/confirmation from all participants to the logistical arrangements of the DPR (i.e. time, place)?

## GUIDANCE NOTE 4

### Roles involved in a DPR process

#### Contact person

After a survivor accepts their offer of redress and requests a DPR, the Scheme provides them with the contact details for the institution's DPR contact person. The survivor initiates contact with the institution's contact person when they are ready to start speaking about and arranging their DPR. A contact person should provide a consistent point of contact for a survivor within the institution.

A contact person requires a combination of communication and administrative skills to liaise effectively with all participants and arrange a DPR to operate smoothly, such as:

- experience in providing trauma-informed care, or knowledge of trauma-informed care models
- an understanding of the challenges facing survivors, their support persons and institutional representatives
- strong interpersonal communication
- techniques for managing challenging interactions
- strong administrative skills, including record keeping and/or keeping case notes and managing logistical arrangements
- ability to interact effectively with senior executive to arrange a DPR, and
- strong time management skills and ability to manage multiple sensitive matters simultaneously with attention to detail.

An effective contact person may have formal qualifications and experience in fields such as counselling, victim support services and case management. It is important that the contact person is capable of communicating with survivors in a trauma-informed way to assist survivors to feel informed, empowered, safe and understood.

A contact person works with participants to:

- accurately identify the outcomes being sought
- identify the processes that can best achieve these outcomes, and then
- make arrangements to implement these processes.

The contact person's role includes:

- providing information to the survivor about the DPR process
- supporting the survivor to make an informed decision about whether and how best to participate in the DPR
- making the necessary administrative arrangements for a DPR
- considering the readiness of survivors and institutional representatives to participate in a DPR and preparing the participants to engage in the agreed form of DPR, and
- facilitating any appropriate follow-up actions as determined by the survivor and agreed to by the institution.

### **The contact person's role in preparing a survivor for a DPR**

A contact person plays a vital role in ensuring the institution provides a survivor with a meaningful DPR. Much of this work occurs in the preparation phase, during which the contact person should cover the following with the survivor:

- explain the aims of a DPR and the steps involved in the process
- identify the extent to which the survivor wants to engage with the institution, and ensure the kind of DPR chosen enables this level of engagement
- explain what the survivor can reasonably expect of the institution through a DPR and manage expectations
- discuss elements relating to participant readiness
- identify whether it is important for them to meet with a particular kind of institutional representative and make the DPR arrangements accordingly
- consult on the timing of preparatory meetings and the DPR
- explain the role of each participant in the DPR process
- determine if the survivor may request any further action
- determine if the survivor has preferences relating to symbolic factors, such as whether the institutional representative or other participant wears their uniform (or other ceremonial clothing), and ensure these are accommodated in the DPR, and
- identify any particular needs the survivor may have relating to logistical factors such as transport and accommodation, to attend the DPR.

In making arrangements for a contact person, institutions should also consider:

- appropriate back-up arrangements, should the number of DPRs requested be higher than expected or many requests occur simultaneously, and/or
- the types of cultural, gender or relevant characteristics survivors may prefer or request in a contact person.

While the contact person should be a representative of the institution, they should not be the institutional representative responsible for engaging in the DPR. They should only perform a facilitator role if they have the required, specialist skills and experience to perform this function effectively, and if they have the resourcing and capacity to do so.

### **Supporting a contact person**

Institutions must be mindful that staff dealing closely with survivors may experience vicarious trauma. Contact persons should have access to a support network, including a mechanism that allows them to de-brief about their experiences. Depending on the number of referrals an institution anticipates, it may wish to consider implementing a roster system to ensure contact persons are able to have a break from the role, and should ensure the contact person role is adequately resourced to cater to the volume of survivor contact.

### **Institutional representative**

The institutional representative should be officially authorised to participate in a DPR on behalf of the participating institution, and to acknowledge and take responsibility for the abuse on behalf of the institution.

The role includes:

- listening, hearing, acknowledging and responding to the survivor's testimony

- representing the institution in an official (not personal or private) capacity
- demonstrating organisational accountability
- learning and contributing to change in the institution, and
- executing and/or supporting agreed follow-up actions from the DPR meeting (if applicable).

See **Guidance Note 6: Considerations for institutional representatives** and **Guidance Note 7: Facilitating a DPR** for more information.

### **Support person**

The role of a support person(s) is to enhance the process of a DPR for the survivor by providing them with support to manage the stages of the process. This might include:

- making the initial contact with the institution to commence the DPR process (noting that survivors have to make contact themselves to discuss their readiness and preferences for the DPR)
- receiving information about the DPR and assisting the survivor to understand it and consider their preferences for the DPR, and
- providing emotional support for the survivor at any or each stage of the DPR, including being physically with them during the process.

The role of the support person is not to:

- speak for the survivor, in a way that lessens the survivor's own voice
- engage in adversarial debate with, or direct any personal hostility towards the institutional representative, or
- advocate during the DPR meeting for outcomes that are not within the scope of the DPR.

### **Who can be a support person?**

A support person can be a friend, family member or professional that a survivor has chosen to assist them as they navigate the DPR process. The support person typically has some part in the survivor's life story and is well placed to help the survivor derive meaning and manage any emotionally difficult aspects of their experience of engaging in a DPR. Some survivors may benefit from having a person of their cultural background attend their DPR to support a culturally safe environment for the DPR. The inclusion of any support person should be discussed with and agreed to by the survivor.

It may be possible that a survivor chooses another survivor to accompany them through the DPR, or a person who is under 18 years of age (i.e. a sibling, partner, child or friend). This decision should be discussed with the contact person and/or facilitator to determine both the appropriateness of the support person and establish the role of the support person prior to the DPR.

The contact person(s) and/or facilitator should support the participation of a young support person by ensuring they appropriately prepare the young support person for their involvement in the DPR process, including through discussing their readiness to participate. Care should be taken to ensure the pre-DPR or preparatory briefing sufficiently takes the

support person's needs and responsiveness to the content and situation into account to enable their safe participation in the DPR.

A survivor is also able to utilise Commonwealth-funded Redress Support Services to access a professional as a support person through the DPR process if they wish. A list of these services is at <https://www.nationalredress.gov.au/support>. It should be noted that where a survivor elects to have a professional support person under a Commonwealth-funded Redress Support Service, this forms part of their role and would not attract fees or salary costs for the participating institutions in these cases. However, additional costs associated with travel or accommodation of the support person would be met by the institution.

#### **Support for the support person**

The facilitator or contact person should provide the support person with information about the purpose of a DPR and how they can participate to best support the survivor during the DPR. A support person should be equipped or be briefed by the contact person on resources and information on vicarious trauma.

## GUIDANCE NOTE 5

### Considerations for participating institutions

#### **Determining the kinds of DPR your institution can engage in**

Participating institutions should consider what methods of DPR they are reasonably able to offer. Under the Scheme, there is no one prescribed method for delivering a DPR. This allows flexibility for both survivors and participating institutions, enabling them to agree on a form of DPR that suits both parties, taking into account:

- the experiences, size and nature of the cohort of survivors that may request a DPR from your institution
- your institution's context, including financial and staffing capacity
- the kinds or methods of a DPR your institution is able and equipped to engage in, and
- the skills and capacity of your institution's representatives who would be required to engage in a DPR.

#### **Considering alternatives to the standard DPR process**

Under certain circumstances, a direct face-to-face DPR meeting will not be practical or not desirable. In these circumstances, the institution in consultation with the survivor should work together to find the most appropriate format for the DPR.

Possible formats for a DPR that may occur under the Scheme include:

- providing a formal letter of acknowledgment, accountability and apology
- holding a group DPR meeting for more than one survivor
- providing records or information requested by the survivor, or
- visiting a particular site that may have symbolic meaning for a survivor.

It is important for your institution to determine its capabilities related to different types of DPR processes, while also ensuring you are able to be responsive to survivors' needs, to the extent possible, to achieve the most meaningful outcome for them.

#### **Requests for group meetings with institutions**

Under the Framework, survivors may request a face-to-face meeting with the institution in a group setting involving other survivors for whose abuse the Scheme operator has determined the institution to be responsible, if each survivor wishes the other survivors to be included and the institution agrees to the other survivors being included.

The institution must consider its capacity to undertake a group meeting with survivors, and should consider professional facilitation. This may involve more than one facilitator, depending on the size of the group to prepare participants for and convene the DPR. An institution may also consider the participation of more than one representative in a group DPR to provide for the possible diverse interests of the survivors in this setting. Institutions must only include additional representatives in a group DPR, where it is considered to do so would enhance the DPR for survivors and survivors agree to this.

### **Considering which kind of DPR is appropriate in each instance**

There are a range of factors to be considered in determining an appropriate form of DPR in each instance. There is a diversity of institutions participating in the Scheme, with various contexts and capacities for effective engagement through different formats. There is also a diversity in survivor needs, interests and circumstances. The needs and capacity of both the survivor and the institution to engage in particular forms of DPR should be assessed and determined on a case-by-case basis through close consultation between the survivor and institution, prior to any DPR occurring.

Institutions are only obliged to engage in a DPR once with a survivor under the Scheme. However, survivors may request and institutions may agree to engage in more than one format of DPR within a DPR process. For example, a meeting could be followed by: a letter of apology that confirms the meeting's content and/or resolution; a visit to a particular institution; or the provision of institutional records to a survivor.

Providing clear, timely and consistent information minimises a survivor holding unrealistic expectations on what the DPR may achieve for them. Before the DPR, the survivor and the participating institution should reach a shared understanding of what the DPR process will be, and what outcomes may be achieved. With this information, survivors should be able to make an informed decision on whether participation in a DPR is an appropriate activity for them.

As a general rule, the more complex a DPR, for example, where the survivor has complex needs or there are several participants involved, the more an experienced facilitator can help ensure that the participants are well prepared for the meeting and followed-up effectively.

### **Implementing administrative arrangements**

Institutions must develop administrative arrangements required to support the smooth and consistent implementation of the DPR process. These arrangements may vary depending on the kinds of DPR your institution can offer. Institutions should ensure their processes are open and accommodating, to the extent possible, when they engage with the survivor during the DPR process.

Some considerations include whether:

- Your institution has a website where survivors can access information relating to the types of DPR your institution is able to provide and/or how your institution arranges DPRs, and how survivors can provide feedback to the institution.
- Processes within your institution, particularly for arranging a DPR, are accessible and navigable for survivors.
- You have administrative processes to support arranging a DPR, such as a system for recording and storing relevant information that adheres to privacy principles and the requirements for obtaining, recording, disclosing or using protected information under Part 4-3 of the Act.
- You have a suitable, private space for contact persons to make calls to and take calls from survivors, noting that survivors may be concerned about the confidentiality of the information discussed and may be distressed during these calls.

- Your institution has adequate and accessible feedback and complaints mechanisms, and the capacity to respond to feedback and complaints in a way that upholds the principle of doing no further harm when corresponding with survivors.
- Your institution monitors the number of DPRs an individual representative participates in or places a maximum limit on the number of DPRs an institutional representative should engage in, to assist in minimising the exposure to difficult material and likelihood of a representative becoming complacent about engaging in the process.
- Your institution has supports available for contact persons and institutional representatives before, during and after the DPR, to ensure they are supported to manage any emotional responses they may have to the material they are exposed to through the DPR (including information about vicarious trauma).
- Your institution makes contact persons and institutional representatives aware of the supports available to them.

### Gaining and recording informed consent to participate

Prior to a DPR occurring, institutions should consider having the survivor, their support person(s) and the institutional representative who is to participate in the DPR, sign a written statement outlining their understanding of the DPR and giving their consent to participate in the agreed DPR.

It may be useful to include statements that demonstrate that the respective participants understand:

- participation is voluntary
- the purpose of and proposed format of the DPR
- their role in the DPR
- the role of others in the DPR, including a support person(s), institutional representative and facilitator as relevant
- the harm is undisputed and the survivor's testimony will not be questioned in the DPR
- engagement in the DPR will be respectful and genuine, with all parties behaving in a manner that upholds the principle of *do no further harm*, and
- parameters of confidentiality, unless agreements are made otherwise.

Agreements made between the survivor and institutional representative for other things to occur, for example, letters or other symbolic actions the representative may agree to, should also be recorded in as much detail as possible and be signed by both survivor and the institutional representative. See sample consent forms at **Attachments A, B and C**.

### Protecting privacy

Participating institutions are responsible for complying with the privacy provisions specified in the *Privacy Act 1988 (Cth)*, the *National Redress Scheme for Institution Child Sexual Abuse Act 2018*, (the Act) and any other relevant state legislation when handling personal information of a survivor.

Under the Act, a participating institution may obtain, record, disclose or use protected information for the purposes of participating in a DPR. Before disclosing or discussing

information relating to a survivor, institutions should consider the impact the disclosure might have on the survivor. Survivors should be provided with clear information on how their personal details will be used.

Under the DPR Framework, every aspect of the DPR is confidential unless:

- all participants agree otherwise, or
- an actual or potential threat to human life, health or safety is revealed in the course of giving the DPR.

### **Civil liability**

Survivors must sign an acceptance document to access any elements of redress under the Scheme, including a DPR. On signing the acceptance document, survivors are no longer able to pursue any civil litigation against a participating institution found responsible for their abuse.

Any statement of acknowledgement, regret, or apology, made by or on behalf of the participating institution by a representative in the context of a DPR is not an admission of liability. This ensures that institutional representatives can acknowledge the abuse suffered during the survivor's time at the institution and offer a genuine apology.

### **Costs associated with a DPR**

Under the DPR Framework, the responsible institution must cover costs associated with a DPR. These costs may include, as relevant:

- reasonable travel expenses (for the survivor and their support person(s) to attend preparatory meetings and/or a DPR meeting)
- venue or room hire
- arrangements for ceremonies, attendance at a particular site, and/or
- an independent facilitator.

## **Working with a survivor focus: transparency, clarity and consistency**

### **Ensuring effective initial contact with a survivor**

It is important that survivors feel as comfortable as possible during their first contact with the institution to initiate the DPR process. Survivors may need several interactions with your institution before committing to DPR arrangements, as these interactions are an opportunity for building trust in the institution and becoming confident that a DPR with this institution can provide them a meaningful outcome. Institutions must be responsive to this and support the survivor to engage in making DPR arrangements at their pace.

For many survivors, having contact with the responsible institution may be challenging. Having appropriately skilled staff in the contact person role will enable the effective engagement of these survivors.

It is also important for institutions to consider the arrangements under which they are participating in the Scheme, and how these may need to be communicated to survivors in any initial discussion for clarity. For example, institutions may be participating in the Scheme as part of a participating group, which may mean that the contact person for arranging a

DPR belongs to an institution that appears to a survivor to be different from the one they consider responsible for their abuse. Institutions should consider how to communicate sensitively about this with survivors, to clarify and alleviate any concerns.

### **Providing flexible options**

Some survivors may feel they can benefit from a DPR involving direct engagement with an institutional representative, including by participating in a face-to-face DPR meeting. Others may prefer to engage with the institution indirectly, arranging for their DPR to be a personal letter, including an apology or other symbolic gesture, where requested and appropriate.

Institutions should take all reasonable steps to provide options for a DPR that accommodate a range of survivor preferences. Institutions must ensure they have the relevant skills and training to provide a DPR in a meaningful and effective way.

### **Sharing information**

Institutions should design internal processes and arrangements to make a DPR as accessible and as user friendly as possible for the survivor. Clarity and transparency in sharing information about DPR is crucial in safely engaging survivors in the process.

Participating institutions should always be clear about the extent they are able to provide a DPR with a survivor. This includes the type of DPR (e.g. meeting, letter, public apology), any constraints on logistics (e.g. limitations on distance of travel for institutional representatives) or the type or number of institutional representatives available for participating in a DPR (e.g. background information, gender or cultural background). Participating institutions should ensure the methods of DPR they offer are achievable and that they will be able to engage successfully through these methods.

### **Diversity amongst survivor groups and appropriate approaches to a DPR**

Survivors represent a diverse group of people and possess differing interests and motivations for engaging in a DPR. Importantly, they will also have differing needs, which must be met to enable their participation in a DPR that is meaningful, accessible and safe for them. These needs may relate to various characteristics, such as an individual's age, gender, sexuality, physical or psychosocial disability, mental health, Aboriginal and/or Torres Strait Islander background, cultural and linguistic background, or identifying as part of a particular group such as Stolen Generations, Child Migrants or Forgotten Australians.

Participating institutions should seek to accommodate the particular needs of individual survivors throughout their DPR process. Some aspects for institutions to consider for ensuring the diverse needs of survivors can be met through the DPR process are outlined below. Possessing an understanding of these factors will enhance the DPR process, by equipping your institutional representatives to respond holistically to survivors.

### ***Have an understanding of historical context***

To provide a meaningful DPR, it is important that your institutional representatives understand the broader historical context within which the systemic abuse of certain marginalised groups occurred, and the role your institution played in this context. This includes understanding if there are particular survivor groups likely to be overrepresented

among the applicants for which your institution is likely to be responsible under the Scheme, and considering the needs of these groups when developing your DPR processes.

### *Understand intersecting disadvantage*

For many, their experience of abuse is intrinsically tied to their experience of being part of a marginalised and disadvantaged cohort. Institutions should understand this and make efforts to ensure the DPR process does not replicate this disempowerment or reflect discriminatory views or practices.

### *Ensure processes are accessible*

Ensuring accessibility includes considering the appropriateness of the physical environment where the DPR will be held as well as the way the DPR is conducted, so that those engaging in the DPR are able and comfortable to participate fully and safely. Accessibility is a broad category, and encompasses considerations such as:

- ensuring the physical space where the DPR is held is accessible for people with physical disabilities (i.e. there are access ramps, elevators, etc.)
- ensuring the language used during a DPR process is appropriate and understandable for participants with intellectual disability or impaired cognitive function
- including additional rest breaks during meetings for people who may need this, such as those with an acquired brain injury or psychosocial disability, and
- ensuring a NAATI credentialed interpreter is present for those for whom English is not their preferred language.

### *Creating culturally sensitive DPR processes*

For a meaningful DPR, the process must be conducted in a way that is culturally sensitive, appropriate and meaningful. Cultural sensitivity can include a variety of elements and considerations, including who is involved in the process and present in meetings, the physical environment and place where the DPR occurs, and the importance of hospitality (i.e. serving tea and coffee, etc.) during face-to-face engagement.

Institutions should consider seeking specialist advice from the relevant community about how to make their DPR processes culturally appropriate and meaningful. Institutions may also consider procuring specialist expertise for the DPR, such as by hiring a facilitator from the survivor's community or cultural background, to enable a culturally appropriate perspective to inform the whole process.

Resources such as the Healing Foundation's *Restoring our Spirits, Reshaping our Futures*<sup>3</sup> provide useful guidance on implementing a culturally appropriate trauma-informed approach.

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<sup>3</sup> Healing Foundation's *Restoring our Spirits, Reshaping our Futures* report can be found at [https://healthinonet.ecu.edu.au/uploads/resources/31872\\_31872.pdf](https://healthinonet.ecu.edu.au/uploads/resources/31872_31872.pdf). Additional resources may be found at Healing Foundation's website [healingfoundation.org.au](http://healingfoundation.org.au).

### ***Flexibility***

Accommodating particular needs may require additional flexibility to be built into your institution's DPR arrangements. It may include selecting institutional representatives with particular skills, training, cultural backgrounds or personal characteristics, to accommodate particular survivor preferences and needs. It may also involve consulting with relevant community groups to shape your DPR practices, or seeking additional training to ensure institutional representatives are adequately prepared to engage in a DPR with particular cohorts in an informed and sensitive way.

### ***Effective facilitation***

Facilitators can assist an institution to ensure individual DPRs are delivered in a way that is appropriate for the survivor. In a facilitated DPR, the facilitator should work with the survivor to understand their motivations, interests and needs. The facilitator should then brief the institutional representative on these matters and guide them in how they may best respond to the individual through the DPR. In matters where a facilitator is not engaged, the institution's contact person should work with the survivor and individual representative in relation to this.

The Scheme Operator will make further information available to participating institutions providing specific guidance on considerations for engaging in a DPR with particular marginalised or overrepresented cohorts.

### ***Special circumstances***

There are some circumstances that may affect DPR arrangements, as outlined below.

#### ***Incarcerated survivors***

Incarcerated survivors are able to apply to the Scheme in exceptional circumstances. Should they request a DPR in their acceptance letter, a participating institution will need to consider how they may be able to engage in a DPR in such circumstances.

#### ***Survivors residing overseas***

Some survivors who request a DPR may currently live overseas. In these circumstances, the participating institution will need to work with the survivor to determine the best format for the DPR.

#### ***Child applicants***

Under the Scheme, persons who will turn 18 years of age within the life of the Scheme are able to apply. However, their application will not be finalised, with no determinative decisions made until they reach 18 years. Until this time, they will not be paid redress or be able to sign an acceptance document. As such, participating institutions cannot engage in a DPR with any persons aged under 18.

#### ***Deceased survivors***

Under the Scheme, a DPR is designed for the survivor. However, there may be circumstances where a survivor will pass away before having the opportunity to participate

in a DPR. In these circumstances, it is recommended that institutions are responsive to family members who follow-up the request and work with them to offer a way forward.

### **Required timeframes for delivering a DPR**

A survivor can make contact with the participating institution for the DPR from any time after signing the acceptance document to the Scheme sunset date.

Once initial contact between the survivor and the institution to request a DPR has been made, the institution should endeavour to organise and arrange a DPR as soon as practicable, taking into account the survivor's readiness for engagement in a DPR.

There may be instances where a survivor:

- declines a DPR in the acceptance document and later changes their mind and requests one (directly through the institution)
- does not initiate contact before the Scheme sunset day
- is unresponsive to attempts from the participating institution to follow-up for arrangements before the Scheme sunset day
- notifies the institution that they wish to withdraw from the DPR after requesting a DPR and initiating contact, or
- has already received a DPR from the institution under the Scheme.

If any of the above occurs and/or the Scheme sunset date passes, the participating institution will no longer be compelled under Scheme legislation to undertake a DPR with the survivor.

Participating institutions are encouraged to be supportive of survivors and should operate in good faith, understanding they are able to undertake a DPR with a survivor outside the Scheme if they wish to do so.

## **Managing exposure to trauma**

### **Vicarious trauma**

Vicarious trauma is where a professional experiences a transformation in their sense of self or their internal experience as a result of cumulative, empathetic engagement with the 'traumatic material' for the people with whom they are working. Vicarious trauma is a normal, but preventable, response to repeated exposure to traumatic material. It relates to concepts such as burnout, emotional exhaustion and compassion fatigue, but is different in that the affected person exhibits signs of trauma.

Being involved in the DPR process is likely to result in exposure to traumatic material. However, institutions should remember that a DPR, and the Scheme itself, are focused on the needs of people who have been abused and understand the importance of the opportunity a DPR presents for sharing their story.

Furthermore, exposure to traumatic material does not have to result in vicarious trauma, provided those involved in a DPR are well supported and working conditions are appropriate. While DPRs are likely to be emotional engagements and survivors' stories may

be distressing, this distress will normally pass with appropriate debriefing and support. There are many ways an institution can create the conditions to prevent vicarious trauma in their staff and enable learning and growth from their engagement with survivors through a DPR.

### **Preventing vicarious trauma**

An institution's policies and practices, both within the context of administering a DPR and more broadly, can play an important role in preventing vicarious trauma in staff. Institutions should consider the following to prevent vicarious trauma for staff who are dealing with traumatic materials.

#### ***Ensure appropriate and diverse case loads***

The level of exposure to traumatic material is a predictor of vicarious trauma levels. As such, institutions should ensure the number and complexity of DPR cases a contact person or institutional representative is responsible for at any given time or within a particular time period is appropriate.

For example, institutions should ensure the DPR contact person role is adequately staffed, so that workloads of contact persons are reasonable and allow contact persons time for supervision, support and debriefing. Likewise, the exposure of institutional representatives to involvement in DPR cases should be limited to an appropriate and manageable number. An institution can ensure, to the extent possible, both contact persons and institutional representatives are involved in a diverse range of DPR cases, such as with survivors of different ages, genders and experiences, to avoid excessive, repeat exposure to a specific group or to significant trauma material.

#### ***Effective supervision***

Effective supervision for contact persons is essential for preventing and healing vicarious trauma. This supervisory relationship should enable trust and transparency and create a safe space for the contact person to share any fears and concerns about their work.

It is ideal for the supervisory role to be fulfilled by someone with a clinical or practitioner background, as it is important that the supervisor is able to recognise and respond appropriately to any signs of vicarious trauma identified through supervision discussions. Some institutions may need to source this skill set externally, such as through their Employee Assistance Program (EAP).

This supervision function should be separate from staff performance evaluation, as contact persons may otherwise be reluctant to share concerns. It may also be separate from and additional to line management supervision, particularly where the contact person(s) belong to a larger team with a line manager who does not have a clinical background.

#### ***Access to debriefing and peer support***

Contact persons and institutional representatives need to have access to avenues for regular debriefing and support from peers in their organisation, where they can discuss their engagement with specific traumatic material in a semi-structured environment. This assists

those who have been exposed to traumatic material to process it and enables them to feel supported in the experience.

### ***Produce a safe work environment***

Workplace culture is a crucial factor in preventing, or producing, vicarious trauma. Where staff feel supported and valued within the organisation and safe at work, they are better protected against vicarious trauma. A positive workplace culture includes encouraging self-care activities and ensuring that organisational procedures or cultures facilitate, rather than block, opportunities for chosen self-care routines.

### **Creating change through a deeper understanding – vicarious resilience and insight for institutions**

Exposure to people who have experienced trauma does not have to result in vicarious trauma. Vicarious resilience can be gained through engagement with another person's story of strength and efforts towards recovering from trauma.

Genuinely engaging with a survivor by listening and responding to their story can be rewarding. Building a mutual understanding of the abuse and its impacts enables deeper insights and empathy between participants.

Engagement in a DPR, while challenging for the individuals involved, can also assist both individuals and institutions to learn and can prompt growth and cultural change. Institutions should ensure learning is enabled through the DPR process, by:

- creating space for reflection for institutional representatives
- implementing avenues for feedback (formal and informal) on the experience, and
- considering how these learnings could be accommodated in changes to the institutional culture and practices.

### **Symptoms of vicarious trauma**

It is important to be aware of vicarious trauma and to recognise the symptoms. There are a range of national training providers that hold workshops about vicarious trauma should you wish to learn more about it.

Vicarious trauma involves a change in a person's beliefs about themselves, the world, and other people within it. This is known in the psychological field as changes in their 'cognitive schema,' and may involve feeling:

- that the world is no longer a 'safe place' for themselves and/or others
- helpless in regard to taking care of themselves or others
- their personal freedom is limited, and
- alienated, or that their work sets them apart from others.

Vicarious trauma may consist of short- or long-term effects and may continue after the exposure to traumatic material has ended.

The symptoms of trauma, including vicarious trauma, vary across individuals and are culturally diverse and specific. Trauma reactions are generally divided into three categories.

- Intrusive reactions: dreams/nightmares, flashbacks, obsessive thoughts, physiological reactions and other persistent re-experiencing of the traumatic event.
- Avoidant reactions: general numbing in responsiveness and avoidance (particularly of things related to the traumatic material).
- Hyper-arousal reactions: hyper-vigilance and difficulty concentrating.

Some manifestations of these symptoms could include:

- anxiety or depression
- de-personalisation
- feeling overwhelmed by emotions such as anger and fear, grief, despair, shame, guilt
- increased irritability
- feeling of reduced personal accomplishment and low self-esteem
- procrastination
- having no time or energy for self or others
- increased feelings of cynicism, sadness or seriousness
- an increased sensitivity to violence and other forms of abuse, for example when watching television or a film
- avoiding situations perceived as potentially dangerous
- feeling profoundly distrustful of other people and the world in general
- disruptions in interpersonal relationships
- sleeping problems, and/or
- substance abuse.

Further information on vicarious trauma can be found at the Australian Institute of Family Studies website, <https://aifs.gov.au/publications/feeling-heavy/what-vicarious-trauma>.

## Checklist: considerations for participating institutions

- Decide on the kinds of DPR your institution will offer, taking into account your institution's context and needs of the survivor cohort.
- Develop a plan for the process of engaging in the chosen kinds of DPR, with flexibility built in to accommodate survivor needs and preferences.
- Ensure that your institution is equipped to receive the contact from survivors in a trauma-informed way, through either existing or new specialised staff.
- Ensure that your institution understands vicarious trauma and has mechanisms in place to support staff exposed to traumatic material while participating in DPRs.
- Ensure your institution has relevant administrative processes in place, such as:
  - a website or webpage for DPR
  - accessible processes
  - administrative processes for arranging a DPR
  - accessible and responsive feedback and complaints mechanisms, and
  - supports for institutional representatives.
- Consider how all DPR processes can be made as clear and transparent as possible.
- Consider engaging a facilitator, and a NAATI credentialed interpreter when required, including funding and arrangements.
- Consider relevant privacy protections, in line with legislative requirements.
- Consider how your institution's DPR can be flexible for survivors in special circumstances.

## GUIDANCE NOTE 6

### Considerations for institutional representatives

The success of a DPR is reliant on meaningful engagement by the institutional representative. A DPR is most likely to be both a therapeutic experience for the survivor and a genuine learning experience for the organisation when the institutional representative:

- acknowledges and validates the survivor's experience
- acknowledges the organisation's accountability for what happened
- provides the survivor with important information about the time they spent in their institution
- provides the survivor with important information about steps the institution or organisation has taken and is taking to protect children from child sexual and other forms of abuse, and/or
- draws lessons from the survivor's experience to support further institutional reform.

An adequate DPR will include all the components of an effective apology - recognition, responsibility, reasons, regret, and reparation.

#### **Who should represent the institution?**

The institutional representative should be a senior official authorised to participate on behalf of the participating institution, and to acknowledge and take responsibility for the abuse on behalf of the institution.

Factors in selecting appropriate institutional representatives to participate in a DPR could include:

- professional background
- experience within the institution
- current role, seniority and authority to influence in the institution
- understanding of the Scheme
- ability to demonstrate empathy and engagement, and
- a genuine desire to participate.

An institutional representative's seniority in the institution is important for creating the conditions for a meaningful DPR to take place, as their involvement demonstrates that the institution is treating the DPR as important and ensures the representative can genuinely speak for the institution in providing an apology. In addition, a senior representative is likely to be in a position to implement important lessons from a DPR across the institution.

A DPR requires institutional representatives to engage with a sense of both authority and empathy in order to work with people, and to help the process of resetting relations between the survivor and the institution. Institutional representatives need to feel it is acceptable to react naturally and this should be endorsed by the institution. For representatives of institutions, the process of engaging with survivors by offering and providing a DPR enables a greater understanding of survivors' experiences and the impact on survivors of institutional child sexual abuse. This can, in turn, promote institutional cultural change.

### **Survivor choice in institutional representatives**

Survivors should have some choice in the representative from whom they engage in a DPR with. Where possible, at least one male and one female institutional representative should be available for a survivor to choose. Consideration should also be given to have representation of different cultural backgrounds and differentiation by other relevant characteristics.

Institutions should clearly communicate their internal arrangements of institutional representatives to the survivor.

If a survivor is not satisfied with the internal arrangements, participating institutions should take reasonable steps to make alternative arrangements for the survivor, should they not be comfortable with the representatives the institutions have nominated for their DPR.

### **Preparing institutional representatives to engage in a DPR**

Institutional representatives should be well supported and provided with enough information to engage effectively in the DPR. Institutional representatives should be provided with training prior to becoming an institutional representative and briefing prior to each case.

#### **Training for institutional representatives**

The institution should ensure institutional representatives have access to training, development, professional supervision and support to engage in a DPR. Training and development should also address cultural competency and vicarious trauma.

Training may come from:

- organisations with extensive experience and knowledge in trauma-informed care
- consultants with specialist knowledge or experience, or
- other institutions that have previously delivered similar programs and are competent in this field.

The institutional representative should undertake appropriate trauma-informed training and/or seek advice from a trained facilitator. That training and/or advice should address:

- the nature of trauma experienced by survivors of child sexual abuse
- principles and techniques for listening meaningfully and responding appropriately
- the nature and principles of a meaningful apology
- cultural practices, awareness and sensitivity
- the importance of not requesting forgiveness as part of an official apology, and
- the nature of vicarious trauma.

#### **Preparing for specific DPRs**

The institution will receive a copy of the survivor's Scheme application form from the Scheme Operator when a survivor requests a DPR. Information on the survivor's experience should be provided to the institutional representative by the contact person prior to engaging in a DPR, to ensure meaningful engagement can be achieved. Relevant information may include a written account of the survivor's experience, the survivor's expectations of the

DPR, sensitivities to any symbolic factors and the names of the DPR participants (including the support person, if applicable).

The institutional representative should use this information to prepare for a meaningful engagement in a DPR.

### **Support for institutional representatives**

Institutions have a duty of care to all participants before, during and after the DPR. Institutions should give institutional representatives the opportunity to debrief about their DPR experiences. Information should be provided to them about their options for seeking additional support, such as access to counselling. The institution should also ensure that representatives have access to support in the event that they experience vicarious trauma as a result of their participation in the DPR.

It is suggested that institutions consider outlining the maximum DPR cases each representative can participate in for their internal policies. Limiting the number of DPR cases per representative can reduce the risk of representatives experiencing vicarious trauma. Previous similar programs recommended a maximum of five cases per institutional representative.

Institutional representatives should be supported to attend a formal induction session prior to engaging in any DPR processes, where they are provided with information about the Scheme and the role of DPR within it, as well as how institutional representatives should best engage in a DPR to ensure its success.

Institutions may consider connecting their institutional representatives, to provide an opportunity for them to draw on each other's experience to support their engagement in a DPR. The Scheme will also establish a Community of Practice to support peer learning.

Part of the role of the contact person and the facilitator, where relevant, is to support institutional representatives by answering questions and addressing concerns before a DPR and providing an opportunity to debrief afterwards.

### **Checklist: Considerations for institutional representatives**

- Has your institution nominated institutional representatives with appropriate characteristics and with consideration of diversity?
- Have the institutional representatives received appropriate training?
- Do the institutional representatives have an understanding of the DPR process?
- What mechanisms does your institution have in place to support institutional representatives?
- Has your institution considered how many DPRs each institutional representative should be allowed to engage in, and is this outlined in internal policy?
- Do appropriate people in the institution have an understanding of how to identify vicarious trauma, which may present in institutional representatives and contact person(s)?

## GUIDANCE NOTE 7

### Facilitating a DPR

Participating institutions may engage the services of a professional facilitator to prepare participants for and convene DPRs. A facilitator can assist in achieving a successful outcome for both the survivor and institution, as:

- Their independence provides assurance to both the survivor and the institution that the process will operate fairly.
- Their professional skills ensure the process operates in accordance with best practice restorative based and trauma informed principles.
- The power imbalances characteristic of child sexual abuse are less likely to be reflected in the content or manner of the DPR.

Professional facilitation is likely to be particularly helpful in those cases where there is a vulnerable survivor, a DPR is attended by more than one survivor, more than one institutional representative (if appropriate and requested), and/or more than one support person.

#### Responsibilities of a facilitator

A facilitator's responsibilities may include, but are not limited to:

- working with participants to prepare for the DPR meeting
- monitoring the readiness and ongoing suitability of all DPR participants
- advising the contact person of any issues or concerns in relation to any of the participants capacity to safely participate in a DPR process
- explaining and defining the parameters of the participants' consent to participate
- obtaining written, informed consent from all participants prior to conducting the DPR meeting
- facilitating the DPR meeting, including ensuring the survivor is able to share their experience effectively to the desired extent and that the institutional representative is able to acknowledge this account
- recording any agreement for further actions to occur
- checking-in with DPR meeting participants after the meeting (see **Guidance Note 9: Follow-up after a DPR** for further information)
- obtaining, recording, disclosing and using protected information required for facilitating the DPR in accordance with requirements under Part 4-3 of the Act, and
- returning any DPR documents to the contact person once the DPR process concludes.

Facilitators, by virtue of being independent, are not a representative of the institution. As such, they should not take on the contact person function for arranging the DPR. They should also not take on the institutional representative's role in the DPR meeting of acknowledging the survivor's experience and/or apologising for the harm caused.

#### Choosing an appropriate facilitator

DPR facilitators are likely to have qualifications and experience in fields such as counselling, victim services, mediation or group facilitation. DPRs are most likely to be facilitated to a

high standard where a professional facilitator has been selected in a state-wide or national process and standardised training has been delivered by experienced trainer-facilitators.<sup>4</sup>

For example, in seeking facilitators for restorative engagement, the Office of the Commonwealth Ombudsman's Defence Force Ombudsman Restorative Engagement Program undertook a tender process for a large cohort of facilitators throughout Australia to run their restorative conferences. As part of the tender process, candidates went through an initial paper-based skills assessment process and then those who were successful attended an induction program. The induction tested facilitators on being able to demonstrate their understanding of the model and their ability to adapt their existing skills to its specific requirements.

Facilitators for DPRs should demonstrate:

- They understand DPR principles and know how to apply them in practice.
- They possess and demonstrate the key skills required to facilitate a DPR in accordance with requirements of the Scheme.
- They understand the administrative process and requirements (outlined by the institution) associated with facilitating a DPR under the Scheme.
- They possess and demonstrate the key required attributes as follows:
  - They must be able to display empathy appropriately. This includes demonstrating an ability to provide empathetic and compassionate interaction with all participants throughout the DPR process.
  - They should appear calm throughout all interactions with participants. It is essential the facilitator is able to appear calm when faced with intense emotion, situations of potential conflict or other instances where participants themselves may not be calm. All participants should feel both reassured and supported by a facilitator who appears calm in what could be an extremely emotionally challenging experience for many.
  - They should display appropriate authority throughout all interactions with participants. This includes the ability to maintain the focus of the DPR, manage any difficult moments in the engagement, and work with participants to address any power imbalances.
  - They must convey respect to all participants and institutional staff.
  - They must work transparently so that all parties are clear about all aspects of the DPR process.
  - They are equipped to handle sensitive issues with discretion. The facilitator should be mindful of each individual survivor's case, and should handle details with the appropriate level of discretion.

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<sup>4</sup> Key examples are the national facilitator selection process conducted in 2016 by the Office of the Commonwealth Ombudsman. This is an open panel arrangement for Commonwealth, State and Territory institutions and operates on a fixed fee basis. Details about accessing the Facilitator Panel can be obtained from: [procurement@ombudsman.gov.au](mailto:procurement@ombudsman.gov.au)

## GUIDANCE NOTE 8

### Providing an effective apology

Effective apologies are achieved where the participants have gained a shared understanding of the harm and its impacts. Providing an apology without this is often meaningless and ineffective for the survivor.

An effective apology recognises the experience of the survivor and has the power to:

- restore dignity and reputation
- provide vindication or a sense of justice, and
- provide peace of mind.

Apologies are especially powerful when the giver accepts ownership of a problem, assuring recipients that they were not at fault. The giver of the apology should not request forgiveness, as this shifts the focus of the apology away from addressing the needs of the survivor.

#### Components of an effective apology

##### Recognition

Survivors may want the institution, through the representative engaging in a DPR, to name what went wrong and the harm done.

To effectively recognise the survivor's experience, the contact person or facilitator should discuss with the institutional representative how they can ensure that they listen meaningfully to the survivor's experience and formally acknowledge the harm done to validate their story. This enables meaningful and holistic recognition from the institutional representative.

##### Responsibility

A demonstration from the institution that it has heard the survivor and considers itself accountable for the harm is a key component of taking responsibility. The institutional representative will need to prepare for how best to acknowledge the survivor's experience and demonstrate meaningful accountability for what happened, and to speak to what the institution has put in place to prevent and better respond to abuse.

##### Reasons

Institutional representatives should be prepared to demonstrate, having heard the survivor's story, that they understand the reasons the abuse happened and its ongoing implications. Reasons are the context around the abuse: the nature of the institution's culture and practices that allowed the abuse to occur, or enabled abuse to go unreported and unaddressed. Importantly, these reasons should never include anything that places blame or responsibility on the survivor – no instance of abuse or its surrounding circumstances is ever the child's fault. Discussing the reasons for the abuse assists in drawing out the lessons the institution can take from the survivor's story, and enables the survivor to speak about the contextual factors of their experience and trauma. Neither the

institutional representative nor the facilitator should ever frame any reasons discussed in a DPR as a reasonable or acceptable justification for the abuse.

A contact person or facilitator should work with a survivor to prepare them to safely speak to their experience to the extent they wish such that the institutional representative can understand what happened, how it happened, what the consequences have been, and what lessons can be drawn from their experience. A narrative account of the survivor's experience can enable this.

The contact person or facilitator should discuss with the institutional representative how they can best respond to provide the survivor with an acknowledgement of the institutional failures that led or contributed to the harm and how these have been rectified to prevent future abuse and what lessons can be drawn from their experience for the institution. It is important to note the provision of formulaic or prescribed responses risks survivor disengagement from the DPR process.

### **Regret**

Expressions of regret and apology work best when they reflect the survivor's own language to recognise the survivor's experience and its ongoing implications.

The contact person or facilitator should work with the survivor and with the institutional representative to ensure both have a shared understanding of the nature of apology, how it can and should be provided and what they hope it will achieve.

An institutional representative may:

- apologise, recognise or acknowledge personally, as an individual who has heard a profoundly moving account, and/or
- apologise, recognise or acknowledge to a survivor (and their support person) in their current official role.

The contact person or facilitator should work with the survivor to identify whether there are specific issues they want addressed, or to know more about. For example, survivors may want to discuss what is being done to rectify the issues that led to their abuse.

The contact person or facilitator will work with the institutional representative on how best to provide the survivor with important information about the steps the institution has and is taking to protect children from institutional child sex abuse, and draw lessons from the survivor's experience to support further institutional reform. A contact person or facilitator should work with all participants to consider additional actions to help reset relations, as a core element of reparation and a DPR.

### **Reparation**

Reparation involves allowing a survivor to articulate the outcomes they are hoping to achieve and how these outcomes might best be achieved. Discussing these topics constructively with a survivor and their designated support person(s) requires skill in the trauma-informed use of appropriate language.

Survivors may want to discuss what is being done to rectify the issues that led to their abuse. The contact person or facilitator should work with the survivor to identify whether there are specific issues they want addressed, or to know more about.

## GUIDANCE NOTE 9

### Follow-up after a DPR

#### Checking-in with participants

It is advised that the contact person, or facilitator where relevant, follows up with all participants following a DPR. This should be done informally directly after a DPR, and then again 3-4 days afterwards.

Through this follow-up process, the contact person or facilitator can determine whether participants have adequate support to manage any emotional responses to issues raised during the DPR and whether they are satisfied that the DPR achieved the desired outcomes. If it did not, this is an opportunity to seek feedback and/or complaints through relevant institutional processes.

#### Further actions

It is recommended that institutions develop procedures and policies for whether follow-up actions will be offered and how to manage this, understanding the importance of managing survivors' expectations. If there are instances where follow-up actions are agreed between DPR participants, it must be an agreement made directly between the survivor and institutional representative.

The Scheme does not prevent or limit any agreements between participants for further actions beyond the DPR meeting and process, however, the Scheme Operator and facilitator will have no role or responsibility in follow-up actions.

Institutions, via the institutional representative involved in a DPR, should only agree to actions that they have the authority to agree to and can ensure will be delivered. See further detail in **Guidance Note 2: Core elements for achieving a meaningful DPR** and a sample record of further action(s) form at **Attachment D**.

#### Feedback and complaints mechanisms

Participating institutions are required under the DPR Framework to:

- ask survivors for feedback following their DPR
- provide details to survivors of avenues for providing feedback to the institution on the DPR
- have a process for managing complaints relating to a DPR
- communicate this process and make it available to survivors, and
- make reasonable efforts to consider, and be responsive to, complaints.

Participating institutions should ensure survivors, facilitators, support persons and institutional representatives have the opportunity to provide feedback on their experience participating in the DPR process. This feedback may relate to the quality of the DPR, timeliness, options for types of DPRs, appropriateness of the institutional representatives, ability of the facilitator, or any other aspect of the DPR process.

Feedback can involve quantitative data and qualitative information collected in written form, and new knowledge generated in facilitated forums. It might also be helpful for internal reviews to allow facilitators or support persons, if they were present, to provide feedback on their experiences.

Institutions should consider giving survivors the opportunity to include a record of their experience in the institution's official records if they wish to do so.

### **Institutional obligation to provide avenues for survivor feedback and complaints**

Participating institutions must make internal feedback and complaints mechanisms available to survivors who have participated in a DPR. The participating institution should advise survivors of their avenues for providing feedback or complaints to the institution and to the Scheme Operator. These avenues should include options for providing anonymous feedback.

### **Checklist: Follow-up after a DPR**

- Has the contact person or facilitator checked in with the survivor and institutional representative after the DPR? They should ask them about:
  - Their wellbeing – let them know it is normal to feel low initially after a DPR, but if this feeling persists, they should seek help.
  - What have been the impacts of participating in a DPR for them so far?
  - Do they have any queries or concerns?
  - Do they have access to the support they need? If not, you can provide them with the link to the Scheme's support services at [www.nationalredress.gov.au/support](http://www.nationalredress.gov.au/support).
  - Have they been provided with contact details to provide comments, compliments or complaints about a DPR to the institution and to the Scheme? If not, now is a good time to provide this information.
  - If there were any agreed further actions, have these been followed up, or is there a plan to do so?
- Address any feedback received, and consider it when reviewing internal DPR processes.

## GUIDANCE NOTE 10

### Reporting and evaluation

The Commonwealth Minister for Social Services is required to provide an Annual Report on the operation of the Scheme to the Parliament. Reporting from participating institutions on DPRs will inform this. Regular reporting on DPRs will help to achieve consistent institutional participation in DPR and ensure DPR is an effective and meaningful component of redress.

#### Reporting to the Scheme Operator

Participating institutions are legally required to report annually to the Scheme Operator on details relating to DPRs in that financial year. Your institution will be asked to provide an annual report on DPRs via [DPRAnnualReporting@dss.gov.au](mailto:DPRAnnualReporting@dss.gov.au) using the template provided by DSS. This report will cover each financial year.

Reporting will include capturing the:

- number of requests for DPRs made to the institution during the year
- number of DPRs given by the institution during the year
- types of DPR requested of the institution during the year
- types of DPR given by the institution during the year, and
- time between each request made to the institution for a DPR and its delivery.

Reporting will help identify and address any emerging issues with DPRs in institutions. It is important that participating institutions are consistent in their delivery of DPRs to ensure quality outcomes for survivors.

#### Internal mechanisms

Participating institutions are encouraged to seek feedback on DPRs from survivors, their support person(s), institutional representatives, facilitators and or contact person(s) through internal mechanisms to assist in reviewing and evaluating their institution's DPR engagement and practices.

#### Checklist: reporting and evaluation

- Does your institution have appropriate internal mechanisms to ensure you capture data relevant to DPRs (as per legislative requirements) and record it accurately?
- Does your institution consider and incorporate feedback on DPRs into your DPR processes, through a practice of continuous improvement?
- Is your institution sending DPR reporting to the Scheme Operator in a timely manner?

## Glossary

Acceptance document	The acceptance document is a form stating the relevant individual accepts the offer of redress, and releases and forever discharges each of the institutions and officials listed on the document from all civil liability for abuse of the individual within scope of the Scheme.
Admission of liability	A statement made by a person or institution stating they are legally responsible for something that has harmed someone.
Annual report	A yearly report prepared for the Parliament on the operation of the National Redress Scheme during that year.
Confidentiality agreement	A written agreement requiring the individual who signs it to use confidential information they receive as part of the National Redress Scheme appropriately and keep the information private.
Contact person	The main point of contact for a survivor within a participating institution. This officer will receive referrals for DPRs and will be responsible for arranging DPRs involving their institution.
Culturally appropriate	Making sure a practice is suitable for individuals of different cultures or backgrounds.
Cultural awareness training	Training to build an understanding and awareness of different cultures, the differences between cultures and diversity.
Direct personal response (DPR)	A direct personal response (DPR) is one of the three elements of redress available under the National Redress Scheme for people who have experienced institutional child sexual abuse. A direct personal response is: <ul style="list-style-type: none"> <li>• an opportunity for a survivor to have their story of abuse heard</li> <li>• an acknowledgement of the impact of the abuse on the person</li> <li>• an apology or a statement of acknowledgement or regret, and</li> <li>• an assurance that the institution has taken steps, or will take steps, to prevent abuse occurring again.</li> </ul>
Direct personal response (DPR) Framework	The legally-binding document that sets out the general principles of how a DPR should be carried out.
Direct personal response (DPR) meeting	The face-to-face meeting where the survivor (and support person/s), institutional representative and facilitator or contact person come together to participate in the DPR. This is the final step of the DPR process.
Direct personal response (DPR) method	Under section 7 of the DPR Framework, a DPR may be given by one of the following methods: <ol style="list-style-type: none"> <li>(a) a face-to-face meeting, in which the survivor meets with a senior official of the responsible institution;</li> <li>(b) written engagement with the survivor;</li> <li>(c) any other method agreed with the survivor.</li> </ol>

Direct personal response (DPR) process	The steps taken to achieve a DPR through the National Redress Scheme.
Facilitator	A professional and neutral third-party participant in a DPR meeting, who helps the survivor and institutional representative understand their common objectives and assists them to plan and achieve them.
Institution	Any body, entity, group of persons or organisations (whether or not incorporated) responsible for religious, educational, professional or social purposes. This does not include a family or an individual.
Institutional reform	The process of reviewing and restructuring an institution to improve their current practices.
Institutional representative	A person who will be participating in a DPR on behalf of the institution found responsible for the abuse of the survivor.
Legislative instrument	A document that is legally-binding and can be prosecuted against.
Litigation	The process of taking legal action.
Memory project	Activities that record and publicly communicate survivors' experiences – for example, through yearbooks, photo albums and collections of survivors' accounts of their experiences.
National Redress Scheme (the Scheme)	An Australian Government program that will provide support to people who were sexually abused as children while in the care of an institution.
Participating group	Two or more participating institutions who have agreed to accept applications and provide redress through the National Redress Scheme collectively.
Participating institution	An institution that has agreed to accept applications and provide redress through the National Redress Scheme.
Preparatory meeting	The first meeting between the survivor and facilitator, and the first meeting between the institutional representative and facilitator (if the institution is not engaging a facilitator, a contact person may perform this function, if appropriately skilled to do so, will hold these meetings). This meeting prepares the survivor and institutional representative for the DPR meeting.
Responsible institution	The institution that has been determined by the Scheme Operator to be responsible for the survivor's abuse.
Royal Commission into Institutional Responses to Child Sexual Abuse (the Royal Commission)	The Royal Commission into Institutional Responses to Child Sexual Abuse was established in response to allegations of sexual abuse of children in institutional contexts that had been emerging in Australia for many years. The Royal Commission was established on 13 January 2013 and delivered its Final Report on 15 December 2017.
Statutory obligation	A legal requirement.
Support person	A person who has been chosen by the survivor to provide support before, during and after a DPR.
Survivor	The person who has applied and accepted an offer for redress.

Survivor-focussed	A principle where the survivor's needs are always the primary concern.
Trauma-informed care	Trauma-informed care involves practises that are based on an understanding of how trauma affects people's lives, their support needs and their access and use of support services.
Vicarious trauma	Emotional or physical effects experienced by a person who has been working or engaging with another person's traumatic experiences.

# Attachment A – Sample consent to participate form for a survivor

## **Consent of survivor for participation in a direct personal response**

I consent to participate in a direct personal response (DPR) with (Insert Name of representative and Institution) in accordance with the National Redress Scheme (the Scheme). I understand that my participation in a DPR relates to my experience of child sexual abuse accepted by the Scheme.

I understand that my participation is voluntary and that I may withdraw from the DPR at any time. I have been provided with a thorough explanation of the DPR and I understand the purpose of my participation in it.

## **Part A – Management of personal information**

I understand that information I provide about my experience to the contact person(s) as part of arranging my DPR may be provided to the institutional representative to assist their preparation for the DPR as relevant, as allowed under Section 98 of the *National Redress Scheme for Institutional Child Sexual Abuse Act 2018*.

## **Part B – Participants in the direct personal response**

I agree that:

1. I have been given the opportunity to provide input into the selection of the institutional representative for participation in my DPR and I agree to their participation.
2. If I have chosen to have a support person available to support me in my DPR, I have agreed to their participation.
3. Where relevant, I have been given the name of the facilitator who will facilitate my DPR, and I agree to their participation.

## **Part C – Engaging in the direct personal response**

I understand and agree that:

1. I consulted with the contact person(s) to decide the format of the DPR.
2. Any person involved in the DPR may delay or stop the DPR at any time if they have concerns about the emotional, psychological, or physical safety of any participants.
3. I can ask either directly, or through my support person or facilitator (where one is engaged), for the DPR to be delayed or stopped at any time.
4. A participant or the facilitator (where one is engaged) may delay or stop a DPR if the facilitator believes that a break is necessary to ensure the safety and wellbeing of all participants.
5. Participation in the DPR must be safe for myself and other participants. I agree to engage in the DPR in a way that promotes safety and respectful communication.

## **Part D – Agreed follow-up action(s)**

I understand that for any further action(s) agreed to during my DPR:

1. The contact person, or facilitator where one is engaged, will make a record of the follow-up action(s) at the time they are agreed to during the DPR, which will be signed by myself and the institutional representative.
2. It is the responsibility of the institution to implement the follow-up action(s).
3. The institution will provide me with a copy of the recorded follow-up actions after the DPR.

**Part E – Confidentiality**

I understand and agree that:

1. Every aspect of the DPR is confidential unless:
  - (a) all participants agree otherwise; or
  - (b) an actual or potential threat to human life, health or safety is revealed in the course of giving the DPR.
2. All personal information about other individuals disclosed during the DPR, or as a result of further action(s) agreed to at the DPR is confidential and I will treat it as confidential.

**I understand the purpose of the DPR and agree to participate in accordance with the parameters set out in this form.**

**Survivor Name:** \_\_\_\_\_

**Survivor Signature:** \_\_\_\_\_

**Facilitator name:** \_\_\_\_\_

**Facilitator Signature:** \_\_\_\_\_

**Date:**            \_\_\_\_ / \_\_\_\_ / \_\_\_\_

## Attachment B – Sample consent to participate form for a support person

### **Consent of survivor’s support person for participation in a direct personal response**

I consent to participate in a direct personal response (DPR) with (Insert Name of representative and Institution) and (Insert name of Survivor) in accordance with the National Redress Scheme (the Scheme). I understand that my participation in a DPR relates to child sexual abuse accepted by the Scheme.

I understand that my participation is voluntary and that I may withdraw from the DPR at any time. I have been provided with a thorough explanation of the DPR and I understand the purpose of my participation in it.

### **Part A – Engaging in the direct personal response**

I understand and agree that:

1. The purpose and format of the DPR has been explained to me.
2. My role in the DPR is to provide support to (Insert name of Survivor) before, during and after the DPR.
3. Any person involved in the DPR may delay or stop the DPR at any time if they have concerns about the emotional, psychological, or physical safety of any participants.
4. I can ask either directly, or through the facilitator (where one is engaged), for the DPR to be delayed or stopped at any time.
5. A participant or the facilitator (where one is engaged) may delay or stop a DPR if the facilitator believes that a break is necessary to ensure the safety and wellbeing of all participants.
6. Participation in the DPR must be safe for myself and other participants. I agree to engage in the DPR in a way that promotes safety and respectful communication.

### **Part B – Confidentiality**

I understand and agree that:

1. Every aspect of the DPR is confidential unless:
  - (a) all participants agree otherwise; or
  - (b) an actual or potential threat to human life, health or safety is revealed in the course of giving the DPR.
2. All personal information about other individuals disclosed during the DPR, or as a result of further action(s) agreed to at the DPR is confidential and I will treat it as confidential.

**I understand the purpose of the DPR and agree to participate in accordance with the parameters set out in this form.**

**Support person name:** \_\_\_\_\_

**Support person signature:** \_\_\_\_\_

**Facilitator name:** \_\_\_\_\_

**Facilitator signature:** \_\_\_\_\_

**Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

## Attachment C – Sample consent to participate form for an institutional representative

### **Consent of institutional representative for participation in a direct personal response**

I consent to participate in a direct personal response (DPR) with (Insert name of Survivor) in accordance with the National Redress Scheme (the Scheme). I understand that my participation in a DPR relates to child sexual abuse accepted by the Scheme.

I understand that my participation is voluntary and that I may withdraw from the DPR at any time. I have been provided with a thorough explanation of the DPR and I understand the purpose of my participation in it. I have participated in relevant training. I understand the process and principles of a DPR and the purpose of my participation in it.

### **Part A – Participants in the direct personal response**

I agree that:

1. I will participate in this DPR as the nominated institutional representative, and I acknowledge that my participation is in accordance with the [National Redress Scheme for Institutional Child Sexual Abuse Act 2018](#) and [National Redress Scheme for Institutional Child Sexual Abuse Direct Personal Response Framework 2018](#).
2. I have received information about the survivor, including information about the abuse and their nominated support person (where relevant), to assist me to prepare for engaging meaningfully and effectively in this DPR.
3. I have been given the details of the facilitator who will facilitate the DPR.

### **Part B – Engaging in the direct personal response**

I understand and agree that:

1. The purpose and format of the DPR has been explained to me.
2. I have prepared appropriately for this DPR and sought assistance and clarification from the facilitator and/or contact person to ensure I am equipped to fulfil my role as institutional representative in this DPR to the best of my abilities.
3. Any person involved in the DPR may delay or stop the DPR at any time if they have concerns about the emotional, psychological, or physical safety of any participants.
4. I can ask either directly, or through the facilitator (where one is engaged), for the DPR to be delayed or stopped at any time.
5. A participant or the facilitator (where one is engaged) may delay or stop a DPR if the facilitator believes that a break is necessary to ensure the safety and wellbeing of all participants.
6. Participation in the DPR must be safe for myself and other participants. I agree to engage in the DPR in a way that promotes safety and respectful communication.

### **Part C – Agreed follow-up action(s)**

1. I agree to undertake the follow-up action(s) I agree to during the DPR.
2. I understand that if I have any doubts about my capacity or the Institution's ability to agree to particular further action(s), I will agree to 'look into the possibility' of, rather than commit to, something I am unsure about or do not have the authority to decide upon.
3. I understand the facilitator (where engaged) or contact person(s) will make a record of the further action(s) at the time they are made during the DPR, which will be signed by myself and (Insert name of Survivor).

**Part D – Confidentiality**

I understand and agree that:

1. Every aspect of the DPR is confidential unless:
  - (a) all participants agree otherwise; or
  - (b) an actual or potential threat to human life, health or safety is revealed in the course of giving the DPR.
2. All personal information about other individuals disclosed during the DPR, or as a result of a further action(s) agreed to at the DPR is confidential and I will treat it as confidential.

**I understand the purpose of the DPR and agree to participate in accordance with the parameters set out in this form.**

**Institutional representative name:** \_\_\_\_\_

**Institutional representative signature:** \_\_\_\_\_

**Facilitator name:** \_\_\_\_\_

**Facilitator signature:** \_\_\_\_\_

**Date:**        \_\_\_\_ / \_\_\_\_ / \_\_\_\_



I understand that:

1. A signed copy of this record of agreed further action(s) will be provided to myself and the institutional representative after the DPR.
2. For the purpose of implementing the follow-up action(s), relevant individuals in the institution will be provided with my name, contact information, and a copy of this form on a *need to know* basis.
3. The institution, where necessary, will contact me directly in order to facilitate the tasks contained in this form.

**Redress ID:** \_\_\_\_\_

**Survivor Name:** \_\_\_\_\_

**Survivor Signature:** \_\_\_\_\_

**Survivor Contact details:**

**Address:** \_\_\_\_\_

**Telephone:** (H) \_\_\_\_\_

(M) \_\_\_\_\_

**Email:** \_\_\_\_\_

**Preferred Method of Contact:** \_\_\_\_\_

**Institutional Representative Name:** \_\_\_\_\_

**Institutional Representative Signature:** \_\_\_\_\_

**Facilitator Name:** \_\_\_\_\_

**Facilitator Signature:** \_\_\_\_\_

**Date of record:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## Attachment E – Sample preparatory meeting checklist

### **Direct personal response preparatory meeting checklist**

*As the facilitator, you are required to telephone the relevant contact officer – of the institution within 24 hours of the conclusion of the preparatory (DPR) meeting with the survivor to report on the status of the DPR, using the checklist below. If you have any concerns about the DPR going ahead, you must raise those concerns during this telephone check-in.*

**Your Name (Facilitator):** \_\_\_\_\_

**Survivors Name:** \_\_\_\_\_

**Support Person's Name:** \_\_\_\_\_

**Time and date of pre-conference meeting with survivor (and support person):** \_\_\_\_\_

<b>CHECK LIST FOR DISCUSSION</b>	
What other redress outcomes has the survivor sought?	
Redress Payment	Yes / No
Counselling	Yes / No
Has the redress payment been made?	Yes / No
Has the survivor accessed counselling?	Yes / No
Has a discussion occurred with the survivor about: <ul style="list-style-type: none"> <li>• the general principles and format for the DPR process</li> <li>• desired general outcomes from participation</li> <li>• professional support after the DPR?</li> </ul>	Yes / No
Has the survivor been consulted about their safety and what will facilitate safety for them in the DPR?	Yes / No
Does the survivor have a support person?	Yes / No
Did the support person attend this pre-DPR meeting?	Yes / No
If not, did you separately prepare the support person?	Yes / No / N/A
Did you identify any significant risks in relation to the survivor?	Yes / No
If so, can these risks be effectively managed?	Yes / No / N/A
Did you identify any significant risks in relation to the support person?	Yes / No
If so, can these risks be effectively managed?	Yes / No / N/A
Did the survivor sign the <i>Consent to Participate Form</i> ?	Yes / No
Did the support person sign the <i>Consent to Participate Form</i> ?	Yes / No

Did you identify any issues with the venue?	Yes / No
Are you comfortable that the survivor remains ready and the matter is suitable for the DPR?	Yes / No

## Attachment F – Sample completion report

### Direct personal response completion report

The facilitator of the DPR is required to complete and return this DPR completion report and all documents in relation to this DPR to **(Insert Name of Institution)**.

**Redress ID:** \_\_\_\_\_

**Facilitator name:** \_\_\_\_\_

**Survivor name:** \_\_\_\_\_

**Institutional representative name:** \_\_\_\_\_

**Support person name:** \_\_\_\_\_

**DPR date:** \_\_\_\_\_

**DPR location:** \_\_\_\_\_

**DPR start/finish times:** \_\_\_\_\_

**DPR format (e.g. face-to-face):** \_\_\_\_\_

*This checklist is designed to assist you in ensuring you have completed all the necessary steps in concluding the DPR and that you return all necessary material with this DPR Completion Report.*

	Attached/Enclosed
Signed <i>Consent Form - Survivor</i> (original)	<input type="checkbox"/>
Signed <i>Consent Form - Institutional Representative</i> (original)	<input type="checkbox"/>
Signed <i>Consent Form – Support Person</i> (original) – if support person participated	<input type="checkbox"/>
Your <i>Facilitator Briefing Information Pack</i> (original)	<input type="checkbox"/>
<i>Institutional Representative Briefing Information Pack</i> (original)	<input type="checkbox"/>
<i>Record of Agreed Further Action(s)</i> (if any agreed)	<input type="checkbox"/>
All other written material taken during the DPR (e.g. hand written notes)	<input type="checkbox"/>
Complete <i>Facilitator Evaluation Survey</i> (as part of Completion Report)	<input type="checkbox"/>
Did you hand out the evaluation surveys to DPR participants?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Complete
Check in phone call with survivor made within 48 hours	<input type="checkbox"/>
Check in phone call with institutional representative made within 2-4 days	<input type="checkbox"/>

If you were unable to return any of these documents, please advise the contact person as to why:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

