

Self-Assessment of Compliance

Church Authority:	Date:	
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This self-assessment relates to all activities/entities/ministries governed by the Church Authority which are not covered by the Declaration of Assurance and Compliance for regulated activities.

The information provided in this form will assist CPSL with designing an audit approach for areas which are not subject to existing external accreditation or assurance processes and which will therefore be subject to a full audit by CPSL.

Section 1: About the Organisation - requests information about the Church Authority.

Section 2: Self-Assessment of Compliance - lists the NCSS Criteria and Indicators and requires a self-assessment of compliance with the Criteria and Indicators as at the current date.

Section 3: Contact Details

NB: Information provided as part of this Self-Assessment must be accurate and complete and will be verified as part of the Church Authority's scheduled audit. To assist with this process, please attach relevant documents to support your self-assessment.

Should you have any queries in relation to completing this document, please do not hesitate to contact Tania Stegemann, CPSL Director of Compliance on 1300 603 411.



Section 1: About the Church Authority

Activity Description	
Activities/entities/ministries not covered by the Declaration of Assurance and Compliance and covered by this Self-Assessment	
Location(s) of activities/entities/ministries covered by this Self-Assessment	



Section 2: Self-Assessment of Compliance

Please provide your self-assessment of compliance against each indicator of the NCSS, including the rating of compliance by placing a tick (\checkmark) in the corresponding box and provide appropriate commentary.

NB: Where a specific indicator is not applicable, please provide an explanation.

NB: The definitions of the Compliance Assessment ratings are included at the end of this document.

		Compl	liance Se	lf-Assess	ment	Description/Evidence of Compliance		ıble					
Criteria	Indicator Requirements	Not addressed	Initial / Ad hoc	Defined & developed	Managed & measurable		Evidence/Document Attached	Not Applicable					
Standard 1: Commit	ted leadership, governance and	d cultur	е										
Please include details as to how this specific indicator is complied with, including any planned activity in progress or not yet implemented.													
Criteria 1.1 The entity publicly commits to child safeguarding and takes a zero-tolerance approach to child	1.1.1 The entity has a Child Safeguarding Policy that is approved and endorsed by the Church Authority and/or relevant leadership body and is publicly available.												
abuse	1.1.2 The entity publishes a Child Safeguarding Commitment Statement which is openly displayed and publicly available.												



		Comp	liance Se	lf-Assess	ment			ble
Criteria	Indicator Requirements	Not addressed	Initial / Ad hoc	Defined & developed	Managed & measurable	Description/Evidence of Compliance	Evidence/Document Attached	Not Applicable
Criteria 1.2 A child safeguarding culture is championed and modelled at all levels of the entity from the top down and bottom up	 1.2.1 The Church Authority and leaders of the entity create and maintain an entity's culture of safeguarding by: promoting child safeguarding regularly; and emphasising that child-safeguarding is everyone's responsibility; and actively monitoring safeguarding compliance and risk management. 1.2.2 The entity appoints a Safeguarding Committee at the highest level of leadership to oversee the effective 							
	ongoing implementation of child safeguarding practices, including the Child Safeguarding Policy and related procedures and practices.							
	1.2.3 The entity appoints and promotes the role of Safeguarding Coordinator(s), with clearly defined responsibilities for safeguarding children at Diocesan, Religious Institute or Ministerial PJP level.							



		Comp	liance Se	lf-Assess	sment			ble
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	1.2.4 Personnel understand that child safeguarding is everyone's responsibility and are empowered to provide input on child safeguarding practices.							
Criteria 1.3 Governance arrangements facilitate implementation of a Child Safeguarding Policy across the	1.3.1 Governance arrangements are transparent and include safeguarding roles and responsibilities to ensure accountability for safeguarding is clear.							
Policy across the entity's activities	1.3.2 Where the Church Authority's governance includes countries other than Australia, the entity must apply these standards taking into account relevant international declarations and local legislation.							
Criteria 1.4 A Code of Conduct provides guidelines for personnel on expected behavioural standards and responsibilities	1.4.1 The Code of Conduct explicitly and equally applies to all personnel and provides guidance on appropriate and expected standards of behaviour of personnel towards children.							
	1.4.2 The Code of Conduct is written in accessible language and communicated to personnel, children, families and carers.							



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Criteria	Indicator Requirements	Not addressed	Initial / Ad hoc	Defined & developed	Managed & measurable	Description/Evidence of Compliance	Evidence/Document Attached	Not Applicable
	1.4.3 The Code of Conduct takes into account the needs of all children, paying particular attention to Aboriginal and Torres Strait Islander children, children with disability, and children from culturally and linguistically diverse backgrounds and children with particular vulnerabilities, for example, children who can't live at home.							
Criteria 1.5 The entity has risk management strategies focusing on preventing, identifying and mitigating risks to children	1.5.1 The entity has a clearly documented child safeguarding risk management plan, as part of its overall risk management strategy, which considers actual and potential risks relating to children.							
	1.5.2 The entity has appropriate risk management processes in place to assess, evaluate, review and oversee the safeguarding of children participating in, or receiving, ministries off-shore including cultural immersions, pilgrimages, solidarity campaigns and world youth days.							



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	1.5.3 Leaders of the entity manage safeguarding risks effectively, through regular identification, monitoring, reporting and review of risks.							
Criteria 1.6 Personnel understand their obligations on information sharing and record keeping	1.6.1 The entity has documented information sharing and record keeping policies and procedures which are communicated to personnel.							
	1.6.2 The entity's information sharing and record keeping policies and procedures relating to all aspects of child safeguarding, including incidents and complaints, apply the following requirements:							
	 complete and accurate records are created and maintained for all incidents, complaints, responses and decisions; 							
	 records are created at the time of, or as soon as practicable following, an incident, complaint, response or decision; 							
	 records are titled, organised and filed logically; 							



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	1.6.2 Cont.							
	 a master copy of each record is formally maintained to ensure duplicate records or multiple copies of the same record are kept to a minimum; records are maintained and disposed of in accordance with legislative and statutory requirements, or after a 							
	period of 50 years (refer to Indicator 6.1.7), whichever is longer; • information and/or records							
	are treated as confidential and records are appropriately secured;							
	 sharing or distribution of information and/or records is restricted to nominated personnel and is conducted in accordance with relevant legislative and statutory requirements; and 							
	 individuals' rights to access, annotate or request an amendment to records about themselves are recognised to the fullest extent. 							



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Criteria	Indicator Requirements	Not addressed	Initial / Ad hoc	Defined & developed	Managed & measurable	Description/Evidence of Compliance	Evidence/Document Attached	Not Applicable
Standard 2: Children	n are safe, informed and partici	pate						
Criteria 2.1 Children are informed about their rights, including safety, information and participation	2.1.1 The entity has age and developmentally appropriate strategies to proactively: engage with children; and seek children's views; and consult children about decisions that affect them; and consult children about what makes them feel safe and how this can be recognised and implemented by the entity.							
	2.1.2 The entity ensures children are made aware of their rights, including their right to be safe from abuse, and are informed whom to contact if they have concerns about their safety or the safety of their peers.							
Criteria 2.2 The importance of friendships is recognised and support from peers is encouraged, helping children feel safe and less isolated	2.2.1 The entity provides children with age and developmentally appropriate information about safe and respectful peer relationships, including through social media.							



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Criteria 2.3 Where relevant to the setting or context, children and families may be offered access to abuse prevention programs and related information that is age appropriate	2.3.1 Where relevant, the entity provides children and families with information, access and/or referral to abuse prevention programs, appropriate to the child's age, development, ability and level of understanding.							
Criteria 2.4 Personnel are attuned to signs of harm and facilitate child-friendly ways for children to express their views, participate in decision-making and raise their concerns	2.4.1 Personnel have the knowledge, skills and awareness to identify potential signs of harm and actively support children to raise any concerns.							



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Standard 3: Partneri	ng with families, carers and com	nmuniti	es				
Criteria 3.1 Families and carers participate in decisions affecting their child	3.1.1 The entity supports and encourages families and carers to take an active role in monitoring children's safety when participating in activities.						
Criteria 3.2 The entity engages and openly communicates with families, carers and communities about its child safeguarding	3.2.1 The entity promotes open dialogue and provides a range of ways for families, carers and communities to contribute to discussions about its child safeguarding approach.						
approach, and relevant information is accessible	3.2.2 The entity provides families, carers and communities with relevant safeguarding information including contact details of the Safeguarding Committee [refer to Indicator 1.2.2] and/or Safeguarding Coordinator(s) [refer to Indicator 1.2.3].						
Criteria 3.3 Families, carers and communities have a say in the entity's policies and practices	3.3.1 Processes are in place to engage families, carers and communities about their views on policies and practices for keeping children safe.						



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Criteria 3.4 Families, carers and communities are informed about the entity's operations and governance	3.4.1 The entity ensures families, carers and communities are aware of the roles and responsibilities of personnel providing ministries or activities directly to their children.							
Criteria 3.5 The entity takes a leadership role in raising community awareness of the dignity and rights of all children	3.5.1 Appropriate to the context or setting, the entity actively promotes and/or participates in civic engagement activities and/or campaigns which promote whole of community awareness of children's rights and child abuse prevention.							



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Standard 4: Equity is	Standard 4: Equity is promoted and diversity is respected										
Criteria 4.1 The entity actively anticipates children's diverse circumstances and backgrounds, and provides support and responds effectively to those who are	4.1.1 The entity's Child Safeguarding Policy [refer to Indicator 1.1.1] and practices reflect an understanding, and identification, of diverse circumstances and experiences that increase a child's vulnerability to abuse.										
vulnerable	4.1.2 The entity's Complaints Handling Policy [refer to Criterion 6.1] and practices demonstrate an understanding of barriers that prevent children from disclosing abuse and barriers for adults recognising and/or responding to disclosures, and articulates processes that reduce barriers to disclosure.										
Criteria 4.2 All children have access to information, support and complaints processes in ways that are culturally safe, accessible and easy to understand	4.2.1 The entity produces child-friendly material in accessible language and formats that promotes inclusion and informs all children of the support and complaints processes available to them.										



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Criteria 4.3 The entity pays particular attention to the needs of Aboriginal and Torres Strait Islander children, children with disability, and children from culturally and linguistically diverse backgrounds, those who are unable to live at home, and children of diverse sexuality.	4.3.1 The entity's Child Safeguarding Policy [refer to Indicator 1.1.1] and practices reflect attitudes and behaviours that respect the human rights of all children and are inclusive and responsive to diverse needs.							



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Criteria	Indicator Requirements	Not addressed	Initial / Ad hoc	Defined & developed	Managed & measurable	Description/Evidence of Compliance	Evidence/Document Attached	Not Applicable
Standard 5: Robust	Human Resource Management							
Criteria 5.1 Recruitment, including advertising, interview questions, referee checks and preemployment screening, emphasises child	5.1.1 The entity emphasises its commitment to child safeguarding and zero-tolerance approach to child abuse in all aspects of its advertising, screening and recruitment for personnel.							
safeguarding	5.1.2 The entity documents its child safeguarding approach in recruitment and screening procedures and processes.							
	5.1.3 Positions are assessed for the expected level of contact with children and appropriate child safeguarding recruitment procedures are implemented.							
	 5.1.4 Position descriptions, selection criteria, referee checks and interview questions articulate: that children are valued and respected; and the commitment of the entity to child safeguarding and; where appropriate to the role [refer to Indicator 5.1.3], an understanding of children's developmental needs and culturally safe practices. 							



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Criteria 5.2 Relevant personnel (including all seminarians, clergy and religious) have current working with children checks or equivalent background checks	5.2.1 The entity has a policy which is implemented that ensures: • personnel have a current working with children check as required by legislation prior to working with children; and • where a working with children check is not required by legislation, other background checks for personnel are conducted prior to working with children.							
	5.2.2 The entity keeps records and monitors the status of working with children checks and/or background checks for all personnel.							
Criteria 5.3 Personnel receive an appropriate induction and are aware of their child safeguarding	5.3.1 All personnel participate in a safeguarding induction program, which occurs as soon as possible after commencement.							



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responsibilities, including reporting obligations	5.3.2 All Church Authorities (along with members of their leadership team) who are signatories to a Service Agreement with Catholic Professional Standards Ltd participate in the National Catholic Safeguarding Standards Introductory Session for Leaders within 4 months of commencement.							
Criteria 5.4 Ongoing supervision and people management is focused on child safeguarding	5.4.1 Support, mentoring, oversight and professional supervision processes for personnel include child safeguarding [refer to Indicator 5.5.3].							
- Caregorianing	5.4.2 Annual performance reviews for personnel include child safeguarding relevant to their role [refer to Indicator 5.5.4].							
NOTE: Criteria 5.5 members of, religion		es and	relate	d entiti	ies with	seminarians, clergy and those in fo	rmation programs with, or	



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Criteria 5.5 Robust processes exist for screening candidates before and during seminary and religious formation. Robust processes are implemented for ongoing formation, support and supervision of clergy and religious	5.5.1 The Church Authority draws upon broad-ranging professional advice in its decision-making relating to candidates for seminary/formation programs and ordination/profession of vows. This includes a positive duty to disclose to other Church Authorities where an applicant or candidate for seminary/formation programs does not continue through to ordination/profession of vows.							
	5.5.2 Seminary and initial formation programs have robust screening processes for candidates, including external psychological and psychosexual assessments.							
	5.5.3 The entity promotes as normative the participation of all bishops, leaders of religious institutes, clergy and religious in active ministry in no less than six hours of professional/pastoral supervision per year [refer to Indicator 5.4.1 and 5.5.3].							



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	5.5.4 The entity promotes as normative, all clergy and religious in active ministry, for the sake of proper accountability, are offered and access both ongoing professional development and annual performance appraisals [refer to Indicator 5.4.2]							
	5.5.5 All newly ordained clergy and newly professed religious are supported with a suitable mentor for at least 5 years post ordination or final profession.							
Criteria 5.6 Seminary and formation programs for clergy and religious have appropriate curriculum to build the knowledge and skills of	5.6.1 Seminary and initial formation programs have curriculum throughout the formation program which builds candidates' knowledge and skills in a range of areas to support child safeguarding.							
candidates to understand and lead child safeguarding initiatives	5.6.2 Seminary and initial formation programs ensure promotion of pastoral responses to victims/survivors of sexual abuse.							
5	5.6.3 Seminary and initial formation programs are delivered in such a way as to prevent the development and/or reinforcement of clericalist attitudes and behaviours.							



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Criteria 5.7 Credentialing and movement of seminarians, clergy and religious is appropriately managed	5.7.1 The entity implements a system to assess the safeguarding credentials and manage the movement of all seminarians, clergy and religious moving between different seminaries, formation programs and Church jurisdictions.							
Criteria 5.8 Entities which receive overseas clergy and religious for work in ministry have targeted programs for the screening, induction, professional supervision and development of these	5.8.1 Selection and screening procedures for overseas clergy and religious are targeted, thorough and follow, as far as practicable, the same processes as for Australian personnel. This includes the Australian Church Authority obtaining screening information from the international Church Authority.							
individuals.	5.8.2 All overseas clergy and religious participate in a Safeguarding Induction program, documented by the entity, before work with children begins.							
	5.8.3 Overseas clergy and religious are supported with a suitable mentor for at least the first two years of their time in Australia.							



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	5.8.4 The entity promotes as normative the participation of all overseas clergy and religious in active ministry in no less than six hours of professional/pastoral supervision per year [refer to Indicators 5.4.1 and 5.5.3].							



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Standard 6: Effective	e complaints management						
	6.1.1 The entity's policies, procedures and practices ensure that all mandatory reporting obligations are met.						
and responsibilities, approaches to dealing with different types of complaints, reporting obligations and record keeping requirements	6.1.2 There are clear procedures that provide step-by-step guidance on what action to take for different types of complaints, including breaches of Codes of Conduct, disclosures, allegations or concerns of abuse of a child, be they historic or current.						
	6.1.3 There are clear procedures for identifying and mitigating actual and perceived conflicts of interest in complaint management.						
	6.1.4 The entity works in cooperation with relevant organisations and seeks specialist advice from statutory child protection services when necessary.						



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	6.1.5 Key roles and responsibilities in relation to handling complaints are articulated within the Complaint Handling Policy and procedures.							
	6.1.6 The Complaint Handling Policy and procedures differentiate, where appropriate, between a child victim and an adult bringing forward a complaint of abuse suffered as a child.							
	6.1.7 A process is in place to record all child abuse complaints, incidents, allegations, disclosures, concerns and referrals. The system must be secure so that confidential information is stored, protected and retained for 50 years [refer to Indicator 1.6.2].							
Criteria 6.2 The entity has a child-focused complaints handling system that is understood by children,	6.2.1 The complaints handling system prioritises the safety and well-being of children.							



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families, carers and personnel	6.2.2 The Complaints Handling Policy and procedures are made publicly available in a variety of formats, including age and developmentally appropriate for children, enabling complaints processes to be easily understood.							
Criteria 6.3 Complaints are taken seriously, and responded to promptly and thoroughly	6.3.1 The Complaints Handling Policy requires that, upon receiving a complaint of child abuse, an initial risk assessment is conducted to identify and minimise any risk to children. Ongoing risk assessments are required throughout all investigation processes.							
	6.3.2 The Complaints Handling Policy requires that at the completion of the initial risk assessment, where a complaint of child sexual abuse is plausible, and there is a risk that the person may come into contact with children, the person be stood down from their role and/or ministry while the complaint is investigated.							



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	6.3.3 The Complaints Handling Policy is aligned, and operates in conjunction, with the entity's documented disciplinary and grievance policies and processes, in such a way that at the completion of the initial risk assessment, a breach or breaches of the Code of Conduct [refer to Criterion 1.4] in relation to inappropriate behaviour towards a child are effectively investigated and managed, and include provisions for personnel to be redeployed, stood down and/or dismissed [having due regard for Indicator 6.5.1].							
	6.3.4 Complainants are responded to promptly and kept informed as to the progress of dealing with their complaint.							
	6.3.5 Support and care are provided to a child who has experienced or is alleging abuse, and other affected parties.							



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	6.3.6 Appropriate confidentiality is maintained with due regard for the Australian Privacy Principles and relevant legislation in relation to information sharing in the context of child safeguarding [refer to Indicator 1.6.2].							
	6.3.7 There are documented policies and processes implemented that empower and support personnel to raise, in good faith, concerns and allegations about unacceptable behaviour towards children by other personnel.							
NOTE: Indicators 6 or members of, reli		Author	rities a	nd rela	ted ent	ities with seminarians, clergy and thos	se in formation programs v	with,
	6.3.8 Where a complaint related to child sexual abuse against a seminarian, clergy or religious is substantiated on the balance of probabilities, with due respect to the rights of individuals, the Church Authority should remove that individual from ministry.							



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	6.3.9 Where a seminarian, clergy or religious is convicted of an offence relating to child sexual abuse, that individual should be permanently removed from ministry. The Church Authority must take practicable steps to prohibit that individual from holding themselves out as being a person with religious authority and should present a case to the relevant dicastery for dismissal from the clerical state and/or dispensation from vows.							
Criteria 6.4 The entity has policies and procedures in place that address reporting of complaints and concerns to relevant authorities, whether or not the law requires reporting, and cooperates with law enforcement	6.4.1 The Complaints Handling Policy requires that: concerns and complaints of child abuse occurring within the entity be reported to the appropriate statutory authority/ies, regardless of whether the reporting is mandated; and personnel cooperate with law enforcement procedures and directives.							
Criteria 6.5 Reporting, privacy and employment law obligations are met	6.5.1 The Complaints Handling Policy requires that all relevant reporting, privacy and employment law obligations are met.							



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Criteria 6.6 The Church Authority ensures mechanisms are in place to care for adult complainants	6.6.1 The entity offers appropriate pastoral care to adult complainants, which recognises their unique needs. This should include an offer from the Church Authority to meet the complainant in person.							
	6.6.2 The Church Authority facilitates adult complainants' access to appropriately trained personnel whose clearly defined roles are to listen to and represent the pastoral needs of the complainant. This is done in consultation with the complainant.							
Criteria 6.7 The Church Authority ensures mechanisms are in place to monitor and support respondents facing allegations	6.7.1 The Church Authority has access to appropriately trained personnel - lay, religious or clergy - whose clearly defined roles are to listen to and represent the pastoral needs of the respondent. This is done in consultation with the respondent.							



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	6.7.2 The Church Authority has suitable arrangements in place for the monitoring and support of a respondent, where there is a plausible complaint, until (and if) the Church Authority no longer has responsibility for monitoring the respondent.							



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Standard 7: Ongoing	geducation and training						
Criteria 7.1 Personnel are trained and supported to effectively implement the entity's child safeguarding policies and procedures	 7.1.1 The entity provides regular opportunities to educate and train personnel on child safeguarding policies and procedures as a minimum through: induction [refer to Indicators 5.3.1 and 5.8.2]; and refresher safeguarding training (at least every 3 years) 						
	 7.1.2 The entity's induction and refresher safeguarding training must as a minimum cover: Code of Conduct [refer to Criterion 1.4] safeguarding risk management (refer to Criterion 1.5] Child Safeguarding Policy and procedures [refer to Indicator 1.1.1] Complaint Handling Policy and procedures [refer to Standard 6] reporting obligations [refer to Standard 6] 						
	 e-safety training [refer to Standard 8] 						



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	7.1.3 The entity keeps records of participation to ensure all personnel attend induction and refresher safeguarding training.							
	7.1.4 The entity ensures that personnel who have specific child safeguarding responsibilities, such as those appointed to the role of Safeguarding Co-ordinator and those appointed to the Safeguarding Committee, receive ongoing support and professional development relevant to their role.							
Criteria 7.2 Personnel receive training to recognise the nature and indicators of child abuse, including harmful behaviours by a child towards another child	 7.2.1 The entity provides regular training to relevant personnel which equips them with the knowledge to: understand the nature and impact of child abuse; understand the nature, factors and impact of institutional abuse; identify risk factors, such as grooming behaviours; and understand, identify and respond to abusive behaviours by a child towards another child. 							



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Criteria 7.3 Personnel receive training and information to enable them to respond effectively to child safeguarding risks,	7.3.1 The entity provides training to equip relevant personnel to appropriately respond to and support those bringing forward concerns, disclosures and allegations of child abuse [refer to Indicator 4.1.2].							
concerns, disclosures and allegations of child abuse	7.3.2 The entity provides training to ensure personnel are aware of information sharing and record keeping policies and procedures [refer to Indicator 1.6.2].							
	 7.3.3 The entity provides training to ensure personnel are aware of their reporting obligations under State/Territory legislative requirements including: reporting criminal behaviour to Police; mandatory reporting to child protection authorities; Reportable Conduct Scheme; and reporting to other regulatory authorities or government departments. 							



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Criteria 7.4	Indicator Requirements	Not addressed	Initial / Ad hoc	Defined & developed	Managed & measurable	Description/Evidence of Compliance	Evidence/Document Attached	Not Applicable
Criteria 7.4 Personnel receive training and information on how to build culturally safe environments for children	7.4.1 The entity provides cultural safety training to equip relevant personnel to create culturally safe environments for Aboriginal and Torres Strait Islander children and children from culturally and linguistically diverse backgrounds.							



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Standard 8: Safe phy	standard 8: Safe physical and online environments										
Criteria 8.1 Personnel identify and mitigate risks in online and physical environments without compromising a child's right to privacy, access to information, social	8.1.1 The entity's safeguarding risk management plan [refer to Indicator 1.5.1] addresses physical and online risks including risks arising from child to child and adult to child interactions, and the nature of physical spaces.										
connections and learning opportunities	8.1.2 The entity's policies require the use of safe online applications for children to learn, communicate and seek help.										
	8.1.3 Personnel are proactive in identifying and mitigating physical and online risks to children.										



		Comp	liance Se	lf-Assess	ment			ble
Criteria	Indicator Requirements	Not addressed	Initial / Ad hoc	Defined & developed	Managed & measurable	Description/Evidence of Compliance	Evidence/Document Attached	Not Applicable
	8.1.4 A policy is documented and implemented that ensures where one-to-one interactions between an adult and a child take place, these interactions are conducted in an open or visible space, or within the clear line of sight of another adult. This includes ministries and/or services such as counselling, one-to-one tuition, the sacrament of reconciliation, coaching, spiritual direction and mentoring. Where the sacrament of reconciliation is celebrated using the first form of the Rite of Penance, that is, the Rite for Reconciliation of Individual Penitents, the policy may provide for this to occur in a chapel or other space within a church that is set apart for this purpose, so long as any physical contact between the penitent and the cleric is precluded.							
Criteria 8.2 The online environment is used in accordance with the entity's Code of Conduct and	8.2.1 Personnel access and use online environments in line with the entity's Code of Conduct and relevant communication protocols.							



		Comp	liance Se	lf-Assess	ment			ble
Criteria	Indicator Requirements	Not addressed	Initial / Ad hoc	Defined & developed	Managed & measurable	Description/Evidence of Compliance	Evidence/Document Attached	Not Applicable
safeguarding policies and procedures	8.2.2 The entity routinely monitors the online environment, reporting and responding to breaches of its Code of Conduct or safeguarding policies in accordance with the entity's disciplinary, complaints handling or other relevant processes [refer to Indicator 6.3.3].							
Criteria 8.3 Risk management plans [refer to Indicator 1.5.1] consider risks posed by the entity's settings, activities and physical environments	8.3.1 The entity assesses and mitigates safeguarding risks in the physical environments under its control and/or management including buildings, structures, open spaces, grounds, homes of religious and clergy, and arrangements for live-in carers/caretakers.							



		Compliance Self-Assessment						ble
Criteria	Indicator Requirements	Not addressed	Initial / Ad hoc	Defined & developed	Managed & measurable	Description/Evidence of Compliance	Evidence/Document Attached	Not Applicable
	8.3.2 Where an entity becomes aware that a person (other than personnel of that entity) attending any of its services or activities (including sacramental and liturgical celebrations) is the subject of a substantiated complaint of child sexual abuse, or has been convicted of an offence relating to child sexual abuse, the entity has in place and implements a process for assessing and managing the risks posed to children by that person's ongoing involvement in the service or activity.							
Criteria 8.4 Entities that contract facilities and services to and from third parties have procurement policies that ensure safeguarding of children	8.4.1 The entity considers the risks posed to children arising from any third parties engaged by the entity and conducts sufficient due diligence to ensure that the third party has appropriate child safeguarding policies and practices in place.							
	8.4.2 The entity has conducted sufficient due diligence on all third parties who use the entity's facilities to ensure child safeguarding policies and practices are in place.							



		Compliance Self-Assessment						ble
Criteria	Indicator Requirements	Not addressed	Initial / Ad hoc	Defined & developed	Managed & measurable	Description/Evidence of Compliance	Evidence/Document Attached	Not Applicable
Standard 9: Continue	ous improvement							
Criteria 9.1 The entity regularly reviews and improves child safeguarding practices	9.1.1 The entity has a clearly documented Safeguarding Implementation Plan which outlines the monitoring and continual improvement of child safeguarding practices. The Child Safeguarding Implementation Plan is regularly reviewed, progress is tracked and actions/strategies updated.							
	9.1.2 The Church Authority monitors compliance with the National Catholic Safeguarding Standards during systematic visits to parishes, ministries and/or congregational works.							
	9.1.3 The Safeguarding Committee [refer Indicator 1.2.2] coordinates annual self-audits at a local level (parishes, ministries and/or congregational works).							
	9.1.4 The entity's Child Safeguarding Policy is subject to regular review – at least every three years.							



	Indicator Requirements	Compliance Self-Assessment						ble
Criteria		Not addressed	Initial / Ad hoc	Defined & developed	Managed & measurable	Description/Evidence of Compliance	Evidence/Document Attached	Not Applicable
Criteria 9.2 The entity analyses concerns and complaints to identify causes and systemic failures to inform	9.2.1 Processes are in place to analyse individual incidents or complaints relating to child safeguarding practices and/or failures.							
continuous improvement	9.2.2 Processes are in place to identify and analyse systemic issues and/or patterns relating to child safeguarding practices and/or failures, and drive continuous improvement.							
Criteria 9.3 The Church Authority reports on the findings of relevant reviews to personnel, children, families, carers and	9.3.1 The Church Authority promotes to all its stakeholders any audit reports relating to the Church Authority, and related entities, published by Catholic Professional Standards Ltd.							
community	9.3.2 The Church Authority reports on findings of relevant reviews of safeguarding policies, procedures and practices to its stakeholders.							



	Indicator Requirements	Comp	liance Se	lf-Assess	ment			ble
Criteria		Not addressed	Initial / Ad hoc	Defined & developed	Managed & measurable	Description/Evidence of Compliance	Evidence/Document Attached	Not Applicable
Standard 10: Policies	s and procedures support child s	safety						
Criteria 10.1 Policies and procedures address the National Catholic Safeguarding Standards	10.1.1 All relevant policies and procedures reference appropriate safeguarding approaches, requirements and responsibilities.							
Criteria 10.2 Policies and procedures are accessible and easy to understand	10.2.1 The entity's policies & procedures relevant to safeguarding [refer to Indicator 10.1.1] are readily available and accessible to personnel.							
Criteria 10.3 Best practice policy models and stakeholder consultation inform the development and review of policies and	10.3.1The entity has processes in place to monitor adherence to policies and procedures relevant to safeguarding.							
procedures	10.3.2 The entity has processes in place to develop and review its policies and procedures relevant to safeguarding. These processes include consulting with and incorporating advice from experts, children, families, carers and communities.							



		Compliance Self-Assessment						ble
Criteria	Indicator Requirements	Not addressed	Initial / Ad hoc	Defined & developed	Managed & measurable	Description/Evidence of Compliance	Evidence/Document Attached	Not Applicable
Criteria 10.4 The Church Authority and leaders champion and model compliance with policies and procedures	10.4.1 The Church Authority and leaders promote and enact all policies and procedures relevant to safeguarding.							
Criteria 10.5 Personnel understand and implement the policies and procedures	10.5.1 The entity encourages regular discussion and feedback from personnel on their understanding and practical implementation of policies and procedures.							

Section 3: Contact Details

Please provide contact details below of the person submitting the self-assessment on behalf of the Church Authority:

Contact details for person submitting Self-Assessment							
Name							
Title							
Contact Telephone							
Contact Email							



Compliance Assessment Scale

The compliance assessment of the entity's performance against each indicator will be determined using a four-point scale, as follows:

	General	Processes	People/Resources
Not Addressed	 The entity has not addressed the required indicator or is unable to demonstrate that the requirements of the indicator are in place and/or are operating effectively and continuously. 	 Processes are non-existent. Processes exist however the specific requirements of the indicator have not been addressed. 	No resources have been assigned.
Initial/Ad- Hoc	The entity has commenced to address the indicator, however processes are ad-hoc or are applied on a case-by-case basis.	 Some relevant processes have been implemented which align with the requirements of the indicator, however they are: siloed; and/or undocumented; and/or inconsistent; and/or lack clarity. 	 Capabilities vary across the entity. Resources are not formally assigned.
Defined and Developed	The entity has addressed the indicator and is in the process of implementing the requirements across the entity.	Relevant processes have been defined and developed, however are yet to be rolled out across the full operations of the entity.	 Resources have been assigned and responsibilities defined, however there is no formal training or communication of standard procedures and it is unlikely that deviations will be detected.
Managed and Measurable	The entity has demonstrated that indicator requirements are formally embedded and are operating effectively and continuously.	Relevant processes are integrated and coordinated, including remote operations and activities.	 Personnel have been trained to detect and report on deviations or break downs in processes. Resources have been assigned to monitor and address non-compliance.