

Code of Conduct

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Code of Conduct

1. Introduction

1.1. Scope

- 1.1.1. This policy applies to the provision of all services and supports at Early Autism Services (hereafter referred to as EAS).
- 1.1.2. All permanent fixed-term and casual staff, contractors and volunteers are required to take full responsibility for ensuring a full understanding of the commitments outlined in this policy.

1.2. Purpose

- 1.2.1. This policy clarifies the standards of behaviour EAS expects of all employees. The policy affirms EAS's belief in responsible social and ethical behaviour from all employees.
- 1.2.2. All employees of EAS are valued and recognised for their contribution to successful outcomes for the organisation and that of our participants.
- 1.2.3. This Policy and the Policies and Procedures and related documentation set out in section 5 below (Related Documentation) Support Early Autism Services to apply the Code of Conduct for Child Safe Standards and reflect the NDIS Practice Standards.

2. Policy Statement

2.1. General

- 2.1.1. The Early Autism Services Code of Conduct Policy reflects our commitment to a culture of safety and demonstrates our commitment to the physical and psychological health and well-being of employees. Early Autism Services employees/volunteers have an obligation to the Business, our Participants and themselves to observe high standards that reflect our values.
- 2.1.2. At Early Autism Services all employees hold responsibility for ensuring:
 - a. Participants have the right to make their own decisions, freedom of choice to live a life they choose and the same freedoms and rights as any member of the community.

- b. Participants have the right to make decisions and exercise control over their own lives. Children, young people and their families have the right to be informed about all the aspects of the delivery of support that they receive in a form of language, communication and manner that is understandable to them.
- c. Expressed values and beliefs of participants including; cultural, faith, ethnicity, gender, gender identity age and sex as well as the type of disability taken into account and respected by all employees at Early Autism Services
- d. Privacy is protected in a dignified manner for all individuals; children, young people and families who receive support from Early Autism Services.

3. Policy

3.1. Ethical Conduct

3.1.1. Overview

- a. It is your responsibility to maintain a reasonable level of awareness of current professional information and understand ongoing efforts to maintain your competency in the delivery of support to clients, supervision and learning and development afforded to employees.

3.1.2. Responsibility

- a. Employees are expected to display consistency and integrity in all client interactions.
- b. All employees must follow through on obligations and professional commitments with high-quality work as well as refrain from making professional commitments that cannot be kept.

3.1.3. Reduce and eliminate Restrictive Practices

- a. EAS is committed to reducing and eliminating the use of restrictive practices as per Australian legislation and guidelines.
- b. All EAS employees have a responsibility to reduce and eliminate restrictive practices within their service delivery.
- c. All EAS employees have a duty to report any instances and suspected use of unauthorised restrictive practices.

3.1.4. Confidentiality

- a. All client information, including that of the child, family members and related parties, must be kept confidential. To minimize intrusions on the privacy of clients, employees should only discuss confidential information obtained in a

clinical or consulting relationship with persons directly concerned with such matters. As an employee, you should never:

- i. Speak to parents/guardians about children other than their own.
 - ii. Confirm to others that we work with specific children.
 - iii. Put parents in contact with one another.
- b. If a breach of confidentiality is suspected, it will be taken up by the Clinical Director/Team Leader so that appropriate steps can be taken to remedy the situation.

3.1.5. Dual Relationships

- a. As an employee of Early Autism Services, your only relationship with the family is of a professional capacity to be upheld in delivering services in line with your position description.
 - i. You are not a transporter or a friend.
- b. When sessions are being conducted in the home environment, the parent/guardian should be in the vicinity for the entire duration of the appointment.
- c. No employee should enter a home where a parent/guardian is not present.
 - i. If at any time an employee is asked by a parent/guardian to stay and watch their child or attempts to leave during an appointment, a Supervisor/Manager should be contacted immediately.

3.1.6. Accepting gifts

- a. As an employee of Early Autism Services, you may not receive gifts of monetary value from a client.
 - i. accepting a gift can change the dynamics of the relationship between employee and client.
- b. The cultural backgrounds of some families may necessitate participation in certain rituals (such as accepting tea upon arrival)
 - i. Please notify your Supervisor/Manager promptly if such situations arise so that they can advise accordingly.

3.1.7. Boundaries in the home setting

- a. Even though you work in an intimate environment, you must uphold the standards of the client/clinician relationship.
- b. While in the home, your main focus will always be a client's therapy program.
- c. You should never be entering the home unless you are there for a scheduled meeting or appointment.
- d. Personal information should not be discussed with family members unless it pertains to the services being provided to the child.

3.2. Professional Conduct

3.2.1. Clothing

- a. Dress smart-casual, professionally.
- b. In client-facing roles keep in mind that you are working with children and there will be times when the job will require you to sit on the ground, bend, kneel, squat or lift.
- c. Top clothing must have an appropriate neck length, and sleeves and should not have any inappropriate logos/designs or text on it.
- d. It is suggested not to wear dangling or hooped jewelry such as earrings, bracelets or watches.
- e. Hats are not permitted unless playing outside with a client as these can be distracting.
- f. Closed-toe footwear must be worn.
- g. Pants, skirts and dresses must be worn at an appropriate length (just above the knee).
- h. No clothing worn should have rips or holes.
- i. No blue denim is acceptable.

3.2.2. Language

- a. Keep in mind that you're a guest in clients' homes and representing EAS. Be respectful at all times towards the client, families and any other stakeholders.
- b. Cursing and using terminology phrases that some religious denominations may find offensive is unacceptable.

3.2.3. Attendance

- a. Be punctual to all appointments. Give as much notice as possible if you are running late.
- b. Abide by the Scheduling Policies when requesting leave.
- c. Adhere to appointment cancellation protocol regardless of if the cancellation was initiated by a provider or the client.

3.3. Technology and Social Media Conduct

3.3.1. Social Media

- a. All interactions with a client, family members, caregivers or stakeholders through social media are prohibited.
- b. All activity related to social media is prohibited regardless of the session type.
- c. Do not post information about a client or their programming online (including any social media networking sites) regardless of the site's privacy settings.

- d. Do not make public any client-identifying information (directly or indirectly)

3.3.2. Mobile Phones

- a. mobile phone devices may not be used when in a client's home or during a clinic session regardless of the meeting type.
- b. Restricted activities include (but are not limited to): communicating with others, checking emails, playing games, watching videos or viewing social media content.
- c. Mobile phones should only be used during session times for work-related purposes, such as; contacting a supervisor, remote supervision or emergencies
- d. Do not use a mobile phone during the session without consulting the parent/guardian.

3.3.3. Client or EAS-Owned Electronics

- a. If a client allows usage of their electronics or there is an EAS-Owned electronic device, they may only use it for what has been approved by the client and EAS guidelines.
- b. You should never use Client and EAS-owned devices for purposes such as checking personal email, social media, or any other general personal use.
- c. Ensure that electronic devices are returned to the parent or guardian by the end of the session.

3.4. Guidelines for maintaining confidentiality

3.4.1. When working with Clients, families and stakeholders.

- a. Do not discuss client progress with individuals outside of relevant family members or EAS staff related to the case.
- b. Take photos of clients, their families, or their homes.
- c. Record client information outside of EAS-specific documents
- d. Using client pseudonyms when written communication is necessary to conceal information that may identify the client to others.
- e. Avoid using the same copies of documents across multiple clients.
- f. immediately report any potential breaches of confidentiality to your Clinical Director.

3.4.2. Mandated reporting

- a. In Australian States and Territories, Childcare workers are defined as mandated reporters.

- b. As mandated reporters, EAS employees are bound by law to report any suspicions of child abuse or neglect.
- c. If you suspect abuse or neglect of a client by a family or community member, immediately report the concern to your Clinical Director. They will guide you through the reporting process.
- d. EAS Administration will never discourage the reporting of suspected abuse or neglect and is committed to ensuring that the process is as comfortable as possible.
- e. Reportable Conduct: Reportable conduct encompasses allegations of child abuse (and other child-related misconduct) made against any EAS workers and volunteers by clients, their families, members of the public and/ or other workers and volunteers). The Reportable Conduct Scheme applies to all EAS workers and volunteers, even if the reportable conduct has happened outside the workplace.
 - i. sexual offences committed against, with or in the presence of a child.
 - ii. sexual misconduct committed against, with or in the presence of a child.
 - iii. physical violence against, with or in the presence of a child.
 - iv. any behaviour that causes significant emotional or psychological harm to a child.
 - v. significant neglect of a child.
(for a more detailed list of reportable conduct offences, see the information sheet <https://ccyp.vic.gov.au/assets/resources/RCSInfoSheetUpdates/Information-Sheet-2-What-is-reportable-conduct-22.12.21.pdf>)

3.5. Other Relevant Codes of Conduct

- 3.5.1. [NDIS](#) - Australia
- 3.5.2. [Disability Service Workers](#) - Health and Human Services Victoria
- 3.5.3. [Disability Service Safeguards](#) - Victorian Disability Workers Commission

3.6. Other Relevant Discipline-Specific Documents

- 3.6.1. [Safe Work Australia](#)
- 3.6.2. [Speech Pathology Australia](#)
- 3.6.3. [Australian Psychological Society](#)

3.6.4. [Occupational Therapy Australia](#)

3.6.5. [Association for Behaviour Analysis Australia](#)

4. Violation of the Code of Conduct

4.1. What is a 'Breach' of Code of Conduct

4.1.1. An EAS employee whose action or behaviour does not comply with any portion of the EAS Code of Conduct can be found to have breached the Code (inclusive of acceptable and unacceptable behaviours noted in "Other Relevant Codes of Conduct" 3.5.1-3.5.). Such action or behaviour must be referred to as 'suspected misconduct' until a decision is made that the action or behaviour amounts to a breach of the Code by a person appointed in accordance with the Policy.

4.2. How are reports investigated?

4.2.1. Upon receiving your report, EAS will:

- a. assess the report of Violation of Code of Conduct;
- b. consider whether there are any conflicts of interest prior to investigating;
- c. determine whether external authorities need to be notified;
- d. determine whether and how to investigate.

4.2.2. Where the disclosure assessment indicates an investigation is practical and appropriate, an investigation will be undertaken.

4.2.3. If an investigation is deemed necessary, it will be conducted fairly, objectively and in a timely manner. The investigation process will vary depending on the nature of the Conduct and the amount of information provided.

4.2.4. The appointed Investigator will review the report and escalate as appropriate and coordinate/conduct any required investigations.

4.2.5. EAS may engage the services of independent investigators as required and appropriate.

4.2.6. Any such investigation shall observe the rules of natural justice and the provisions of procedural fairness.

4.2.7. Unless there are confidentiality or other considerations that preclude it, persons to whom the report relates (the subject of allegations) will be informed of any allegation at an appropriate time and given the chance to respond to those allegations.

- 4.2.8. As part of the initial review of the disclosure, an assessment will be made of the potential risk of breach of confidentiality regarding the discloser's identity, and risk of detriment to them.
- 4.2.9. The investigation process will be conducted so as to protect all paper and electronic documents and other materials relating to the disclosure from unauthorised access.
- 4.2.10. Decisions regarding response and investigation methods will be made in consideration of these risks, and suitable measures will be considered and implemented to mitigate these risks as required.
- 4.2.11. When an investigation is commenced, the Investigator will make contact with the person (if possible), advising that:
- a. they have been appointed to respond to the report and conduct an investigation, subject to the clarification of any preliminary matters;
 - b. they will then form a preliminary assessment of whether the alleged Conduct is reasonably capable of meeting the criteria of improper conduct. If unclear about the matter, the Investigator may seek further information from the persons necessary to form a proper view;
 - c. if the Investigator (or reviewing body or panel) considers that the report discloses potential improper conduct, he or she will assess and determine the appropriate manner in which to conduct an Investigation. The Investigator will liaise with the EAS CEO, the EAS Executive Director of People and Culture and other relevant parties (such as the EAS Quality Committee, or other EAS legal or financial advisers) in determining an Investigation Plan and content.
- 4.2.12. Without limitation, an Investigation Plan may address:
- a. a summary of the allegations, the issues to be proven, the possible findings or offences, and the facts in issue;
 - b. the number and identity of witnesses to be interviewed, if any, and the nature and extent of any documents to be reviewed;
 - c. any resources required to conduct the investigation, including the assistance of other EAS people or external assistance or resources;
 - d. the realities of resource allocation affecting the investigation;
 - e. whether the investigation should be conducted in whole or in part by external investigators, in light of the allegations or any other matter; and
 - f. any recommendations to be considered by the Investigator regarding actions to be taken where improper conduct is found to have occurred.

- 4.2.13. The Investigator will then conduct the investigation. The Investigator will be free to depart from, vary or skip any steps identified in the Investigation Plan, depending on the nature of the allegations contained in the disclosure and any matters identified or determined during the investigation.
- 4.2.14. Any individuals who are accused of misconduct in a report (a Respondent) will have an opportunity to respond to allegations before any adverse findings are made and before any disciplinary action (if appropriate) is taken.
- 4.2.15. If there is insufficient information to warrant further investigation, or the initial investigation immediately identifies there is no case to answer, the individual who reported the Conduct will be notified at the earliest possible opportunity.
- 4.2.16. At the conclusion of the investigation, where the discloser has provided a means of contact, EAS will notify them of the outcome of the investigation subject to privacy considerations.
- 4.2.17. If a discloser is dissatisfied with the outcome, they may request that the complaint be reviewed by the CEO or a suitably appointed person or body. Following its review, the person will be notified of the review outcome.

4.3. Outcome of an investigation

- 4.3.1. At the conclusion of the investigation, a report will be prepared to outline:
- a. a finding of all relevant facts;
 - b. a determination as to whether the allegation(s) have been substantiated or otherwise;
 - c. the action that will be taken, which may include disciplinary action and dismissal.
- 4.3.2. The disciplinary action will be dependent on the severity, nature and circumstances of the Conduct.
- 4.3.3. Where possible and appropriate, having regard to EAS's privacy and confidentiality obligations, the person will be informed of the outcome of any investigation into their concerns.

4.4. Protecting a discloser from detriment

4.4.1. As part of the initial review of the disclosure, an assessment will be made of the potential risk of breach of confidentiality regarding the discloser's identity, and risk of detriment to them.

4.4.2. Decisions regarding response and investigation methods will be made in consideration of these risks, and suitable measures will be considered and implemented to mitigate these risks as required.

4.5. Support and fair treatment

4.5.1. EAS is committed to transparency and to building an environment in which people feel free to raise legitimate issues relating to EAS's operations.

4.5.2. Disciplinary action up to and including dismissal in accordance with the Progressive Discipline Policy may be taken against any person who causes or threatens to cause any detriment against a person.

4.5.3. In addition, EAS's usual Employee Assistance Program (EAP) services will be available to all employees affected by the disclosure, should they require that support.

4.5.4. If the disclosure mentions or relates to employees of EAS, EAS will take steps to ensure that those individuals are treated fairly. Typically, this would include giving those persons an opportunity to respond to the subject matter of the disclosure having regard to principles of procedural fairness. In addition, action would only be taken against such a person if there is cogent evidence of wrongdoing.

4.6. Support for Persons Implicated

4.6.1. No action will be taken against employees who are implicated in a report under this Policy until an investigation has determined whether any allegations against them are substantiated. However, an employee who is implicated may be temporarily stood down on full pay whilst an investigation is in process, or may be temporarily transferred to another office, department or workplace, if appropriate in the circumstances. Any such stand-down or temporary transfer may only continue for the duration of the investigation. If the investigation determines that the allegations are not substantiated, the employee or officer must be immediately reinstated to full duties.

4.6.2. Any disclosures that implicate an employee must be kept confidential, and should only be disclosed to those persons who have a need to know the information for the proper performance of their functions under this Policy, or for the proper investigation of the report.

- 4.6.3. An employee who is implicated in disclosure has a right to be informed of the allegations against them and must be given an opportunity to respond to those allegations and provide additional information, if relevant, in the course of an investigation into those allegations.
- 4.6.4. Support available for persons implicated in a report under this Policy includes:
- a. connecting the person with access to the Employee Assistance Program (EAP)
 - b. appointing an independent support person from the People & Culture team to deal with any ongoing concerns they may have
 - c. connecting the person with third-party support providers such as Lifeline (13 11 14) and Beyond Blue (1300 22 4636).

5. Definitions

5.1. Definitions

Term	Meaning
Early Autism Services	means Early Autism Services (Australia) Pty Ltd ABN 39 632 134 028
Clients	means clients of Early Autism Services (including an NDIS participant).
Key Management Personnel	means key management personnel involved in Early Autism Services as outlined in NDIS registration
Legislation Register	means the register of legislation, regulations, rules and guidelines maintained by Early Autism Services.
Policy Register	means the register of policies of Early Autism Services.
Principal	means Chief Executive Officer
Worker	means a permanent, fixed term or casual member of staff, a contractor or volunteer employed or otherwise engaged by Early Autism Services and includes the Principal.

6. Policy Governance

6.1. Relevant Legislation, Regulations, Rules and Guidelines

- 6.1.1. Legislation, Rules, Guidelines and Policies apply to this Policy and Related Documentation as set out in the Legislation Register.

6.2. Related Documentation

- 6.2.1. The application of the above policy by Early Autism Services is supported in part by and should be read alongside the Policies and Procedures and related documentation corresponding to this Policy in the Policy Register.

6.3. Inconsistency

- 6.3.1. If and to the extent that the terms of this Policy are or would be inconsistent with the requirements of any applicable law, this Policy is deemed to be amended but only to the extent required to comply with the applicable law.

6.4. Policy Details

Policy Author	People, Culture and Quality Business Partner
Executive Owner	Executive Director of People, Culture and Partnerships
Approved By	Chief Executive Officer
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