

Presentation by:

Kasy Chambers
Executive Director
Anglicare Australia

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Getting prepared for a Royal Commission

Commission: insights from the Aged Care Royal Commission

Anglicare Australia works with 1 in 20 Australians in every state and territory, for over 200 years and in just about every area you can think of. Therefore we have had experience of and exposure to a number of Royal Commissions in this “age of Royal Commissions” as Commissioner Kenneth Hayne has called it.

Institutional Responses into Child Sexual Abuse
Don Dale Correctional Centre in the NT
Banking (on behalf of vulnerable people financially abused by banks)
Aged care safety and quality
Disability

A few general things to state, these are all observations and opinions.

A Royal Commission is not a court

If your organisation is called before the Commission in response to a complaint it is worth remembering that this is not the time for you to cross examine the complainant. The RC will have rehearsed and investigated with the witness. Don't be defensive - you can't win!

People need to be heard, one of the greatest outcomes from the child sexual abuse RC was people feeling they had been heard. Sometimes for the first time in decades.

Royal Commissions are about personal stories as well as the systemic issues.

And a couple of thoughts about the disability commission in particular

It is very very broad. It will cover not just your services to people with disabilities but your HR, the access in your generic services, education, etc.

And finally this is about people with disabilities. If we remember that we are all in this, all doing what we do to increase the accessibility of society, the overall improvement of life outcomes, the visibility and inclusion of children with disabilities. If at the end of this RC we can point to outcomes like these then it is very worthwhile.

So my philosophy is to be open to the RC, be cooperative, we will have some info and examples that are helpful to their process.

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Corporate Governance

One thing we can see from every RC that has reported so far is that the fish rots from the head - it is all about culture and culture is led by the Board and senior leadership.

So what is your board doing to prepare?

I would recommend that the RC is a standing item at each meeting. My board papers would have an update on anything happening with regards to the commission; I would follow this with info about what you are doing in your organisation to prepare and respond. It is a useful lens.

Don't forget to review your governance standards and board orientation, etc. It is worth reviewing these and making sure that they are jargon free - could a client understand the ownership structure?

Another very pertinent point is thinking about how the board hear from your clients. Whether this is a complaint or a general comment recent corporate governance developments have been interpreted by some in such a way that has meant the board members and clients never meet.

Clinical governance

This is generally a newer concept in services outside the health sector and so isn't as vulnerable to some of the risks of other processes. But make sure it is in order, that people understand their obligations and that it isn't only held at senior management level.

Record keeping

Get your records and paperwork in order now. Do a retrospective audit, if there is anything missing look for it look for it and look for it again! If there are any gaps in your records document the reason (a flood, destroyed in the normal course of records management, lost in transfer of management, etc).

This retrospective audit will help you think about what you should be doing into the future which of course is a good discipline for you anyway. This is the sort of thing that you can be reporting to your board.

In the aged care RC we had less than three weeks to respond to a questionnaire. This was compounded by the fact that the RC had an old mailing list and many letters went to dead email accounts and were not received. This was not seen by the RC as a reasonable excuse not to respond in time.

We didn't know exactly what the RC would ask but organisations that had their records in order had a much easier task to respond within the timeline.

Clients

Give some thought to how you will communicate about the RC with clients and their families, and your community in general. Here is another issue for your management and board, what is your risk appetite for this - will you go for reactive risk averse communications only? Or will you seek to play a role of communicating about the RC in general to your clients, staff and general community?

We have generally determined towards the latter end of the continuum. We have written to our clients and their families about the RC and its processes and given them contact details etc.

Peak bodies and sector support

As Anglicare Australia we immediately set into place a teleconference to enable people discuss how they were each interpreting the questions in the call for information from the Royal Commission. We were also able to share the letter received so that members did not have to wait to see if they were to receive one, or worry about the rumors about what was in the letter given that so many went to dead addresses.

We then shared the info that people had returned with each other and held a face to face meeting. At this meeting we were able to hear from a lawyer who had represented organisations at the banking and child abuse RC's.

Teleconference's before and after each hearing is enabling us to learn as we go (the commissioners really like to see that their efforts are being taken note of along the way).

Anglicare Australia is fairly unique in that our members don't compete with each other, are linked by shared values and we exist to help members help each other.

But I do encourage you to use your networks as best you can.
