



OmbudsmanSA

A guide to writing an ISG Appendix

ISG

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See www.ombudsman.sa.gov.au/isg for ISG resources and information.

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Introduction



This document is a guide for agencies and organisations to follow when implementing the *Information Sharing Guidelines for Promoting Safety and Wellbeing (ISG)*; it outlines the essential requirements of an ISG Appendix. An ISG appendix is a procedure, unique to each organisation that supports implementation of the ISG within the context of that particular organisation.

Background

In 2008 the South Australian Government approved the *Information Sharing Guidelines for Promoting the safety and wellbeing of children, young people and their families* for use by state government agencies and non-government organisations (NGOs). The guidelines defined a process for information sharing that promoted earlier and more effective service coordination in response to child protection concerns and where there were risks to the safety and wellbeing of parents and carers.

In 2013 the South Australian Cabinet directed that the scope of the ISG should be broadened to include information sharing for all adults irrespective of their status as parents or caregivers; and relocated responsibility for them to Ombudsman SA.

With issues such as homelessness, mental illness, family violence, drug and alcohol abuse or gambling often co-existing, information sharing can promote early intervention and ensure that an informed interagency and multi-disciplinary response is provided.

Current situation

The new *Information Sharing Guidelines for promoting safety and wellbeing* is now available and can be downloaded from <http://www.ombudsman.sa.gov.au/isg/>

This enables service providers to apply the expanded guidelines to all clients with whom they work, and it aligns information sharing practice across both adult and child services. The ISG:

- provide a process for information sharing when it is believed a person or a group of people are at risk of harm (from others or as a result of their own actions) and adverse outcomes might reasonably be expected unless appropriate services are provided
- explain how to share information appropriately so that services to those at risk of harm are provided earlier and are better coordinated
- provide clear and consistent steps to work out if sharing information is appropriate, while maintaining the balance between the right to safety and wellbeing and the right to privacy.

The new ISG aligns
information sharing
practice across both
adult and child services.

Does the ISG apply to my organisation?

The ISG is a South Australian Cabinet Direction and must be implemented by relevant government agencies and NGOs. The ISG applies to a wide range of government agencies and NGOs acting under a contract with the state government including (but not limited to) those working in health, education, policing, juvenile justice, disability, housing, mental health, family violence, drug and alcohol services, Aboriginal community controlled services, multicultural services, aged care, correctional services, and investigations and screening units. They include people doing paid or volunteer work in these sectors who provide services partly or wholly to:

- children and young people
- families
- pregnant women and their unborn children
- adults.

The ISG is a state wide policy framework approved by the state government; it sets the overarching approach to information sharing that is being adopted by relevant government agencies and non-government organisations in South Australia.



Why does each organisation need to develop its own ISG appendix?



Commonly policies and procedures go hand in hand. A policy is a statement of intent, commonly comprising an overarching framework and guiding principles. A procedure outlines the practice, systems and course of action to be taken to implement the policy.

The ISG is a state wide policy applying to both government agencies and NGOs. However, each agency and organisation is unique, so staff need a procedure providing instruction about how to implement the ISG within their own organisation; in this case, that procedure is called an ISG appendix.

Your ISG appendix will create links to your organisation's other relevant policies and procedures, relate to your services and structure, and be focussed on delivering support to your staff and clients.

Your appendix should be straightforward and answer the following questions for workers:

- When am I allowed to or prevented from sharing information?
- Do I need consent to share personal information?
- Are there consent forms or processes I should be using?
- Do I need someone's approval before I share information?
- What form of record keeping should I follow?
- Who can I go to if I need help with an information sharing decision or dispute?
- How do the ISG relate to our other policies and procedures?
- Where can I get information about the ISG?

Staff need to be inducted and trained in the ISG as they would any other organisational policy or procedure.



Getting started



Once an agency or organisation has decided to implement the ISG, these tips should help steer you in the right direction:

- Carefully read the ISG (see <http://www.ombudsman.sa.gov.au/isg/>)
- Treat your approach to developing an ISG appendix as you would any other policy or procedure. If you have a process in place now for the development, endorsement and review of policies and procedures, that process should be followed
- The ISG does not stand in isolation; make sure other relevant policies and procedures are reviewed so that they align with the ISG (for example, record keeping and seeking client consent. Which job and person specifications should reflect new responsibilities to support and approve information sharing without consent?)
- You may talk to other organisations implementing the ISG, to learn from their experience.
- A position has been established to provide independent advice and support to agencies and organisations about the implementation and application of the ISG. For assistance contact:
 - SA Principal Advisor Information Sharing
Ombudsman SA
Phone (08) 8226 8699;
1800 182 150 (toll free outside metropolitan area)
Email isg@ombudsman.sa.gov.au
<http://ombudsman.sa.gov.au/isg/>
- Check the Ombudsman SA website regularly to see what new resources, templates and fact sheets are available.

Cite ISG page references throughout your appendix and include hyperlinks where appropriate.

It is important all staff understand that the ISG and your Appendix go together.
Start your Appendix with this information:

Every ISG appendix should be read in conjunction with
Information Sharing Guidelines for Promoting Safety and Wellbeing

(see <http://ombudsman.sa.gov.au/isg/>)



Together, these two documents outline
the approach to information sharing.

What does an organisation's ISG appendix need to cover?



An ISG appendix must include the following sections:

- 1. appropriate information sharing processes (legislative requirements, related policies and procedures)**
- 2. ISG decision making steps and practice guide**
- 3. protocols for gaining consent from clients and for discussing limited confidentiality**
- 4. lines of approval and supervision**
- 5. documentation practice and record keeping**
- 6. cultural guidance**
- 7. sample case studies.**

4.1. Following appropriate information sharing processes

This section of the appendix needs to explain how, together with the ISG, your ISG appendix outlines appropriate information sharing practice. Reference should be made to the ISG STAR principles - Secure, Timely, Accurate, and Relevant (see ISG page 12). Importantly, the practice derived from the STAR principles applies to both state and commonwealth privacy regimes.

This section must also explain if there are any laws that apply to your organisation that specifically require, restrict or prevent information sharing. Agencies and organisations are bound by different pieces of legislation, so this section of an appendix will need to be tailored to your particular context.

Legislative provisions concerning information sharing and confidentiality do not necessarily mean you are not able to use the ISG; rather the guidelines should be used in a manner that is consistent with legal obligations.

Privacy legislation for NGOs

The Commonwealth *Privacy Act 1988* (Privacy Act) regulates the handling of personal information about individuals. This includes the collection, use, storage and disclosure of personal information. The Privacy Act includes a set of privacy principles, called the Australian Privacy Principles (APPs) that apply to the handling of personal information by large businesses, Commonwealth government agencies, health service providers and some small businesses and NGOs. The Act identifies 'general permitted situations' for the collection, use or disclosure of information. General Permitted Situation 16A is most relevant allowing information to be shared without consent where:

- 1(a) it is unreasonable or impracticable to obtain the individual's consent to the collection, use or disclosure; and
 - 1(b) the entity reasonably believes that the collection, use or disclosure is necessary to lessen or prevent a serious threat to the life, health or safety of any individual, or to public health or safety
- or
- 2(a) where the organisation has reason to suspect unlawful activity, or misconduct of a serious nature and reasonably believes that the collection, use or disclosure is necessary in order to take appropriate action in relation to the matter

Information about Commonwealth privacy legislation and *Privacy Amendment (Enhancing Privacy Protection) Act 2012* can be found at the website of the Office of the Australian Information Commissioner at <http://www.oaic.gov.au/>

Information Privacy Principles for SA Government Agencies

In addition to complying with the ISG, South Australian Government agencies are also required to comply with Premier & Cabinet Circular No 12, the *Information Privacy Principles (IPPs) Instruction* (also a Cabinet Direction). The IPPs guide the collection, storage, use and disclosure of personal information by state government agencies. The ISG are complementary to the IPPs. The IPPs are available at http://dpc.sa.gov.au/sites/default/files/pubimages/Circulars/PC012_Privacy.pdf.

Local Government

Currently there is no privacy legislation that applies to Councils in South Australia to regulate the manner in which personal information is handled. The LGA relies on the Information Privacy Principles Instruction (IPPs) set by the Department of Premier and Cabinet to guide decision making about the collection, storage, use and disclosure of personal information. The LGA has drafted a generic template for an ISG appendix that can be adapted and applied by individual Councils. For further information contact the LGA (see <http://www.lga.sa.gov.au/page.aspx?u=191>).

Children's Protection Act 1993

Under section 11 of the *Children's Protection Act 1993*, many service providers, teachers, police officers and medical practitioners are required to notify the Child Abuse Report Line (CARL) if they **suspect on reasonable grounds that a child has been or is being abused or neglected. The ISG does not alter these mandatory notification obligations (see step 8 ISG).**

When using the ISG, **as soon as suspicion of child abuse or neglect arises CARL should be notified** by phoning 13 14 78.

Notification of
SUSPICION of child
abuse or neglect is
required by law and
consent is not required.

Explaining legislative obligations

Whilst actively maintaining privacy and confidentiality generally defines how agencies and organisations manage information, there are specific exemptions that restrict, prevent or demand disclosure of information. Where these exemptions apply, an ISG appendix must explain how information is shared to comply with legislative provisions and cabinet directions or Chief Executive authorisations. The challenge is to simplify what this means for staff and explain that in your ISG appendix.

In depth citing of Acts and Regulations will not be helpful to operational staff; service providers need to simply understand when they can, can't or must share information, for example:

- the *Correctional Services Act 1982* (Section 85CA) requires information sharing by the Chief Executive of SA Health where it is 'reasonably required for treatment, care or rehabilitation' of a prisoner
- the *Intervention Orders (Prevention of Abuse) Act 2009* (Section 38) requires any SA public sector agency to 'make available to a police officer information that could reasonably be expected to assist in locating a defendant on whom an intervention order is to be served'.

In these two examples, information must be shared and consent is not required, however the following elements of the ISG process can still apply:

- step 1 – make information sharing Secure, Timely, Accurate and Relevant (STAR)
- step 2 – verify the identity of the person seeking information
- step 9 – keep appropriate records of information sharing.

“Any fool can make things complicated, but it requires a genius to make things simple.”

E.F. Schumacher

Some things to think about when writing this section of your appendix:

If you do not understand how privacy legislation applies to your organisation, should you consider seeking legal advice?

Keep this section simple – it will not be helpful to operational staff if this section is complicated by lengthy legal considerations – staff simply need to understand when they can, can't or must share information.

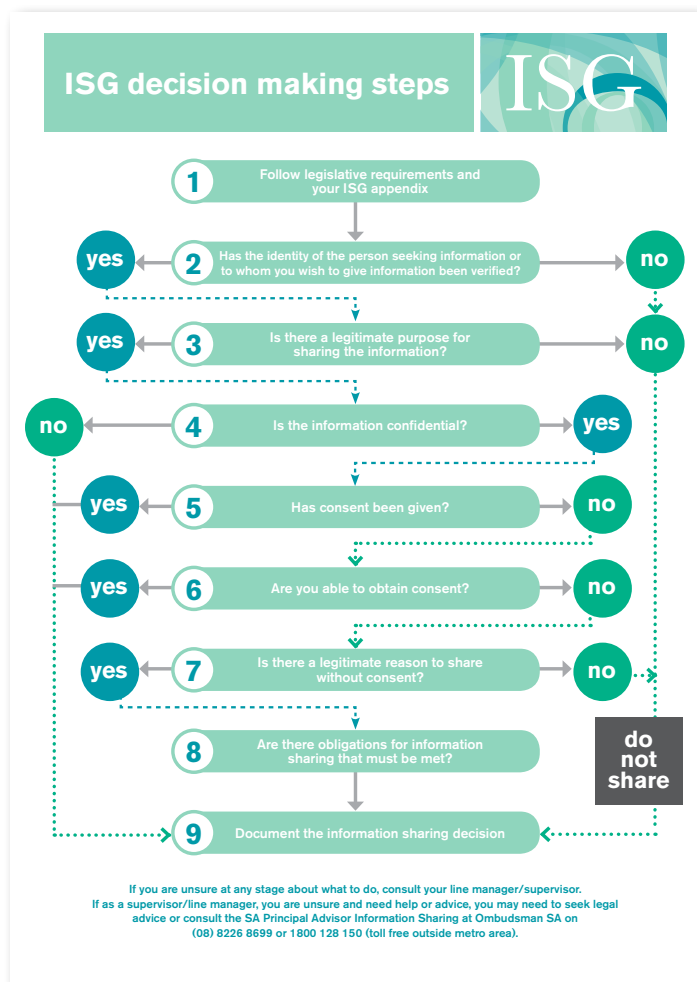
Each agency and organisation ISG appendix should explain:

- the relevant legislation and privacy provisions that apply to their organisation
- circumstances where information sharing is required, restricted, or prevented
- situations where disclosure is authorised by the Chief Executive.

It may be helpful to provide contact details of staff who can provide advice about these matters.

4.2. ISG decision making steps and practice guide

These two charts combined describe the steps for staff to follow when making information sharing decisions; **include this information in your appendix** (both pages can be downloaded from <http://www.ombudsman.sa.gov.au/isg/>).



Encourage your staff to use these flow charts on a daily basis to assist them in making appropriate decisions about information sharing.

4.3. Protocols for gaining consent and for discussing limited confidentiality

Steps 4, 5 and 6 of the ISG flow chart deal with client consent (see ISG pages 14 to 17). This is an important section of an ISG appendix. Your appendix should explain how and when to seek consent and what support or resources are available for advice about obtaining consent and conducting risk assessment.

The use of organisational risk assessment tools, policies and procedures will help to determine the level of adversity being faced. It can also help to determine if it is reasonable and practicable to seek consent for information sharing.

Current experience of those service providers using the ISG shows that:

- most information sharing occurs with the consent of the people concerned
- most authorisation of information sharing decisions occurs through routine professional discussion and consultation between colleagues and line managers
- very few circumstances arise where information is shared without consent if regular discussion occurs with clients about their circumstances and what services can be coordinated to help them out.

The key elements to consent are:

- consent must be provided voluntarily – without threat, pressure or attempting to overpower someone's will
- the person must be adequately informed of the implications of granting or refusing consent
- the person must have the capacity to understand, provide and communicate their consent.

Gaining a person's informed consent is a process in which:

- they are told (or get information in some other way) about the possible implications and benefits of their information being shared
- they have the chance to ask questions and get them answered to their satisfaction
- they have had time (if needed) to discuss matters with family or support people
- they are able to access advice and information that helps them to make decisions about their best interests
- they are given an opportunity to communicate their decision to the worker seeking their consent
- they understand that, depending on circumstances, their information may be shared with or without their consent if workers believe sharing is necessary to prevent serious threats to life, health or safety, and it will help to bring together better coordinated services to address safety and wellbeing concerns.

Competence may not only be about age or intellectual capacity or mental health – it may also be influenced by literacy or numeracy:

- It may be necessary to talk through information sharing at length.
- Can clients demonstrate their understanding by discussing the implications?
- Can they tell you what it means for them?

- Can they retain the information to the extent necessary to make the decision?
- Are there cultural issues you need to consider? For example, they may be competent but culturally do not have the 'authority' to provide consent.

Seek informed consent to share information wherever it is considered reasonable and practicable to do so.

Discussing limited confidentiality

Many NGOs provide their consumers with a Privacy Collection Notice that explains how their information is stored, used or shared. The Collection Notice also records the understanding of circumstances where their information may be shared with or without their consent.

During intake to a service, a discussion about the potential to provide better coordinated services by working with other agencies would naturally include an explanation about the likelihood of information sharing. It should be explaining the circumstances where it may be necessary to share information without consent. It is recommended that all agencies and organisations use a general statement on intake and consent forms or provide clients with a brochure explaining the organisations approach to information sharing (see example below).

This agency/organisation will work closely with other agencies to coordinate the best support for you. This means your informed consent for the sharing of information will be sought and respected in all situations unless:

- *we are obliged by law to disclose your information regardless of consent or otherwise*
- *it is unreasonable or impracticable to gain consent or consent has been refused and*
- *the disclosure is reasonably necessary to prevent or lessen a serious threat to the life, health or safety of a person or group of people.*

Some things to think about when writing this section of your appendix

- What organisational policies and protocols, brochures or forms are relevant and should be referenced or updated?
- Do your policies and procedures describe how to interview clients, how to determine if it is safe to seek consent, or determine a person's capacity for decision making?
- What risk assessment tools or resources should be referenced?
- Include relevant ISG page number references

Questions which may assist staff when considering the issue to share information without consent include:

1. What resources or support do I need to help me do a risk assessment or decide if it is safe or possible to obtain consent?
2. What might be the consequence for the client and others if no one shares information or coordinates services?
3. If information is not shared, will a person or group of people be at increased risk of serious harm from others or from themselves?

This is an example of a Consent to Share Information Form that could be adapted to suit organisational requirements (see <http://www.ombudsman.sa.gov.au/isg/>).

Insert organisation name here will comply with relevant privacy legislation and in the standards set for dealing with personal information outlined in our Policy, Practice Guidelines and Procedures.

Please discuss the following statement with clients before proceeding:

This organisation will work closely with other agencies to coordinate the best support for you. Your informed consent for the sharing of information will be sought and respected in all situations unless:

- ***we are obliged by law to disclose your information regardless of consent or otherwise***
- ***it is unreasonable or impracticable to gain consent or consent has been refused, and,***
- ***without information being shared, it is anticipated a child, young person or adult will be at risk of serious harm, abuse or neglect, or pose a risk to their own or public health or safety.***

Consent to Share Information Form

Primary Purpose Consent

The primary purpose(s) of this service has been explained to me and I consent to the sharing of my personal information to assist in achieving the primary purpose(s). YES NO

Proposed Use and Disclosure of my personal information

I understand that the following service(s) are recommended and relevant information about me may be forwarded to the agency(s) that provide these services, in order that I receive the best possible service.

Service Type	Name of Agency	Type of Information (including limits as applicable)

Record of Client Consent

Or

To ensure the client is able to make an informed decision about consent to the disclosure of their information, the service

Written Client Consent

My worker has discussed with me how and why certain information about me may need to be provided to other service providers.

I understand the recommendations and I give my permission for the information to be shared as detailed above.

Signed: _____

Date: / /

Signed by: Client OR Authorised Representative

Name: _____

Witnessed:

Verbal Consent

Workers Use Only

Verbal consent should only be used where it is not practicable to obtain written consent.

I have discussed the proposed referrals with the client or authorised representative and I am satisfied that they understands the proposed uses and disclosures, and have provided their informed consent to these.

Signed: _____

Name (Worker): _____

Date: / /

Position:

provider should complete these steps: (tick when completed)

1. Discuss with the client the proposed referral to other services/agencies.
2. Explain that the client's information will only be released if the client has agreed and advise that services will still be provided even if the client does not want information disclosed.
3. Explain that information will be shared without consent if there is a serious threat to the health or safety of person(s), to report illegal activity or is required under law.
4. Provide the client with our brochure about privacy.

4.4. Following lines of approval/supervision

This section of your appendix explains who in your organisation workers should discuss matters with to determine:

- if there is a justified reason to share?
- what and how much should be shared?
- if it is reasonable and practicable to seek consent?
- what evidence is available and what are the risk assessment outcomes?
- with whom and in what timeframe should information be shared?
- who can approve information sharing without consent or when refusing a request to share?
- who else in the organisation should workers consult if the relevant line manager is not available?

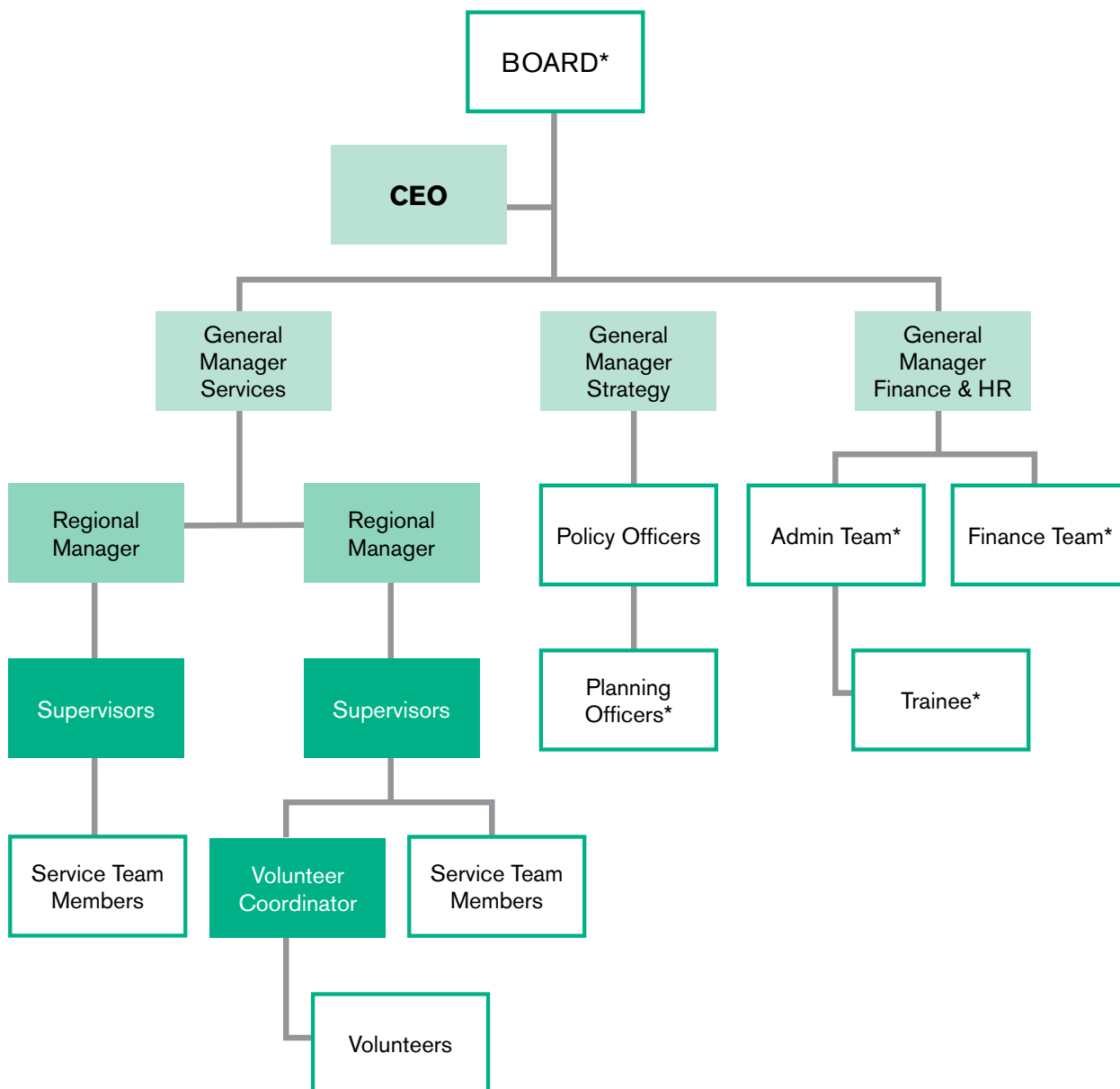
The following table and organisation chart are examples of how some organisations implementing the ISG have outlined for staff their processes for support, approval and supervision of information sharing.

Decisions to share without consent or refuse a request to share information with another organisation must be based on sound risk assessment and approved by an appropriate supervisor or manager.

Positions providing services to clients	Is approval from line manager required for information sharing: • without consent • when refusing to share	Line manager / Supervisor/ Coordinator
Team Leaders, Managers, Supervisors, Volunteer Coordinators	NO	CEO, Regional Directors, Service Managers
Service Team Members	YES	Supervisors, Team Leaders, Managers
Volunteers	YES	Volunteer Coordinator
*Policy Officers	YES	General Manager Service Development
*Planning Officers	YES	General Manager Service Development
*Finance, Administration and HR staff	YES	General Manager Finance & HR

* Note: it is unlikely that these staff will be involved in information sharing

In this organisational chart, those people who support and authorise information sharing decisions are shaded green. The senior managers are shaded in lighter green because it is likely they will only be called upon to make a decision when there is disagreement or supervisors are unsure.



			These people may help staff to make information sharing decisions and can approve information sharing without consent
			These people need approval to share without consent

* Note: it is unlikely that these positions will be involved in information sharing

4.5. Documentation practice

Some organisations will use existing client databases for recording ISG activity, some will have a client contact form they already use that can be adapted to include the ISG, others may need to develop a new client record keeping procedure.

Step 9 of the ISG Flow Chart asks that you document the information sharing decision.

- **You must record all decisions when information is shared without consent.**
- **You must also record when you refuse a request to share information or when an organisation refuses to share with you.**

It is best practice to record all circumstances where information is shared with consent and without consent.

It is preferable to record all significant information sharing actions such as:

- if consent was sought and granted
- risk assessment
- if relevant, reasons for overriding the client's wishes or for not seeking consent
- if relevant, reasons for refusing an information sharing request
- advice received or requested from others
- what information was shared and with whom
- what follow up action is planned.

The following table has been developed by organisations implementing the ISG. You may wish to consider including it in your ISG appendix.

Information sharing situation	What to record
1. Information is shared with consent	<p>Copies of written consent and file note of verbal consent recording:</p> <ul style="list-style-type: none"> ▪ who gave it, when and to whom ▪ what the consent related to ▪ information sought, provided or received ▪ outcomes and follow-ups
2. Information is shared without consent (by you or to you)	<p>Record:</p> <ul style="list-style-type: none"> ▪ why obtaining consent was unreasonable or impracticable ▪ line manager's approval, if required ▪ what is shared, when and by whom ▪ the agency and the office or officer involved (receiving and providing) ▪ outcomes and follow-up
3. Information sharing request is refused (by you or to you)	<p>Record:</p> <ul style="list-style-type: none"> ▪ the purpose (the immediate or anticipated risk the request was intended to address) ▪ reason given for refusal ▪ approval from line manager ▪ outcome of any subsequent follow-up

Some things to think about when writing this section of your appendix:

- Your appendix needs to tell staff what is to be documented, and where and how information is to be stored.
- Which existing record keeping policies and procedures need to be updated to incorporate the ISG approach to information sharing?
- Include relevant ISG page number references (ISG page 18)

SAMPLE FORM

If you do not have a procedure for client record keeping, here is an example of a form that could be adapted for documenting information sharing:

(insert your organisation/agency name) INFORMATION SHARING FORM

To be used in conjunction with *Information Sharing Guidelines for Promoting Safety and Wellbeing* (ISG) and your organisation's ISG appendix. For the ISG and other resources see www.ombudsman.sa.gov.au

This form is to be completed and retained as a record of information sharing.

You must record decisions to share without consent and refusal to share (either to you or by you).

It is also important to record information sharing decisions at all significant steps in the process. This includes:

- whether consent was sought
- reasons for overriding the client's wishes or for not seeking consent
- advice received from others
- reasons for not agreeing to an information sharing request
- what information was shared.

Part A contains information about:

- the government agency or non-government organisation requesting information
- verifying the identity of the person seeking or sharing information
- identity of the individual/family
- what information is requested
- the reason for requesting information
- details about seeking consent
- the decision to/not to share.

Part B documents the information given or received and describes what service delivery has been delivered or is required as a result of the information sharing.

Part A INFORMATION SHARING DOCUMENTATION

Date of request		Respond by (date)		
Degree of urgency	<input type="checkbox"/> Immediate/today	<input type="checkbox"/> Within 5 days	<input type="checkbox"/> Within 10 days	
External agency name				
Contact person				
Contact details				
Person/group information is about	Given name	Last name	Date of birth	
Information being sought or shared and why:				
Consent:	<input type="checkbox"/> not sought	<input type="checkbox"/> granted	<input type="checkbox"/> refused	
Reason for information sharing without consent or refusing to share:				
Information sharing without consent or refusal	Authorised by: name (print)			
<input type="checkbox"/> Approved <input type="checkbox"/> NOT approved	Signature			

Part B

INFORMATION SHARED AND/OR OUTCOME

Information shared:

I have followed the ISG “Decision Making Steps and Practice Guide”.

Signature

Name:

Format in which information was provided

Phone

Email

Fax

Meeting

What has happened as a result of information sharing?

What follow up action is required by our organisation?

Person responsible (name and title)

When

4.6. Examples of case studies

Section 4 of the ISG (see page 27) contains case studies outlining a range of information sharing scenarios. However, for staff to fully understand how the ISG apply in your agency or organisation, it is preferable to include in your appendix examples of case studies from your own operational environment.

Your case studies should help staff work out, in the context of your clients and services, how to apply the ISG, including:

- when to share
- when not to share
- when to request information
- what policies and procedures to use (for example documentation, risk assessment)
- how to go about seeking consent
- identify key contact people and resources (for example, who can approve information sharing without consent or give cultural advice).

Case studies should spell out very clearly the dilemmas and decisions your staff could be expected to make when implementing the ISG.

It is advisable to ask staff to provide case studies from their experience. You might want to think about instances where staff previously wanted to support a client and where information sharing with another provider could have made a difference.

It may be helpful to outline what might be consequences or outcomes from failing to share information.

A good scenario might:

- be based on real life experience, or developed from an imagined situation that resembles real life
- outline the thinking and action taken by going through each of the ISG decision making steps
- illustrate the benefits of sharing information with another party (for example, improved outcomes and service supports which would not have occurred if the information had not been shared)
- explain the use of risk assessment tools (outlining circumstances where information sharing with and without consent occurs based on evidence gathered through risk assessment).

Some things to think about when writing this section of your appendix:

Case studies need to reflect appropriate information sharing practice, use the ISG two page Decision Making Steps and Practice Guide to check off each stage of your scenario. For example, in your case study, has the identity of the person seeking information been verified, is there a justified reason for sharing, is it safe to seek consent, if there is a need to share without consent who approves it, where are records made, what follow up action might be required?

4.7. Cultural guidance

Your organisation's ISG appendix should include information about your organisation's services, resources, policies, and systems that support Aboriginal and Torres Strait Islander and culturally and linguistically diverse (CALD) people.

You may wish to reflect some of the following cultural considerations in your appendix:

- In order to make sensitive and informed professional judgements about a person's needs, a parent or carers' capacity to respond to their needs, or about family wellbeing or public safety, it is important that service providers are sensitive to different lifestyles and family structures and to child rearing patterns that vary across racial, ethnic and cultural groups. Providers should also consider the influence their own values, attitudes and behaviour may have when faced with supporting people with different religious beliefs and/or cultural traditions.
 - Be aware of other factors such as social exclusion, low income, unemployment, and homelessness that can further impact on individuals and groups.
 - Within different racial, ethnic and cultural groups, community and family life may be structured or organised differently from your own. For example, in many Aboriginal groups, sisters may be the daughters of an aunt and an aunt may be the person responsible for guidance and discipline.
 - You may need to consider who 'owns' the information you are asking permission to share. Those with the authority to give consent may not be who you would expect. There may also be significant repercussions within a community and for other workers from the same cultural background as a result of seeking consent or sharing information.
 - Cultural factors do not excuse acts or behaviour which places a child, young person or adult at risk of harm, abuse or neglect. Service providers should be aware of and work with the strengths and support systems available within families, ethnic groups and communities, which can be built upon to help safeguard against threats to safety and wellbeing.
- It is important to guard against cultural myths and stereotypes – both positive and negative. Anxiety about being accused of racist practice should not prevent the necessary action being taken to ensure safety and promote a child, young person or adult's wellbeing. Careful evidence-based assessment of a person's needs, strengths and difficulties, understood in the context of the wider social environment, should help to avoid any distortion of professional judgements based on fear of being seen to act in a way that is culturally inappropriate.

When implementing the ISG, focus on addressing threats to safety and wellbeing.

Some things to think about when writing this section of your appendix:

In SA there are a range of organisations and resources that may assist staff to make decisions and provide services that are culturally appropriate. You may wish to list some of the following organisations in your appendix.

Useful resources

Nunkuwarrin Yunti Inc

Nunkuwarrin Yunti provides health care and community support services to Aboriginal and Torres Strait Islander people.

Contact details:

182–190 Wakefield Street ADELAIDE SA 5000

Telephone: (08) 82235217

Website: www.nunku.org.au

Aboriginal Health Council of South Australia Inc (AHCSA)

AHCSA is the peak body representing Aboriginal community controlled health and substance misuse services in SA at a state and national level.

Contact details:

9 King William Road UNLEY SA 5061

Telephone: (08) 8273 7200

Email: ahcsa@ahcsa.org.au

Website: www.ahcsa.org.au

Multicultural SA

Multicultural SA's role is to:

- increase awareness and understanding of the ethnic diversity of the South Australian community and the implications of that diversity
- advise the government and public authorities on, and assist them in, all matters relating to multiculturalism and ethnic affairs.

Contact details:

Telephone: 61 8 8207 0751

Email: dcsimulticulturalsa@sa.gov.au

Website: www.multicultural.sa.gov.au

Interpreting and Translating Centre (ITC)

ITC provides comprehensive, high quality, efficient, confidential and professional interpreting and translating services.

Contact details:

Toll Free: 1800 280 203

Email: itc@sa.gov.au

Website: www.translate.sa.gov.au

Migrant Resource Centre of South Australia

MRCSA is a community settlement service agency for migrants and refugees in South Australia.

Contact details:

Telephone: (08) 8217 9500

Email: admin@mrcsa.com.au

Website: www.mrcsa.com.au

Multicultural Communities Council of SA

MCC is the peak organisation for cultural and linguistically diverse (CALD) communities in South Australia.

Contact details:

Telephone: (08) 8345 5266

Email: mccsa@mccsa.org.au

Website: www.mccsa.org.au

Multicultural Youth South Australia Inc (MYSA)

MYSA is an advisory, advocacy and service delivery body for young people from refugee and migrant backgrounds aged between 12 and 30 years in South Australia.

Telephone: (08) 8212 0085

Email: info@mysa.com.au

Website: www.mysa.com.au

Use of translators and interpreters

Multicultural SA offers an accredited translation service through the Interpreting and Translating Centre (ITC).

Identifying and arranging for the most appropriate interpreter

When arranging for an interpreter, ITC will need to know any special requests in terms of:

- age
- preferred gender (bearing in mind some of the traditional views held)
- language – including dialect. (There are many dialects within the same country and also within Aboriginal clans.)
- any possible conflict of interest
- if necessary, the nature of the matter to be discussed. This allows the interpreter to make an informed choice about their involvement.

ITC will advise the name of the interpreter.

Practitioners should always be mindful that interpreters can often be influential and closely linked with the people from their own ethnic communities.

Briefing the interpreter before the interview

Be clear about roles and responsibilities. The interpreter should translate what you say and what the person says. It may be wise to inform the interpreter of the subject matter to be discussed.

Information that the interpreter can supply

The interpreter's role is to strictly interpret questions and answers. They will not give opinions as to the validity or otherwise of a statement or event.

General principles when working with an interpreter

The following general principles may apply differentially to different agencies:

- Record the time, date and location of the interview.
- It may be helpful at the beginning of the interview to establish proper protocols and forms of address in the family's primary language, the name they wish to be called, and the correct pronunciation.
- Introduce yourself, describe your role, and clarify mutual expectations and the purpose of the meeting.
- Use a positive tone of voice and facial expressions that sincerely convey respect and your interest in the family. Address them in a calm, unhurried manner.
- Speak clearly and somewhat more slowly, but not more loudly.
- Speak directly to the client as if the interpreter is not present.
- Limit your remarks and questions to a few sentences at a time; avoid giving too much information or long complex discussions of several topics in a single session.
- Avoid technical jargon, colloquialisms, idioms, slang, and abstractions.
- Give instructions in a clear and logical sequence, emphasise key words or points, and offer reasons for specific recommendations or actions.
- Be patient and prepared for the additional time that will inevitably be required for careful interpretation.
- Record the time of concluding the interview.



Quality Assurance

The ISG audit tool, *Assessing Organisational ISG Policies and Procedures for Content and Quality*, can be used as a final check list to ensure your ISG appendix contains all the necessary information. It will help to identify areas that are compliant and where further work may be required. This tool has been used by organisations conducting their own internal quality reviews and also in preparation for Australian Service Excellence Standards independent assessment. (see www.ombudsman.sa.gov.au/isg/)



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