



## Changes to the Code's Quality Assurance Framework to strengthen member practice in relation to PSEA

### The Code of Conduct Committee seeks your agency's feedback

Feedback can be provided:

- Via email to [code@acfid.asn.au](mailto:code@acfid.asn.au), or
- By nominating a representative to participate in a telecon with the Code team on these changes on **15 March 2019**. Rsvp for this telecon by emailing [code@acfid.asn.au](mailto:code@acfid.asn.au) to receive dial-in details

Consultation will close on **Monday 18 March 2019**.

This document outlines the proposed changes to the ACFID's Code of Conduct's Quality Assurance Framework. The changes outlined at **Appendix A** build off the changes proposed in the [report from Learning4Development](#) (L4D) that was circulated to members in July last year. These changes have since been revisited and updated to accommodate the additional recommendations from the [VIFM report](#). The changes were discussed and agreed by the Code of Conduct Committee (CCC) at their February meeting, and are now provided for your review and feedback prior to their finalisation. Changes to the Quality Assurance Framework (QAF) are made by the CCC and recommended to the Board for endorsement.

**Once agreed, the changes will take effect for ACFID's members on 1 July 2019.**

### 1. Background

In early 2018, ACFID launched a Review into the Prevention of Sexual Exploitation and Abuse (PSEA). There were 2 key elements to this Review. The first was an independent review, which the Victorian Institute for Forensic Medicine (VIFM) were appointed to undertake, and the second was a specific review of the ACFID Code to understand where it could be improved to better equip ACFID's members to safeguard against sexual exploitation and abuse, which was undertaken by the CCC.

The VIFM review provided a suite of recommendations, many of which have implications for the ACFID Code of Conduct and Quality Assurance Framework. The [VIFM Final Report](#) can be found here. The ACFID Board's public response to the final report, in which they accepted all of the review's recommendations and findings, can be read [here](#). The Code Review has also been completed. Member consultation took place about these proposed changes in July 2018, which was accompanied by the Consultation Report prepared for ACFID by Learning4Development. An addition to the Code, [Commitment 1.5](#), was passed unanimously by the ACFID membership at the Annual General Meeting (AGM) and is now in place. This review also proposed a number of changes to the QAF. Additional changes were proposed in final report from VIFM. This document sets out these changes

## 2. What are the changes?

**Appendix A** of this document sets out all the changes to the Quality Assurance Framework. These changes build off the changes proposed in the L4D report, with some additional updates to respond to the [Recommendations made in the Final Report into the Prevention of Sexual Exploitation and Abuse by the Victorian Institute for Forensic Medicine](#). They are designed to strengthen the Quality Assurance Framework to improve the practice and response in the prevention of sexual exploitation and abuse.

The CCC and L4D have worked to ensure that while changes to the Code will strengthen member practice if implemented correctly, they should not create an unnecessary compliance burden. Accordingly, the changes comprise:

- 1 new Compliance Indicator,
- 6 new Compliance Verifiers, and
- 9 Compliance Verifiers that have been revised or expanded.

There are also 2 new Good Practice Indicators.

In practice, these changes require members to have two additional pieces of documentary evidence in place to demonstrate compliance, which may form part of existing policies or frameworks (noting the additional PSEA policy requirement that took effect with Commitment 1.5). These are:

- **7.3.3.** A documented investigation operating procedure
- **9.4.2.** Documented evidence of induction, pre-deployment or refresher training provided to staff and volunteers.

The full Compliance Indicators and Verifiers can be read at Appendix A. For members, this means that compliance with the changed requirements will largely require revision of existing policies and processes, not the development of new ones. Over the coming months, the ACFID Code team will be working to provide members with updated guidance tools, and resources to assist with this transition.

## 3. Why make the changes?

These changes are targeted to address the issues raised by both L4D and VIFM. Despite the recognition of the Code's strong existing standards, specifically in relation to child safeguarding, both reports found a number of areas that could be strengthened through the ACFID Code to lift member practice in the safeguarding of vulnerable people from the risk of sexual exploitation and abuse. The changes outlined address all of the recommendations of the L4D report, and 17 of the 31 recommendations of the VIFM report. The areas of the Code that require strengthening through enhanced requirements can be grouped into four broad priorities:

1. Our staff and volunteers must clearly understand that sexual exploitation abuse or harassment in any form is unacceptable.
2. Our primary stakeholders, the communities where we work and affected populations should know the standard of behaviour expected of our staff and volunteers in this regard.
3. The communities where we work must have an accessible, gender and culturally sensitive, and confidential means of making a complaint of sexual exploitation or abuse.

4. Our organisations must have established incident reporting and good management systems that specify investigation procedures for sensitive investigations such as allegations of sexual exploitation and abuse.

#### 4. But wait, what about DFAT's policy?

As many members will be aware, DFAT are also currently drafting a policy on PSEA, for which a discussion paper has been circulated. ACFID provided a submission to this process, as did many of our members. You can read ACFID's submission on our website [here](#). DFAT consulted with the CCC in this process. The CCC and the Code team remain conscious of the need for the Code requirements to align with DFAT's requirements as much as practicable. For this reason, the proposed changes will not be finalised until after DFAT's final policy has been released. This is anticipated to happen in **early April**. Nonetheless, the proposed changes are being circulated now to give members as much time as possible to get across the changes required for Code compliance.

#### 5. When will the changes take effect?

The updated Quality Assurance Framework will take effect **on 1 July 2019**.

All ACFID members need to actively work towards meeting all of these requirements. The first cohort of members to report on their compliance against these new additions will be agencies with a financial year end of December 31 2019, with their reporting due May 2020. Members should note that even if your organisation is not required to complete a Code Self-Assessment in FY19/20, your exceptions report should detail any areas of the Code where your organisation is not yet compliant.

The Code of Conduct Committee and the Code Secretariat will work with members to socialise these changes and provide support for compliance. More information on these initiatives will be provided to members over the coming weeks and months.

APPENDIX A

The below table sets out the changes to the Quality Assurance Framework.

Where changes have been made this has been indicated through **bold underlined text**.

Only new or changed parts of the QAF have been included in the table

QUALITY PRINCIPLES & COMMITMENTS	COMPLIANCE INDICATORS	VERIFIERS
<p>1. RIGHTS, PROTECTION &amp; INCLUSION</p> <p>1.1 We respect and protect human rights.</p> <p>1.2 We respect and respond to the needs, rights and inclusion of those who are vulnerable and those who are affected by marginalisation and exclusion.</p> <p>1.3 We support people affected by crisis.</p> <p>1.4 We advance the safeguarding of children.</p> <p>1.5 We advance the safeguarding of those who are vulnerable to sexual exploitation and abuse.</p>	<p>CI 1.5.1</p> <p>Members demonstrate their organisational commitment to the prevention of sexual exploitation and abuse, through a survivor-centred approach</p>	<p>Expansion of verifier for new CI 1.5.1:</p> <p>Members are required to extend this compliance indicator and verifiers to partners through MOU or similar.</p> <p>All members must have a policy document that:</p> <ul style="list-style-type: none"> <li>• Describes the standards of behaviour for organisation’s staff, representatives and partners</li> <li>• Specifically prohibits sexual exploitation and abuse</li> <li>• Outlines how the policy is implemented throughout the organisation.</li> <li>• <b><u>Specifies the agency’s reporting responsibilities where an incident is identified, including processes for reporting to local enforcement authorities as needed.</u></b></li> </ul> <p>Members are also required to appoint a prevention of sexual exploitation and abuse focal person</p> <p><b><u>New Good Practice Indicator:</u></b></p> <p><b><u>Members limit the use of non-disclosure agreements in grievance processes</u></b></p>
<p>2. PARTICIPATION, EMPOWERMENT &amp; LOCAL OWNERSHIP</p>	<p>Current CI 2.3.1</p> <p>Members demonstrate an organisational commitment to gender equality and equity</p>	<p>Expansion of verifier at 2.3.1:</p> <p>Policy, statement or guidance document that commits the Member to promoting gender equality and equity and to non-discrimination in regard to gender identity. <b><u>This policy should address how these are prioritised and advanced within organisational programming as well as within the organisation’s internal operations.</u></b></p>

APPENDIX A

		<p><b><u>New Good Practice Indicator:</u></b></p> <ul style="list-style-type: none"> <li>• <b><u>Members work with staff, partners and communities to challenge attitudes which permit or excuse sexual misconduct both internally and within organisational program activities.</u></b></li> </ul>
3. SUSTAINABLE CHANGE	No changes	
<p>4. QUALITY AND EFFECTIVENESS</p> <p>4.1 We articulate clear strategic goals for our work.</p> <p>4.2 We analyse and understand the contexts in which we work.</p> <p>4.3 We invest in the quality assessment of our work.</p> <p>4.4 We reflect on, share and apply results and lessons with stakeholders.</p>	<p>Current CI 4.2.1</p> <p>Members’ planning and practice are informed by analysis of context, evidence and research, and inclusion of the perspectives and knowledge of primary stakeholders.</p>	<p><b><u>Revised Verifiers for CI 4.2.1</u></b></p> <ul style="list-style-type: none"> <li>• Design or planning framework, tools, templates which require or approaches which consistently show context and stakeholder analysis, including the consideration of the perspectives and knowledge of primary stakeholders <b><u>and an analysis of power dynamics including issues of gender equality and equity.</u></b></li> <li>• Appraisal/selection process that requires designs to include systematic consideration of context and stakeholder analysis, evidence and research, and the perspectives and knowledge of primary stakeholders including <b><u>analysis of power dynamics and issues of gender equality and equity.</u></b> <small>SEP</small></li> </ul>
	<p>Current CI 4.2.2</p> <p>Members assess and manage risk in their development and humanitarian initiatives.</p>	<p><b><u>Revised Verifier for CI 4.2.2</u></b></p> <ul style="list-style-type: none"> <li>• A risk framework, risk management plan or approaches which assess and address risks for initiatives, <b><u>including from a protection/safeguarding perspective.</u></b></li> </ul>

APPENDIX A

<p>5. COLLABORATION</p> <p>5.1 We respect and understand those with whom we collaborate.</p> <p>5.2 We have a shared understanding of respective contributions, expectations, responsibilities and accountabilities of all parties.</p> <p>5.3 We invest in the effectiveness of our collaborations and partnerships.</p>	<p>Current CI 5.1.2:</p> <p>Members undertake due diligence and capacity assessments of organisations with whom they work in formal partnerships.</p>	<p><b>Revised Verifier for CI 5.1.2:</b></p> <p>A documented assessment process that includes:</p> <ul style="list-style-type: none"> <li>• Alignment with Members’ values and objectives. [SEP]</li> <li>• Governance and legal registration.</li> <li>• Financial systems [SEP]</li> <li>• Reference checks of partners against prohibited entities listings.</li> <li>• Capacity assessment for implementation of key safeguarding and risk policies (eg child protection <b><u>and prevention of sexual exploitation, abuse and harassment</u></b>).</li> </ul>
	<p>Current CI 5.2.1:</p> <p>Members negotiate shared goals and respective contributions with partners and those they collaborate with.</p>	<p><b>Revised Verifier for CI 5.2.1:</b></p> <p>For formal partnerships, partnership agreement template or examples of partnership agreements that consistently describe:</p> <ul style="list-style-type: none"> <li>• Value and contribution of each party. [SEP]</li> <li>• Shared goals, roles and responsibilities of all parties. [SEP]</li> <li>• Financial and non-financial resources and support offered by and required [SEP] of each party.</li> <li>• Dispute resolution process.</li> <li>• Mutual accountabilities for reporting, sharing information and communication.</li> <li>• <b><u>Specific statements about child protection, prevention of sexual exploitation, abuse and harassment, and incident reporting.</u></b></li> </ul>
<p>6. COMMUNICATION</p>	<p>No changes</p>	

APPENDIX A

<p>7. GOVERNANCE</p> <p>7.1 We are not-for-profit and formed for a defined public benefit.</p> <p>7.2 We meet our legal and compliance obligations.</p> <p>7.3 We are accountable to our stakeholders.</p> <p>7.4 We have responsible and independent governance mechanisms.</p>	<p>Current CI 7.3.3:</p> <p>Members enable stakeholders to make complaints to the organisation in a safe and confidential manner.</p>	<p><b>Revised Verifier for CI 7.3.3:</b></p> <p>A documented complaints-handling policy that:</p> <ul style="list-style-type: none"> <li>• Is readily accessible on the organisation’s website. <sup>[1]</sup><sub>[SEP]</sub></li> <li>• Provides a safe and discrete point of contact for stakeholders in Australia and countries where work is conducted, to raise concerns or complaints about the organisation.</li> <li>• Is responsive and fair. <sup>[1]</sup><sub>[SEP]</sub></li> <li>• Provides information to all stakeholders, including to Members of the communities where activities are implemented, about the reporting and complaints procedure.</li> <li>• Provides information in a clear and easily understandable manner in appropriate forms and through appropriate media.</li> <li>• Ensures that requirements for making a complaint take into consideration the needs of the most vulnerable and considers minority and disadvantaged stakeholders.</li> <li>• Advises a complainant of the ability to make a complaint regarding an alleged breach of the Code to the ACFID Code of Conduct Committee.</li> <li>• Provides information on how staff and volunteers are equipped to understand and implement the policy.</li> <li>• Includes a process for reviewing and analysing complaint information within the organisation.</li> <li>• <b><u>Outlines a triage system for escalating serious incidents including child protection and sexual exploitation, abuse and harassment.</u></b></li> <li>• <b><u>Outlines a referral process for complaints that do not fall within the scope of the policy.</u></b> <i>(e.g. Complaints that do not fall within the scope of the policy would include, for example, complaints against an employee of another organisation or government department.)</i></li> <li>• <b><u>Commits to providing appropriate assistance and referrals to complainants.</u></b> <i>(e.g. Providing assistance to complainants might include medical, social, legal and financial assistance, or referrals to such services.)</i></li> </ul>
--	---	---

		<p><b><u>New Verifier for CI 7.3.3:</u></b></p> <p><b><u>A documented investigation procedure, which stipulates that all misconduct complaints must be recorded, subject to the wishes and welfare of the complainant.</u></b></p>
	<p>Current CI 7.3.4</p> <p>Members make information about their organisation and its work available to all stakeholders.</p>	<p><b><u>Revised Verifier for CI 7.3.4:</u></b></p> <p>Members will provide the following information on their website:</p> <ul style="list-style-type: none"> <li>• Information on its governance: structure, responsible persons and organisational contact information <sup>[SEP]</sup></li> <li>• ABN <sup>[SEP]</sup></li> <li>• Information on their work, including key projects or programs <sup>[SEP]</sup></li> <li>• Information on partners and their roles <sup>[SEP]</sup></li> <li>• A statement of commitment to adherence to the Code <sup>[SEP]</sup></li> <li>• The scope for and mechanism/process for lodging a complaint against the organisation, and a point of contact <sup>[SEP]</sup></li> <li>• Identification of the ability to lodge a complaint alleging a breach of the Code with the ACFID Code of Conduct Committee, and a point of contact <sup>[SEP]</sup></li> <li>• An Annual Report including the ACFID-Code-compliant financial statement in line with ACFID requirements (as outlined in 8.3.1 and 8.3.2)</li> <li>• <b><u>Staff Code of Conduct (or equivalent)</u></b></li> <li>• Key policies relevant to the public including but not limited to, privacy, complaints, transparency non-development activity, child protection, <b><u>prevention of sexual exploitation and abuse</u></b>, and conflict of interest. <sup>[SEP]</sup></li> </ul>

APPENDIX A

		<p><b><u>New verifier for CI 7.3.4:</u></b></p> <p><b><u>Primary Stakeholder communication:</u></b></p> <ul style="list-style-type: none"> <li>• <b><u>Information is provided to primary stakeholders on the expected behaviour of the organisation’s staff and volunteers, and access to its local complaints mechanism.</u></b></li> </ul>
	<p><b><u>New CI 7.4.4:</u></b></p> <p><b><u>Members governing body is informed of, and responds to serious incidents in accordance with their mandate and responsibilities.</u></b></p>	<p><b><u>New Verifier for new CI 7.4.4:</u></b></p> <ul style="list-style-type: none"> <li>• <b><u>Documented protocols for the reporting of serious incidents to the governing body. Safeguarding should form a standing agenda item for governing body meetings.</u></b></li> </ul> <p><b><u>New Good Practice Indicator:</u></b></p> <ul style="list-style-type: none"> <li>• <b><u>Members seek out gender and safeguarding expertise as desirable skills and experience when recruiting new persons to the governing body.</u></b></li> </ul>
<p>8. RESOURCE MANAGEMENT</p>	<p>No changes</p>	
<p>9. PEOPLE AND CULTURE</p> <p>9.1 We have the human resource capacity and capability to deliver our work.</p> <p>9.2 We protect, value and support our people.</p> <p>9.3 We manage our people effectively and fairly.</p> <p>9.4 We enable our people to conduct themselves professionally and according to our stated values.</p>	<p><b><u>Current CI 9.3.1:</u></b></p> <p><b><u>Members are fair, transparent and non-discriminatory in their management of staff and volunteers.</u></b></p>	<p><b><u>Revised Verifier for CI 9.3.1:</u></b></p> <p>Human resource policies and procedures which address:</p> <ul style="list-style-type: none"> <li>• Recruitment and selection</li> <li>• Remuneration and benefits</li> <li>• Equity and diversity.</li> <li>• Staff learning and development.</li> <li>• Performance management</li> <li>• Family and carer leave provisions.</li> </ul>

		<ul style="list-style-type: none"> <li>• Conduct in the workplace.</li> <li>• Integrity (including confidentiality and conflict of interest).</li> <li>• Grievance and disciplinary procedures.</li> <li>• Workplace health and safety.</li> <li>• <b><u>Reference checking and vetting for former misconduct of all staff and volunteers</u></b></li> </ul>
	<p>Current CI 9.3.3</p> <p>Members manage the performance and grievances of their staff and volunteers in a fair and transparent manner.</p>	<p><b><u>New Verifiers for CI 9.3.3:</u></b></p> <ul style="list-style-type: none"> <li>• <b><u>Performance management processes for staff and volunteers that include adherence to the Members code of conduct and other codes and standards as relevant to their roles.</u></b></li> <li>• <b><u>HR policies clearly define what constitutes staff and volunteer misconduct and outline consequences of such misconduct, including grounds for termination</u></b></li> </ul>
	<p>Current CI 9.4.1</p> <p>Members specify the expectation of professional conduct of all staff and volunteers.</p>	<p><b><u>Revised Verifier for CI 9.4.1:</u></b></p> <ul style="list-style-type: none"> <li>• A documented code of conduct that specifies the values and expectations of professional conduct of all staff and volunteers. This must include reference to child safeguarding behaviours, <b><u>prevention of sexual exploitation and abuse, transactional sex, anti-bullying and sexual harassment; and an obligation on staff and volunteers to report wrongdoing.</u></b></li> </ul>
	<p>Current CI 9.4.2</p> <p>Members’ staff and volunteers work in accordance with agreed standards of practice.</p>	<p><b><u>New Verifier for CI 9.4.2:</u></b></p> <ul style="list-style-type: none"> <li>• <b><u>Documented evidence of induction, pre-deployment and refresher training provided to all staff and volunteers on the Member’s code of conduct and key policies including child protection, prevention of sexual exploitation, abuse and harassment, complaints and whistle blowing.</u></b></li> </ul>

		<p><u>New Good Practice Indicator</u></p> <p><b><u>Pre-deployment training covers scenario-based discussions about power imbalances, status and workplace cultures of the destination country and how these impact work and personal relationships.</u></b></p>
--	--	---