

### **Ministerial Directives**

The Ombudsman reports directly to the Western Australian Parliament rather than to the government of the day, or a particular Minister, and Ministers cannot issue directives to the Ombudsman.

### Other Financial Disclosures

### Pricing policies of services provided

The Office currently receives revenue for the following functions:

- Costs for the Energy and Water Ombudsman functions are recouped from the Energy and Water Ombudsman (Western Australia) Limited on a full cost recovery basis. These costs are determined by the actual staffing costs involved in delivering the service plus an allowance for overheads and costs of particular operational expenses;
- Under an arrangement with the Australian Government, the Office handles enquiries and complaints from the Indian Ocean Territories about local government and Western Australian public authorities delivering services to the Indian Ocean Territories. Each year the Office recoups costs from the Australian Government for any complaints received from the Indian Ocean Territories. Cost recovery is based on the average cost per complaint in the last two years as published in the Office's annual reports. Administrative costs and the costs of any travel to the Indian Ocean Territories by the Ombudsman or staff and any promotional materials are also recouped in full; and
- The Office is involved in a program, the principal goal of which is to provide greater access across Indonesia to more effective and sustainable Ombudsman services. The Office recoups costs for its participation in the program from the Commonwealth Ombudsman's Office.

# Capital works

There were no major capital projects undertaken during 2015-16.

## **Employee Information**

# **Employment of staff**

As at 30 June 2016 there were 68 people (64.62 full-time equivalent positions (FTEs) directly employed by the Office, including 59 full-time employees and 9 part-time employees. This includes people on unpaid leave, contract staff providing short term expertise and backfilling staff during extended leave periods and people seconded out of the Office. After adjusting for people seconded into and out of the Office, staff on unpaid leave, and people employed through a recruitment agency to cover short term vacancies, there were 72 staff (68.52 FTEs) undertaking the work of the Office.

All employees are public sector employees operating in executive, policy, enquiry, investigation and administrative roles. The following table provides a breakdown of the categories of employment for staff directly employed by the Office as at 30 June in 2014-15 and 2015-16.

#### Staff numbers as at 30 June 2016

Employee Category	2014-15	2015-16
Full-time permanent	42	53
Full-time contract	12	6
Part-time permanent	10 (6.43 FTEs)	9 (5.62 FTEs)
Part-time contract	0 (0 FTEs)	0 (0 FTEs)
TOTAL	64 (60.43 FTEs)	68 (64.62 FTEs)

## **Human Resources Strategies**

The Office continued with the implementation of its human resources strategies during the year. These strategies aim to support the attraction and retention of staff and staff development through performance management and continuous professional development, through:

### Recruitment, retention and engagement of high quality staff

Recruitment practices continue to prove successful in attracting staff to apply for positions with the Office, with high numbers of quality applications received for positions advertised during the year. The Office provides benefits for staff such as flexible work options and part-time arrangements and this is promoted in all job advertisements. Staff have access to flexible work options, including part-time or purchased leave arrangements and work from home arrangements.

### Accounting for performance

The Office's performance management system includes identifying expectations as well as performance-based recognition. Managers and staff annually formalise a performance agreement that provides a framework to:

- Identify and acknowledge the contribution employees make in the achievement of the Office's operational and strategic goals; and
- Develop and retain skilled employees and assist employees to achieve their professional and personal career goals.

### Continual learning

The Office is committed to providing a high quality Induction Program for new employees to the Office. The Online Induction mini-site and the Induction Reference Book are provided to all new employees to the Office. They contain useful information on the Office's strategic direction, structure and roles, policies and procedures and facilities.

New staff have provided feedback that the induction process is welcoming and useful in assisting new employees to understand the Office's direction, expectations and processes. The product has also proved valuable for existing

staff members to keep them informed and updated about policy and governance issues within the Office.

The Office also provides continual learning for staff through a range of training sessions and the Continuous Professional Development Program. Where appropriate the sessions use the expertise of senior staff of the Office to deliver the material. To supplement this in-house development, staff are encouraged to attend external training, conferences and seminars to improve their skills and knowledge in areas relevant to their work. These opportunities are facilitated through development plans as part of staff annual performance reviews and the continual learning assists with positioning the Office as an employer of choice.

### Workforce and Diversity Plan

In 2014-15, the Office developed its *Workforce and Diversity Plan 2015-2020* in accordance with the *Public Sector Commissioner's Circular 2011-02: Workforce Planning And Diversity In The Public Sector*, Part IX of the *Equal Opportunity Act 1984*, and *Strategic Directions for the Public Sector Workforce 2009-14*. The Office's key focus areas for 2015-20 are to continue to:

- Implement effective practices to recruit high quality staff, in particular for new functions;
- Attract and retain high quality staff, including by providing innovative flexible working arrangements and through graduate, intern and seasonal clerk programs;
- Provide staff development through quality induction, performance management, our Continuous Professional Development Program, training and study assistance;
- Implement strategies to improve diversity in the workforce for people from diverse cultural backgrounds;
- Implement the strategies in the Office's *Disability Access and Inclusion Plan 2015-2020*; and
- Provide Corporate Executive with workforce reporting to support evaluation and ongoing review of the strategies in the Workforce and Diversity Plan.

### **Human Resource Policies**

The Office has a broad range of human resource policies that are regularly updated in line with the Office's strategies and guidance provided by external agencies. They include policies in the key areas of:

- Classification, filling positions and employee movements;
- Payroll, conditions of employment and leave;
- Performance management, training and development;
- Employee relations, grievances and discipline; and
- Occupational safety and health.



### **Governance Disclosures**

### **Shares in statutory authorities**

This is not relevant as the Office is not a statutory authority and does not have shares.

### Shares in subsidiary bodies

This is not relevant as the Office does not have any subsidiary bodies.

### Interests in contracts by senior officers

The Office's Code of Conduct and Conflict of Interest Policy define conflict of interest and appropriate action to take where a conflict arises between the employee's public duty and their private interests, including during tender and purchasing processes.

Employees are aware through the *Code of Conduct* and *Accountable and Ethical Decision Making* training that they have an obligation to disclose interests that could reasonably create a perception of bias, or an actual conflict of interest, and members of the Executive Management Group and Corporate Executive are asked to declare any interests at each meeting of these Groups.

The Office's policy on identifying and addressing conflict of interest includes any interest of a senior officer, or an organisation of which a senior officer is a member, or an entity in which the senior officer has a substantial financial interest, in any existing or proposed contract made with the Office.

There have been no declarations of an interest in any existing or proposed contracts by senior officers and, at the date of reporting, other than normal contracts of employment, no senior officers or firms of which a senior officer is a member, or entities in which a senior officer has any substantial interests, had any interests in existing or proposed contracts with the Office.

### Benefits to senior officers through contracts

This is not applicable as no senior officers have received any benefits.

### Insurance paid to indemnify directors

This is not applicable as the Office does not have any directors as defined in Part 3 of the *Statutory Corporations (Liability of Directors) Act 1996.* 

### Unauthorised use of credit cards

Staff of the Office hold corporate credit cards where their functions warrant the use of this facility.

The Office has robust policies and procedures regulating credit card use, and the use of a credit card for personal purposes is prohibited. During 2015-16, there was no use of a credit card for personal purposes.

Personal Use of Credit Cards	2015-16
Aggregate amount of personal use expenditure.	Nil
Aggregate amount of personal use expenditure settled by the due date (within 5 working days).	Not applicable
Aggregate amount of personal use expenditure settled after the due date (after 5 working days).	Not applicable
Aggregate amount of personal use expenditure outstanding at 30 June 2016.	Not applicable

# Other Legal Requirements

# Expenditure on Advertising, Market Research, Polling and Direct Mail and Media Advertising

During 2015-16, the Office incurred the following expenditure in relation to advertising, market research, polling, direct mail and media advertising that requires disclosure under section 175ZE of the <u>Electoral Act 1907</u>.



Total expenditure for 2015-16 was \$22,605 for state-wide advertising for the 'Monitoring the infringement notices provisions of *The Criminal Code*: Consultation Paper', advertising vacant positions and promoting regional visits, and was incurred in the following areas.

Category of Expenditure	Total	Company	
Advertising agencies	Nil	Nil	
Media advertising organisations	\$22,123	Adcorp	
	\$282	Budsoar Pty Ltd (Koori Mail)	
	\$200	National Indigenous Times	
Market research organisations	Nil	Nil	
Polling organisations	Nil	Nil	
Direct mail organisations	Nil	Nil	

# **Disability Access and Inclusion Plan Outcomes**

The Office is committed to providing optimum access and service to people with a disability, their families and carers. In 2015-16 the Office continued to implement the strategies under its *Disability Access and Inclusion Plan 2015-2020* (**DAIP**). Current initiatives to address desired DAIP outcomes are shown below.

**Outcome 1:** People with a disability have the same opportunities as other people to access the services of, and any events organised by, the Office.

People can access the complaint handling services provided by the Office by lodging a complaint in various ways including by post, email, online and in person. The online option is available through the Office's website, which meets the website accessibility requirements set out in the *Public Sector Commissioner's Circular 2011-03: Website Accessibility.* The Office is accessible for people with a disability who attend in person, and enquiries can be made by telephone using the National Relay Service for people with voice or hearing impairments. Venues for events and meetings are assessed for suitable access for people with a disability. A notice regarding disclosure of 'special access or dietary requirements' is added to all invitations for events coordinated by the Office.

**Outcome 2:** People with a disability have the same opportunities as other people to access the buildings and other facilities of the Office.

The Office's accommodation, building and facilities provide access for people with a disability, including lifts that accommodate wheelchairs and feature braille on the access buttons. Accessible and ambulant toilets are located on all floors used by the Office (the Ground Floor, Level 2 and Level 3), and a low reception desk on Level 2 accommodates wheelchair access. The building also includes electronic doors at the entrance and through to the lifts, a ramp at the front of the building, and a disabled parking bay beneath the building.

**Outcome 3:** People with a disability receive information from the Office in a format that will enable them to access the information as readily as other people are able to access it.

All Office documents are in plain English and publications are available in alternative formats on request. The Office's website meets the website accessibility requirements set out in the *Public Sector Commissioner's Circular 2011-03: Website Accessibility.* Information published on the website can be viewed and printed in alternative sizes. Online documents are published in PDF format, and written correspondence can be scanned with Optical Character Recognition and sent electronically in PDF format, compatible with screen readers. Phone access is available through the National Relay Service for people with voice or hearing impairments calling the Office, and signs are provided in the reception area to assist visitors who have a hearing impairment. The Office also provides suitable equipment to enable employees with vision impairments to access electronic information.

**Outcome 4:** People with a disability receive the same level and quality of service from the staff of the Office as other people receive from the staff of the Office.

The services provided by the Office have been adapted to reduce access barriers for people with a disability and information is available in various formats on request. The Office has an internal guideline for staff on *Assisting complainants with vision, hearing or speech impairments*. The document is part of the internal Complaint Handling Toolkit and provides useful information, contacts and procedures for all staff when dealing with a complainant with a disability. Information about the Office's DAIP and a video on providing services to people with a disability, *Make a Difference* produced by the Disability Services Commission, is included in induction training for all new staff. In 2015-16, Managers received training on the Office's disability access and inclusion strategies.

**Outcome 5:** People with a disability have the same opportunities as other people to make complaints to the Office.

A key role of the Office is to handle complaints about public authorities and anyone with a disability has an equal opportunity to make a complaint. Where necessary, the complaint process is modified to meet the needs of a person with a disability. This includes meeting people outside the Office and modifying communication strategies, for example, by using a translator (such as the National Relay Service or Auslan interpreter) where required. Information on reviews of decisions in relation to complaints to the Ombudsman and making a complaint about the Ombudsman's other services is accessible from the website and is available in alternative formats.

**Outcome 6:** People with a disability have the same opportunities as other people to participate in any public consultation by the Office.

Staff and members of the public with a disability have an equal opportunity to participate in any consultation process. Any public consultation conducted by the Office and promoted on the website meets disability access requirements. In 2015-16 the Office also conducted consultation in Albert Facey House, which is accessible to people with a disability. Documents released for public consultation can also be made available in alternative formats to meet the needs of people with a disability.



### Outcome 7: People with a disability have the same opportunities as other people to obtain and maintain employment with the Office.

The Office's accommodation, building and facilities provide access for people with a disability, including lifts and walkways that accommodate wheelchairs and feature braille on the access buttons. Accessible and ambulant toilets are located on all floors used by the Office. The Office also provides suitable equipment to enable employees with vision impairments to access electronic information. People with a disability are encouraged to apply for positions in the Office and recruitment processes are modified as required to enable people with a disability to have the same opportunity as other people to compete on merit for advertised positions. Appropriate modifications are made to the duties undertaken, hours of work and/or equipment required to enable employees with disabilities, or who acquire a disability, to maintain productive employment with the Office.

## Compliance with Public Sector Standards and Ethical Codes

In the administration of the Office, the Ombudsman has complied with the Public Sector Standards in Human Resource Management, the Code of Ethics and the Office's Code of Conduct.

Procedures designed to ensure such compliance have been put in place and appropriate internal assessments are conducted to satisfy the Ombudsman that the above statement is correct.

The following table identifies action taken to monitor and ensure compliance with public sector standards and ethical codes.

### Significant action to monitor and ensure compliance with Western Australian **Public Sector Standards**

Managers and staff are aware of, and are required to comply with, the Public Sector Standards in Human Resource Management (the Standards). This is supported by policies and procedures relating to the Standards, regular professional development for managers and staff about the Standards and related policies, and the inclusion of the policies in the induction process. Monitoring provisions include:

- For recruitment, selection and appointment, an individual review of each process is undertaken prior to the final decision to ensure compliance with the Employment Standard:
- A review process to ensure that, for acting opportunities and secondments, a merit-based process is used and there are no inadvertent extensions that result in long-term opportunities without expressions of interest or a full merit selection process:
- A monitoring process to ensure there are current performance management processes in place for all employees; and
- The continuous development of policies and procedures in accordance with the Standards to ensure compliance and relevancy.

Compliance issues: Internal reviews have shown compliance with the Standards is achieved before any final decision is made. There have been no breaches found of the public sector standards.



# Significant action to monitor and ensure compliance with the *Code of Ethics* and the Office's *Code of Conduct*

The Code of Ethics and the Office's Code of Conduct (Ethical Codes) are available on the Office's intranet and are part of the Online Induction for new staff. Guidelines for Accountable and Ethical Decision Making have been developed as a ready reference for staff when dealing with a difficult situation related to the Ethical Codes. The Guidelines are based on the Accountable and Ethical Decision Making in the WA Public Sector training materials provided by the Public Sector Commissioner. In 2015-16, staff completed Accountable and Ethical Decision Making training as part of the Office's Continuous Professional Development Program.

The Office's Code of Conduct supports the Code of Ethics and links the Office's corporate values with expected standards of personal conduct. All staff, contractors and consultants who carry out work for, or on behalf of, the Office are required to comply with the spirit of the Code of Conduct. On appointment, all staff sign the Code of Conduct to confirm their understanding of its application in the workplace and swear an oath or make an affirmation about maintaining appropriate confidentiality.

Ethics and conduct related policies have been developed, including policies and procedures for declaring and managing conflicts of interest and gifts. The Ethical Codes and related policies are included in the induction process and there is regular professional development for managers and staff about the Ethical Codes and related policies.

The Office has procedures in place for reporting unethical behaviour and misconduct. The Office also has a policy and internal procedures relating to *Public Interest Disclosures* and strongly supports disclosures being made by staff.

Monitoring provisions for Ethical Codes include:

- High level review, and Ombudsman sign off, for management of conflicts of interest and gifts, benefits and hospitality;
- High level consideration and sign off of requests for review of the Office's handling of a complaint and any complaints about the conduct of staff; and
- Seeking opportunities to improve current practices through internal audits and reviewing policies and procedures to ensure compliance and relevancy. Internal audits conducted each year are referred to the Office's Internal Audit and Risk Management Committee.

**Compliance issues:** There has been no evidence of non-compliance with the Ethical Codes.



### **Corporate Governance Framework**

The Office's corporate governance framework is based on the Public Sector Commissioner's *Good Governance Guide*.

# Principle 1: Government and public sector relationship (The organisation's relationship with the government is clear)

The Ombudsman is an independent officer appointed by the Governor of Western Australia. The Ombudsman is responsible directly to the Parliament rather than to the government of the day or a particular Minister. The <u>Parliamentary Commissioner Act 1971</u> regulates the operations of the Office.

Delegations for communication and interaction between Ministers and other Parliamentary representatives are identified in the Office's instruments of delegation, in particular those relating to external communications, and staff are aware of these delegations.

# Principle 2: Management and oversight (The organisation's management and oversight are accountable and have clearly defined responsibilities)

The Office's *Strategic Plan 2016-18* (**Strategic Plan**) provides a framework for the strategic direction of the Office with identifiable key measures of success. The Office's operational planning identifies how the key strategies in the Strategic Plan will be achieved through a detailed list of key projects, measures and targets.

Chief Executive Officer delegations are set out in the Office's *Instrument of Delegation – Chief Executive Officer Functions*. Statutory delegations under the *Parliamentary Commissioner Act 1971* and administrative arrangements for statutory roles are set out in the *Ombudsman Western Australia, Statutory Delegations and Administrative Arrangements* document.

The Office has a strong organisational policy framework covering governance, conduct, communications, information technology, human resources, finance and procurement. Policies and guidelines are available to staff through the Office's intranet and as part of the Online Induction.

The Office has an Internal Audit and Risk Management Charter and Committee. An external quality assurance review of the Office's internal audit function has been undertaken to ensure the Office conforms with the Institute of Internal Auditors international standards for the professional practice of internal auditing.



# Principle 3: Organisational structure (The organisation's structure services its operations)

Decision making responsibilities for the Office lie with the Executive Management Group, comprising the Ombudsman, Deputy Ombudsman and the Principal Assistant Ombudsman Investigations and Legal Services. The Office's Corporate Executive also includes the leaders of the Complaint Resolution, Investigations, Reviews, Administrative Improvement and Monitoring teams.

The Office's organisational structure has been created in line with its operations and reflects its key strategic direction. The Office undertakes continuous improvement to the structure to ensure it remains relevant and effective with changes linked to the Strategic Plan and redirection of resources within the structure to respond to workload priorities. A detailed organisational chart provides a reference for staff on the intranet.

# Principle 4: Operations (The organisation plans its operations to achieve its goals)

The organisational structure, operational planning, business processes and key performance indicators are linked to the strategic goals and outcomes in the Strategic Plan. Progress toward key performance indicators and major strategic projects is monitored through reports to the Executive Management Group and the Corporate Executive and is reported in the annual report each year.

Effective achievement of goals is supported by an Online Complaint Handling Toolkit, available to all enquiry and investigating staff for the purpose of achieving consistent, efficient and effective complaint handling. In addition, a Panel provides independent advice to the Ombudsman on matters relevant to child deaths and family and domestic violence fatalities. For the role of Energy and Water Ombudsman, the Office prepares a Business Plan and Budget for approval by the Board of the governing body each year.

# Principle 5: Ethics and integrity (Ethics and integrity are embedded in the organisation's values and operations)

The Office's values are to be fair, independent and accountable (including being rigorous, responsible and efficient). In line with these values, the Ombudsman observes an independent and impartial approach to the conduct of investigations as well as observing procedural fairness at all times. Ethics and integrity are contained within the *Code of Conduct* and *Guidelines for Accountable and Ethical Decision Making*. Staff are required to sign a Conduct Agreement to confirm their understanding of the application of the Code.

Staff are made aware of the <u>Public Interest Disclosure Act 2003</u>, the Office's Public Interest Disclosure Officers and the protections that apply, during induction and through the Office's intranet and noticeboards. Staff are also made aware of the Office's Conflict of Interest Policy and Gifts, Benefits and Hospitality Policy and registers and how they should be declared. When declarations are made, the Ombudsman assesses the appropriate action to be taken.



### Principle 6: People

(The organisation's leadership in people management contributes to individual and organisational achievements)

It is a strategic direction of the Office to attract, develop and retain a skilled and valued workforce with a culture that supports high quality, responsive and efficient service; and to treat people professionally, courteously and with appropriate sensitivity.

The Office continues to implement human resource strategies which focus on the recruitment, retention and engagement of high quality staff; accounting for individual performance and development; and continual learning. The *Workforce* and *Diversity Plan 2015-2020* provides a strong workforce planning framework to support the achievement of these strategies.

The Office has a strong human resources policy framework covering employment of staff, conditions of employment, flexible work arrangements, staff development, study assistance, employee relations (including grievance resolution) and occupational safety and health.

# Principle 7: Finance (The organisation safeguards financial integrity and accountability)

The Office produces an annual budget which is approved by the Ombudsman. The monitoring of actual versus budget along with financial integrity and accountability is secured through reporting to the Executive Management Group. The Office also has a *Financial Management Manual* (**the Manual**), designed to assist employees to perform their tasks efficiently and effectively. The processes in the Manual are consistent with relevant Treasurer's Instructions and State Supply Commission policies.

An Internal Audit and Risk Management Committee reviews an audit of financial management, including procurement, each year against the policies and procedures in the Manual. The 2015-16 audit concluded that good controls exist to ensure compliance with relevant legislation and policy requirements.



### **Principle 8: Communication**

(The organisation communicates with all parties in a way that is accessible, open and responsive)

To ensure services are accessible, open and responsive, the Office communicates with its key stakeholders using a range of communication channels, adapted to suit the audience. Further information is included in the <u>Collaboration and Access to Services section</u> of the report. The Office also provides guidance for dealing with people with a disability and people from culturally and linguistically diverse backgrounds. Policies covering recordkeeping, records management and communications ensure the Office safeguards the confidentiality and integrity of information, preventing unauthorised or false disclosure.

Staff meetings and separate team meetings provide a forum for sharing information internally and the Staff Consultative Committee has input into Office policies and procedures that affect staff. The Committee is made up of management and staff representatives from all teams in the Office, the Occupational Safety and Health representatives, the union representative and the Principal Aboriginal Liaison Officer.

# Principle 9: Risk management (The organisation identifies and manages its risks)

The Office identifies and manages its risk through a *Risk Management Plan* that is considered by the Office's Internal Audit and Risk Management Committee as part of the Committee's regular meetings. The *Risk Management Plan* continues to be relevant and consistent with the Office's Strategic Plan. The Office also has a *Business Continuity Plan* to ensure it can respond to, and recover from, any business disruption.

Under the *Risk Management Plan*, controls have been identified for significant risks and any action required is assigned to a relevant member of Corporate Executive. The internal Strategic Audit Plan is based on the areas of risk identified in the *Risk Management Plan* and the Internal Audit and Risk Management Committee oversees the audit plan and audits for each year.

In 2015-16, internal audits were conducted of the Office's information technology security and recordkeeping, and financial management and procurement practices. The audits showed internal controls are being maintained to ensure compliance with relevant legislation and policies.

# **Recordkeeping Plans**

The Office is committed to maintaining a strong records management framework and aims for best practice recordkeeping practices. The Office is continuously improving recordkeeping practices to ensure they are consistent with the requirements of the <u>State Records Act 2000</u> and meet the needs of the Office for high quality recordkeeping. The Office's framework includes:

 A Recordkeeping Plan, a Retention and Disposal Schedule, a Records Management Policy, a Records File Classification Plan and Security Framework and a Records Disaster Recovery Plan;



- An electronic document records management system (EDRMS) called HP Records Manager was implemented in 2005 and subsequently upgraded in 2011-12. A further major upgrade to the EDRMS occurred in 2015-16;
- The Office's case management databases; and
- A series of guidelines and a user manual, together with an online training module, are made available to staff.

During 2015-16, the Office conducted a comprehensive review of its *Recordkeeping Plan* and framework, including the Office's *Recordkeeping Policy*, *Records File Classification Plan and Security Framework*, *Records Management Disaster Recovery Plan*, user manual and a number of guidelines for staff. The *Recordkeeping Plan* was approved by the State Records Commission at its meeting on 26 November 2015.

The Record File Classification Plan and Security Framework was further updated in March 2016.

During the year, the Office conducted a review of its *General Disposal Schedule* for functional records. The revised Schedule was submitted to the State Records Commission for approval in June 2016.

### **Electronic Document Records Management System**

All incoming, outgoing and significant internal documents are saved electronically into the EDRMS. Staff are required to save their final electronic documents and correspondence, including electronic mail and facsimiles directly into the EDRMS.

The Office utilises an electronic case management system (**RESOLVE**) for the management of complaints in the Ombudsman and Energy and Water Ombudsman jurisdictions, and in the review of child deaths and family and domestic violence fatalities. RESOLVE is directly integrated with the EDRMS, allowing records and related cases to be accessed and updated through RESOLVE.

### Evaluation and review of efficiency and effectiveness of systems and training

During 2015-16, the Office's recordkeeping processes were reviewed to ensure compliance with the *Records Management Framework* and promote best practice recordkeeping. The efficiency and effectiveness of the recordkeeping training program is reviewed regularly through monitoring staff use of the EDRMS to ensure that staff are following the recordkeeping requirements of the Office.

In 2015-16, an internal audit on information technology security and recordkeeping was concluded and, with respect to recordkeeping, found effective internal control is being maintained.

In June 2016, as part of a program of regular reviews of the effectiveness of the Office's recordkeeping systems, a survey was developed and distributed to all staff. The results of the survey will allow for the development of targeted training or other programs to address common themes across the Office.

### Induction and training

All records related plans, policies, guidelines and manuals are available on the Office's intranet to assist staff to comply with their recordkeeping requirements and include user friendly guides for training staff. The Office's Online Induction mini-site,



developed in 2010-11, includes a section on recordkeeping. This is part of the induction process for new staff and is also available as a resource for existing staff members. The induction process also includes individual training sessions with new staff members conducted by the Customer Service and Records Manager soon after appointment. Follow up training and help desk assistance are provided as required. Recordkeeping roles and responsibilities are also included in *Accountable and Ethical Decision Making* training and the Office's *Code of Conduct*, which is signed by all staff on appointment.

In 2015-16, the Office launched an online training module to further strengthen staff recordkeeping practices.

## **Government Policy Requirements**

## **Substantive Equality**

The Office does not currently have obligations under the *Framework for Substantive Equality*. However, the Office is committed to the intent and substance of the policy, including the elimination of systemic racial discrimination in the delivery of public services, and the promotion of sensitivity to the different needs of key stakeholders.

### **Needs assessment**

The Office is committed to understanding the needs of Aboriginal people and people from culturally and linguistically diverse backgrounds and setting objectives to overcome barriers in service delivery for these groups. The Office regularly assesses the impact of our service delivery practices on Aboriginal people and people from culturally and linguistically diverse backgrounds. In 2015-16 the Principal Aboriginal Liaison Officer position was filled and further promotes high levels of awareness and accessibility to the Office for Aboriginal people as well as providing expert advice and support relating to the needs of Aboriginal people for staff undertaking the Office's functions.

In particular, the Office recognised a historical under-representation of Aboriginal people accessing our services and established a Regional Awareness and Accessibility Program which focuses on access for Aboriginal and regional Western Australians. This Program is an important way for the Office to:

- Ensure awareness of, and accessibility to, its services for Aboriginal Western Australians in regional and remote locations; and
- Provide a valuable opportunity for the Office to strengthen its understanding of the issues affecting Aboriginal people.

The Office has also identified a range of other strategies to overcome barriers to service delivery, including:

- Involvement in outreach activities in metropolitan areas to raise community awareness of, and access to, the Office's services, such as Homeless Connect in November 2015;
- Attending adult prisons and Banksia Hill Detention Centre to meet with prisoners and juvenile detainees, and prisoner representative groups, to understand their specific needs and be available to take complaints. An



Aboriginal consultant or the Principal Aboriginal Liaison Officer attends these meetings to assist staff to understand the issues involved and to facilitate cross cultural communication;

- Providing information on our services in 15 languages on our website. All
  publications are available in alternative formats and can be translated into other
  languages on request;
- Promoting details for Translating and Interpreting Services on the website and in publications for people with English as a second language. Interpreters and translators are regularly used when resolving complaints;
- Complaints can be written in the person's first language and the Office arranges translators for the incoming complaint and outgoing response and staff use interpreters, either face to face or by telephone, when discussing complaints;
- Involving the Principal Aboriginal Liaison Officer and Aboriginal consultants in relevant own motion investigations and as part of the Ombudsman's Advisory Panel to provide independent advice on issues and trends and contemporary professional practice within the scope of the child death and family and domestic violence fatality review functions; and
- Consultation activities specifically targeted to Aboriginal and culturally and linguistically diverse communities.

### **Monitoring**

The Office monitors whether services respond to the different needs of Aboriginal people and people from culturally and linguistically diverse backgrounds, including:

- Seeking demographic information from people who make complaints to enable the Office to monitor whether its services are used by all of the Western Australian community, particularly those who may find it difficult to access services:
- Collecting demographic data relating to reviews of child deaths and family and domestic violence fatalities to identify patterns and trends in relation to these deaths; and
- Seeking advice of specialist consultants in relation to the relevance and appropriateness of reports relating to own motion investigations.



### Organisational performance appraisal

The Office undertakes ongoing performance appraisal of access to services and appropriate service delivery for Aboriginal people and people from culturally and linguistically diverse backgrounds.

In 2015-16, the Office's complaint resolution services were accessed by people from a diverse range of backgrounds, comparable to the Western Australian population. In particular, for people whose complaints were received in 2015-16:

- 7.8% of people identified as Aboriginal, compared to 3.6% of the population;
- 33.8% of people were born overseas compared to 31% of the population; and
- 17.7% of people were born in a country where English is not the main language, compared to 15% of the population.

### Learning and development

The Office promotes learning and development to ensure that its employees are equipped with the skills and knowledge necessary to understand and meet the needs of Aboriginal people and people from culturally and linguistically diverse backgrounds, including:

- Training staff in identifying language related barriers to communication, including utilising the Office of Multicultural Interests' *Diverse WA* online cultural competency training module;
- Appropriately engaging with interpreters and telephone translators to ensure equitable access to our services; and
- Aboriginal cross-cultural awareness training, including utilising the Public Sector Commission's *Sharing Culture* online Aboriginal cultural awareness training module.

## Occupational Safety, Health and Injury Management

### Commitment to occupational safety, health and injury management

The Office is committed to ensuring a safe and healthy workplace. The goal is for a workplace that is free from work-related injuries and diseases by developing and implementing safe systems of work and by continuing to identify hazards and control risks as far as practicable.

The Office maintains an Occupational Safety and Health (**OSH**) framework that includes:

- Safe work practices;
- Managing and reporting workplace hazards, incidents and injuries;
- Injury management, including a Return to Work Program that extends to nonwork related injuries;
- Emergency procedures; and
- General employee health and wellbeing, including an Employee Assistance Program.



All employees and contractors are made aware of their OSH responsibilities through an Online Induction that includes a component on OSH as well as safe work practices in an office environment. This is also used as an information source for existing staff. The Office's policies and guidelines are also accessible to employees through the Office's intranet.

There is a strong executive commitment to the health and safety of staff. Hazards and other issues relating to health and safety can be raised with elected OSH representatives or directly with the Deputy Ombudsman, and key issues are brought to the attention of the Ombudsman, who is committed to their prompt and effective resolution.

#### Consultation

The Office promotes a consultative environment in which management, staff and other stakeholders work together to continually improve OSH practices. Formal mechanisms for consultation with employees and others on OSH matters include:

- The Office has OSH responsibilities within its tenancy and also works closely with the building management at Albert Facey House to ensure a safe working environment is maintained;
- The Office has two elected OSH Representatives who act as an important link between management and staff, so that they can work together and arrive at solutions to make the workplace safe;
- The Staff Consultative Committee has OSH responsibilities and the Office's OSH Representatives are standing members of the Committee. OSH matters are a standing item on the agenda to allow Committee members to refer matters raised by staff to the Committee for resolution and inform their team of issues and safe working practices raised at Committee meetings;
- There is dissemination of OSH information and discussion at regular staff and team meetings; and
- There is regular training on OSH matters for both management and staff. In 2015-16, an OSH session was held for Managers in which they were briefed on relevant Office policies, the OSH roles and responsibilities of all staff and managers, and common themes related to Office health and safety. During the year a series of OSH sessions were held for staff on mental health communication and challenges in the workplace.

### Statement of compliance

The Office complies with the injury management requirements of the <u>Workers' Compensation and Injury Management Act 1981</u> and is committed to providing injury management support to all workers who sustain a work related injury or illness with a focus on a safe and early return to their pre-injury/illness position. Rehabilitation support is also provided to employees with non-work related injuries or when recovering from a protracted illness.

As part of this approach, the Office encourages early intervention in injury management, and ensures there is early and accurate medical assessment and management of each injury, work related or not.



### **Assessment of OSH systems**

An assessment of the Office's OSH systems was conducted internally in 2013 against the elements of the WorkSafe Plan and all (100%) of the agreed actions have been completed. The results of the assessment were also used to develop an OSH Management Plan and update associated guidelines detailing OSH roles and responsibilities within the Office and outlining the approach taken to identifying, assessing and controlling hazards and the associated risks. The Office's OSH systems are included in the Internal Audit and Risk Management Program and an internal audit of the OSH system against the elements of the WorkSafe Plan commenced in June 2016.

Internal evaluation of the accommodation at Albert Facey House is ongoing and workplace inspections are undertaken regularly by the Office's elected OSH Representatives. Any OSH changes identified are promptly addressed.

There is ongoing review of the Office's emergency procedures for dealing with unreasonable conduct by visitors to the Office and, during 2015-16, there was a trial evacuation of Albert Facey House, where fire alarms were activated and all staff within the building were evacuated for drill purposes, and there was a trial security incident to test the internal security systems and processes of the Office.

### **Annual performance**

During 2015-16, two workers' compensation claims were recorded. The Office's OSH and injury management statistics for 2015-16 are shown below.

	Actual Results		Results Against Target	
Measure	2014-15 Actual	2015-16 Actual	2015-16 Target	Comment on Result
Number of fatalities	0	0	0	Target achieved
Lost time injury/disease (LTI/D) incidence rate	3.3	1.5	0	The Office had one lost time injury which increased the incidence rate slightly above target
Lost time injury/disease severity rate	0	0	0	Target achieved
Percentage of injured workers returned to work within  (i) 13 weeks; and  (ii) 26 weeks.	(i) 100% (ii) 100%	i) 100% ii) 100%	Greater than or equal to 80% return to work within 26 weeks	Target exceeded
Percentage of managers and supervisors trained in occupational safety, health and injury management responsibilities.	100%	100%	>80%	Target exceeded



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