

ATTACHMENT H

PART B

(To be completed at the conclusion of the investigation)

1. Findings

If the investigation of the allegation is completed, please attach copies of supporting final documentation and complete the following:

| | | | |
|---|---|---|---|
| 7.1 | Describe the allegation that was put to the employee (or attach copy of relevant documents). | | |
| 7.1.1 | <p>Allegation 1: category of reportable conduct</p> <table style="width: 100%; border: none;"> <tr> <td style="vertical-align: top; width: 50%; padding: 5px;"> <p>Physical assault</p> <p><input type="checkbox"/> Hitting/ kicking</p> <p><input type="checkbox"/> Shaking/ throwing</p> <p><input type="checkbox"/> Pushing/ shoving/ grabbing/ pinching/ poking</p> <p><input type="checkbox"/> Inappropriate restraint/excess force</p> <p><input type="checkbox"/> Indirect – use of object/substance/threat</p> <p>Sexual misconduct</p> <p><input type="checkbox"/> Exploitation: non physical</p> <p><input type="checkbox"/> Deliberate exposure to sexual behaviour/sexual exhibitionism / exploitation / pornography</p> <p><input type="checkbox"/> Child pornography</p> <p><input type="checkbox"/> Obscene language/gestures</p> <p><input type="checkbox"/> Harassment (inappropriate words/gestures/correspondence)</p> <p>Psychological harm*</p> <p><input type="checkbox"/> Persistent hostility/rejection</p> <p><input type="checkbox"/> Exposure to violence (including domestic violence)</p> <p><input type="checkbox"/> Scapegoating</p> <p><input type="checkbox"/> Humiliation/belittling</p> </td> <td style="vertical-align: top; width: 50%; padding: 5px;"> <p>Neglect</p> <p><input type="checkbox"/> Clothing/food</p> <p><input type="checkbox"/> Medical care</p> <p><input type="checkbox"/> Shelter</p> <p><input type="checkbox"/> Supervision</p> <p><input type="checkbox"/> Environment not supportive</p> <p>Sexual offence</p> <p><input type="checkbox"/> Assault (indecent/ touching/ molestation)</p> <p><input type="checkbox"/> Penetration/ intercourse</p> </td> </tr> </table> | <p>Physical assault</p> <p><input type="checkbox"/> Hitting/ kicking</p> <p><input type="checkbox"/> Shaking/ throwing</p> <p><input type="checkbox"/> Pushing/ shoving/ grabbing/ pinching/ poking</p> <p><input type="checkbox"/> Inappropriate restraint/excess force</p> <p><input type="checkbox"/> Indirect – use of object/substance/threat</p> <p>Sexual misconduct</p> <p><input type="checkbox"/> Exploitation: non physical</p> <p><input type="checkbox"/> Deliberate exposure to sexual behaviour/sexual exhibitionism / exploitation / pornography</p> <p><input type="checkbox"/> Child pornography</p> <p><input type="checkbox"/> Obscene language/gestures</p> <p><input type="checkbox"/> Harassment (inappropriate words/gestures/correspondence)</p> <p>Psychological harm*</p> <p><input type="checkbox"/> Persistent hostility/rejection</p> <p><input type="checkbox"/> Exposure to violence (including domestic violence)</p> <p><input type="checkbox"/> Scapegoating</p> <p><input type="checkbox"/> Humiliation/belittling</p> | <p>Neglect</p> <p><input type="checkbox"/> Clothing/food</p> <p><input type="checkbox"/> Medical care</p> <p><input type="checkbox"/> Shelter</p> <p><input type="checkbox"/> Supervision</p> <p><input type="checkbox"/> Environment not supportive</p> <p>Sexual offence</p> <p><input type="checkbox"/> Assault (indecent/ touching/ molestation)</p> <p><input type="checkbox"/> Penetration/ intercourse</p> |
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| <p>*Note: There must be evidence of related harm to the child that was alleged to have been caused by the employee. See 3.5.7 in the Ombudsman guidelines for more information about this definition.</p> | | | |
| | <p>Misconduct which may involve reportable conduct</p> <p><input type="checkbox"/> Unwarranted / inappropriate touching (not indecent)</p> <p><input type="checkbox"/> Inappropriate relationship with child (not sexual)</p> <p><input type="checkbox"/> Inappropriate comments / jokes of a sexual nature</p> <p><input type="checkbox"/> Other</p> | | |
| | <p>Description of reportable allegation:</p> | | |
| | <p>Employee response:</p> | | |

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|---|--|---|---|
| 7.1.2 | <p>Agency Finding on first reportable allegation:</p> <p> <input type="checkbox"/> False <input type="checkbox"/> Vexatious <input type="checkbox"/> Misconceived <input type="checkbox"/> Allegation sustained <input type="checkbox"/> Not sustained – insufficient evidence <input type="checkbox"/> Not reportable conduct </p> | | |
| <p>Note: If there was only one allegation, go to Part 7.2. Please attach additional pages if there were more than two allegations.</p> | | | |
| 7.1.3 | <p>Allegation 2:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top; padding: 5px;"> <p>Physical assault</p> <p> <input type="checkbox"/> Hitting/ kicking <input type="checkbox"/> Shaking/ throwing <input type="checkbox"/> Pushing/ shoving/ grabbing/ pinching/ poking <input type="checkbox"/> Inappropriate restraint/excess force <input type="checkbox"/> Indirect – use of object/substance/threat </p> <p>Sexual misconduct</p> <p> <input type="checkbox"/> Exploitation: non physical <input type="checkbox"/> Deliberate exposure to sexual behaviour/sexual exhibitionism / exploitation / pornography <input type="checkbox"/> Child pornography <input type="checkbox"/> Obscene language/gestures <input type="checkbox"/> Harassment (inappropriate words/gestures/correspondence) </p> <p>Psychological harm*</p> <p> <input type="checkbox"/> Persistent hostility/rejection <input type="checkbox"/> Exposure to violence (including domestic violence) <input type="checkbox"/> Scapegoating <input type="checkbox"/> Humiliation/belittling </p> </td> <td style="width: 50%; vertical-align: top; padding: 5px;"> <p>Neglect</p> <p> <input type="checkbox"/> Clothing/food <input type="checkbox"/> Medical care <input type="checkbox"/> Shelter <input type="checkbox"/> Supervision <input type="checkbox"/> Environment not supportive </p> <p>Sexual offence</p> <p> <input type="checkbox"/> Assault (indecent/ touching/ molestation) <input type="checkbox"/> Penetration/ intercourse </p> </td> </tr> </table> | <p>Physical assault</p> <p> <input type="checkbox"/> Hitting/ kicking <input type="checkbox"/> Shaking/ throwing <input type="checkbox"/> Pushing/ shoving/ grabbing/ pinching/ poking <input type="checkbox"/> Inappropriate restraint/excess force <input type="checkbox"/> Indirect – use of object/substance/threat </p> <p>Sexual misconduct</p> <p> <input type="checkbox"/> Exploitation: non physical <input type="checkbox"/> Deliberate exposure to sexual behaviour/sexual exhibitionism / exploitation / pornography <input type="checkbox"/> Child pornography <input type="checkbox"/> Obscene language/gestures <input type="checkbox"/> Harassment (inappropriate words/gestures/correspondence) </p> <p>Psychological harm*</p> <p> <input type="checkbox"/> Persistent hostility/rejection <input type="checkbox"/> Exposure to violence (including domestic violence) <input type="checkbox"/> Scapegoating <input type="checkbox"/> Humiliation/belittling </p> | <p>Neglect</p> <p> <input type="checkbox"/> Clothing/food <input type="checkbox"/> Medical care <input type="checkbox"/> Shelter <input type="checkbox"/> Supervision <input type="checkbox"/> Environment not supportive </p> <p>Sexual offence</p> <p> <input type="checkbox"/> Assault (indecent/ touching/ molestation) <input type="checkbox"/> Penetration/ intercourse </p> |
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| <p>Description of the reportable allegation:</p> | | | |
| <p>Employee response:</p> | | | |

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| 7.1.4 | Agency Finding on second reportable allegation: <input type="checkbox"/> False <input type="checkbox"/> Vexatious <input type="checkbox"/> Misconceived <input type="checkbox"/> Allegation sustained <input type="checkbox"/> Not sustained – insufficient evidence <input type="checkbox"/> Not reportable conduct |
| 7.2 | If no reportable allegations were put to the employee, please state why not (eg person left the agency and refused to be interviewed): |
| 7.3 | State the reason(s) for your finding(s): |

2. Final action taken at the end of the agency investigation

| | | |
|-----|---|-------------------|
| 8.1 | Describe the action taken by your agency at the conclusion of the investigation in respect to the person the subject of the reportable allegation: | |
| 8.2 | What other issues arose during the investigation which your agency considers relevant? | |
| 8.3 | What other action has been taken or is proposed by your agency as a result of the investigation? (eg general staff training, changes to policies). | |
| 8.4 | Date investigation completed: | |
| 8.5 | Was the matter required to be notified to the Commission for Children and Young People (CCYP) as a completed relevant employment proceeding? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 8.6 | If yes, has the matter been sent to the CCYP? <input type="checkbox"/> Yes * <input type="checkbox"/> No | |
| | * Note: Please attach a copy of the CCYP notification form | |
| 8.7 | Date sent to CCYP: | |
| 8.8 | Name and signature of person completing notification to Ombudsman: | |
| | Name: | Signature: |
| 8.9 | Date notification completed: | |