|  |  |
| --- | --- |
| Department of Health and Human Services  disability and community services | Tasmanian Government Logo - Tasmanian Tiger walking through bush |
| **CONFIDENTIAL**  **DISABILITY AND COMMUNITY SERVICES**  **ALLEGATIONS OF ABUSE REPORT (AAR)**  **FORM 2** | |

This form must be used when allegations of abuse are made. Service Providers have a responsibility to respond promptly to the alleged abuse.

| Name of Client: |  |
| --- | --- |
| Address: |  |
| Phone: |  |

| Organisation Name: |  |
| --- | --- |
| Address: |  |
| Contact Person Name and Phone: |  |

1. What actions has your organisation taken to manage the allegation of abuse and to support the client during the investigation and ensure their safety?

Please provide details:

1. What is the current status of the person who was abused and the alleged perpetrator?

Please provide details:

1. What was the outcome of your investigation into the allegation? Outline any further actions that need to take place to address the situation.

Please provide details (include feedback from family member/carer/advocates etc.):

|  |  |  |
| --- | --- | --- |
| 1. Is this matter now finalised from the organisation’s perspective? | Yes | No |

Comments (any learnings?):

Signed:

| Name: |  |
| --- | --- |
| Position: |  |
| Date: |  |

Received by:

| Name of Area Manager: |  |
| --- | --- |
| Date: |  |

Received by:

| Name of Community Partnership Team Manager |  |
| --- | --- |
| Date: |  |

Please ensure all sections in this form are completed and return to the Area Manager, Disability Services in your area as listed below

| **Area** | **Address** | **Telephone** | **Email** |
| --- | --- | --- | --- |
| North | 11 Cameron Street  Launceston 7250 | 6777 1060 | [disnorth@dhhs.tas.gov.au](mailto:disnorth@dhhs.tas.gov.au) |
| South East | Woodhouse Building, St John’s Park  New Town Tasmania 7009 | 6166 1127 | [disability.south@dhhs.tas.gov.au](mailto:disability.south@dhhs.tas.gov.au) |
| South West | Woodhouse Building, St John’s Park  New Town Tasmania 7009 | 6166 1127 | [disability.south@dhhs.tas.gov.au](mailto:disability.south@dhhs.tas.gov.au) |
| North West | 2nd Floor, Parkside, Brickwell Street  Burnie Tasmania 7320 | 6477 7609 | [disability.northwest@dhhs.tas.gov.au](mailto:disability.northwest@dhhs.tas.gov.au) |