232. Brotherhood of St Laurence

**Subject:** Online submission to DP83: Brotherhood of St Laurence [SEC=UNCLASSIFIED]

Submitted by user: Brotherhood of St Laurence

Submitted values are:

This submission is On behalf of an organisation

Person submitting Alan Gruner

Proposal 2–1

Proposal 2–2

Proposal 3–1

Proposal 3–2

Proposal 3–3

Proposal 3–4

Proposal 3–5

Proposal 5–1

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Question 5–1

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Question 6–3

Proposal 7–1

Proposal 7–2

Question 7–1

Question 7–2

Proposal 8–1

Question 8–1

Proposal 9–1

Proposal 9–2

Proposal 9–3

Proposal 10–1

Proposal 10–2

Proposal 10–3

Proposal 10–4

Proposal 11–1

Proposals  11.1  and 11.2 reportable incidents:  We do not agree with these proposals.  Serious assaults need to be reported to the police and don’t need another layer of reporting. Aged Care providers have a duty of care to residents which is enforced through regulations and the Quality Agency and if there is any suspected ill treatment or neglect by a staff member to a resident this is acted upon immediately. Also if a particular incident is serious then it is reported to the police as the residents have the same rights as any other citizen. This includes a situation where serious fraud is suspected.  However it is not appropriate for residential aged care staff to delve into the financial situation of residents to look for financial abuse, unless serious fraud is suspected. Residents have the right to manage their own affairs without staff interference.

Proposal 11–2

Proposals  11.1  and 11.2 reportable incidents:  We do not agree with these proposals.  Serious assaults need to be reported to the police and don’t need another layer of reporting. Aged Care providers have a duty of care to residents which is enforced through regulations and the Quality Agency and if there is any suspected ill treatment or neglect by a staff member to a resident this is acted upon immediately. Also if a particular incident is serious then it is reported to the police as the residents have the same rights as any other citizen. This includes a situation where serious fraud is suspected.  However it is not appropriate for residential aged care staff to delve into the financial situation of residents to look for financial abuse, unless serious fraud is suspected. Residents have the right to manage their own affairs without staff interference.

Proposal 11–3

Proposal 11.3   We do not agree with this proposal.  It seems to be adding nother layer of reporting with no benefit. No action would be taken against a person who lacks the ability to give consent to an action he/she takes. When such an incident occurs a range of measures are put in place to try and prevent another occurrence. For example staff will try and discover the reason for the attack and address this issue. Also they may ensure that the residents involved are kept apart as much as possible eg separate dining tables, separate activities. Staff know the residents and are much better suited to deal with this issue rather than bringing in an outside agency such as the police who most likely would take no action anyway.

Proposal 11–4

Proposal 11.4  – Our concern with this proposal is that it will hold up the recruitment process and not really add anything to what we already do in regard to a police check. Also the proposal to record relevant disciplinary proceedings or complaints and hold this against a person seems somewhat unjust as some of these recorded incidents may not be justified and person may be denied natural justice. Also it seems another added cost to aged care providers.

Proposal 11–5

Proposal 11.5 – Again cannot see any real benefit in this proposal as we do a full check as part of our recruitment process and this would be an added cost to aged care providers to establish and maintain such a database. Also aged care providers would tend to have more faith in their own processes than a national data base.

Question 11–1

Question 11–2

Question 11–3

Proposal 11–6

Proposal 11.6 – Agree with this proposal

Proposal 11–7

Proposal 11.7 – Agree with this proposal

Proposal 11–8

Proposal 11.8 –  Our organisation does not have this in our agreements but we can understand aged care providers who do. However our position is in line with the proposal as we believe such a clause could infringe on the decision making rights of the residents and so could be perceived as reducing their independence.

Proposal 11–9

Proposal 11.9 – Agree with proposal as provides another avenue of support for residents.

Proposal 11–10

Proposals 11.10 and 11.11 – Strongly disagree with these proposals.  These proposals if enacted would result in unnecessary duplication to the work of the Quality Agency, add additional costs (who will pay for the recruitment, training and support of the Visitors and the administrative costs of the scheme) and cause confusion, particularly among the residents.  In regard to Disability Services in Victoria, Community Visitors report to the Office of Public Advocate who fund and administer the program. Another layer of bureaucracy would be required to fund and administer such a program for Aged Care, particularly where there seems there is little evidence to show the possible benefits of such a scheme. Also as mentioned it would duplicate, and possibly undermine, the work of the Quality Agency and residents would be confused as to the role and powers of the different agencies doing similar work.  Also under proposal 11.9 Visitors can provide additional support to residents and do not need an extension of their responsibilities.

Proposal 11–11

Proposals 11.10 and 11.11 – Strongly disagree with these proposals.  These proposals if enacted would result in unnecessary duplication to the work of the Quality Agency, add additional costs (who will pay for the recruitment, training and support of the Visitors and the administrative costs of the scheme) and cause confusion, particularly among the residents.  In regard to Disability Services in Victoria, Community Visitors report to the Office of Public Advocate who fund and administer the program. Another layer of bureaucracy would be required to fund and administer such a program for Aged Care, particularly where there seems there is little evidence to show the possible benefits of such a scheme. Also as mentioned it would duplicate, and possibly undermine, the work of the Quality Agency and residents would be confused as to the role and powers of the different agencies doing similar work.  Also under proposal 11.9 Visitors can provide additional support to residents and do not need an extension of their responsibilities.