371. Name withheld

Thanks for contacting me and for allowing me to provide feedback. I would ask that my feedback not be published under my name, rather it contributes to the broader discussion.

I cannot recall working anywhere where the issue of Elder Abuse is not addressed comprehensively and in line with all regulatory requirements. What concerns me is that we might have to start reporting to yet another body.

Dealing with Elder Abuse incidents, from a clinical perspective, involves considerable resources. It is unclear what the benefit would be by the proposal to have us report to the Aged Care Complaints Commission, in addition to the Police and the Department of Health. How is it perceived that this will, in any way, contribute to improved outcomes for the person being abused. Indeed, on this score reporting to the Local Police is already a problem – Police Officers seem to have no idea that we are required to report to them and a frequent question is “Why are you reporting this to us?” or “What do you want us to do about this?” – so there is often a need to go into quite lengthy explanations.

If it is now being suggested that we also have to report ALL instances, including situations where cognitive impairment is present, I can only imagine Police reaction. How is it proposed for them to investigate when two residents with cognitive impairment are involved – especially when that is represented by a confirmed dementia diagnosis.

On top of the reporting to the proposed 3 bodies, we are also subject to review by the Aged Care Quality Accreditation Agency. Indeed, if they visit and we have had no instances of abuse, it is invariably implied that we are under reporting.

Being protected when you are part of any vulnerable group should be a given, as should being subject to any form of abuse – certainly those responsible should be accountable at law. However, this is 2017 and I am at a loss as to why we cannot streamline processes instead of making them more complex. Reporting to the Police is a given, if a crime has taken place it needs to be investigated before evidence has the opportunity to either become compromised or destroyed. If the Aged Care Complaints Commission is to become involved, why can this body not then pass the information on to the Department of Health OR the reporting function/portal is such that it automatically goes to both these bodies.

As I have indicated, we should be looking to free up time to support those abused, not tying practitioners up in yet more red tape – there is already more than enough of that colour tape in the Aged Care sector.

Thank you again for giving me the opportunity to express my viewpoint