



AASW
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**Australian Association
of Social Workers**

*Submission to the Standing
Committee on Health, Aged Care and
Sport
Re: Inquiry into the Quality of Care in
Residential Aged Care Facilities in
Australia*

February 2018

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Introduction

Who we are

The Australian Association of Social Workers (AASW) is the professional body representing more than 10,000 social workers throughout Australia.

We set the benchmark for professional education and practice in social work and have a strong voice on matters of social inclusion, social justice, human rights and issues that impact upon the quality of life of all Australians.

Social work and aged care

Social workers have a long and proud tradition of working with older Australians in supporting positive and healthy ageing, addressing issues of social injustice and advocating for system reforms. This is based on the strong commitment that every person has the right to wellbeing, self-fulfilment and self-determination. Social workers are involved in the delivery of aged care and carer support services in a range of fields of practice including direct service delivery, service planning, service management, research and policy. Using effective interpersonal skills and maintaining a person-centred approach they provide a range of services, such as: complex psychosocial assessments, advocacy, mediation or negotiation, counselling, referrals, liaison and education. They support older Australians in many areas, including health, housing, income support, Indigenous services, disability, workforce participation and community development. Social workers work collaboratively with older people to identify goals and work towards positive outcomes. They are committed to recognising strengths in order to build capacity, create opportunities and take action. Therefore, social workers are uniquely placed to hold both a broad and in-depth view of the multiple issues facing older Australians within a rights-based context and with a focus on wellness and social connectedness.

Social work is a tertiary-qualified profession recognised nationally and internationally. The Australian Association of Social Workers (AASW) is the key professional body representing social workers in Australia and is responsible for the accreditation of university social work programs. Graduates of AASW-accredited social work courses are eligible for membership of the AASW.

The AASW is the assessing authority, on behalf of the Federal Government, for social workers providing mental health interventions through Medicare Australia. Social workers can be accredited as Mental Health Social Workers (AMHSW) by the AASW. This accreditation recognises the social worker as having specialist knowledge, skill and experience to provide specific mental health interventions.

Our submission

Social workers are integral to services that cater for the health and wellbeing of older Australians in all settings across the aged care continuum including government, non-government organisations, hospitals, health settings, and private practice. Therefore, AASW welcomes the opportunity to contribute to the *Inquiry into the Quality of Care in Residential Aged Care Facilities in Australia*

Response

1. The incidence of all mistreatment of residents in residential aged care facilities and associated reporting and response mechanisms, including the treatment of whistle blowers;

- The AASW believes that creating structures and systems that encourage transparency and quality care is of the utmost importance, including creating policies that encourage and protect whistle blowers. Pivotal to all of this is creating cultures where the older person themselves feel comfortable voicing or requesting better quality of care and not, as many do, feeling too fearful to take this step.
- Better understanding of elder abuse is central to any discussion about the mistreatment of residents in residential aged care facilities and associated reporting and response mechanisms. Elder abuse is a complex issue and the aged care system requires policies that have a much greater appreciation of the complex dynamics and circumstances that contribute to its existence. As with child abuse and family violence, elder abuse is primarily about power and control and it needs to be acknowledged that it can be perpetrated within quite different types of 'relationships of trust', including family members or friends, paid service providers/care workers or by strangers who ingratiate themselves with an older person for opportunistic abuse. Furthermore, elder abuse is not just about an individual's actions but also includes institutional abuse and societal discrimination.
- People over 65 years old are the most rapidly growing age group in Australia and the wealthiest cohort, increasing their risk of being targeted for abuse. Financial abuse is one of the more common forms of elder abuse, perpetrated predominantly by the older person's adult children and grandchildren. This manifestation of elder abuse can sometimes be the hardest for services to determine and therefore must be a core element when defining it.
- There are longstanding and well-known problems relating to the sourcing of evidence regarding elder abuse. Data regarding the prevalence is limited and compromised by lack of agreement on data, terminology and definitions. Our members have reported that when investigating and delivering direct responses to alleged abuse, workers and victims are often reluctant to name 'abuse' in any formal data collection, unless there is undeniable proof. This reluctance to tick a box on a client record identifying the type of abuse or relationship to the abuser inevitably leads to under-reporting, especially for the more subtle forms of abuse.
- Furthermore, there is a distinct lack of protocol for identifying and responding to elder abuse particularly in regard to the paid sector. While the mandatory reporting requirements for Commonwealth-funded aged care services have their benefits, this only addresses allegations of serious physical or sexual assault. There are no mandatory requirements regarding allegations of neglect, institutional abuse, or psychological abuse. The Commonwealth will investigate if a facility has breached its responsibilities under the Aged Care Act; however there is often an insufficient response to provide immediate protection for the alleged victim.
- The AASW supports the recommendations prepared by Aged Rights Advocacy Service¹ in South Australia in relation to elder abuse, which highlighted the following:

¹ http://www.sa.agedrights.asn.au/files/488_aras_media_release_26_july_2016.pdf

- The right to choose to have a safety camera in place. This should always be with the consent of the older person or their representative.
- The need for mandatory elder abuse recognition training for all staff in residential aged care facilities.
- Education of residential aged care facilities managers on how to respond to complaints or concerns raised by staff.
- We also strongly support training of all staff to ensure caring and respectful treatment of older people in aged care facilities, as well as about elder abuse. Procedures should support reporting of all forms of elder abuse from anyone having contact with the older person, effective response strategies including unannounced external visits and staff support and performance measures.

Recommendation 1: The AASW recommends a significant review of residential aged care reporting and response mechanisms to better assess for elder abuse.

2. The effectiveness of the Australian Aged Care Quality Agency, the Aged Care Complaints Commission, and the Charter of Care Recipients' Rights and Responsibilities in ensuring adequate consumer protection in residential aged care;

- The Australian Aged Care Quality Agency, the Aged Care Complaints Commission, and the Charter of Care Recipients' Rights and Responsibilities are an important part of the system and are in need of further development in order to protect vulnerable older people in aged care facilities.
- For example, our members have reported that even though the Charter of Care Recipients' Rights and Responsibilities is posted in every aged care facility, they are usually in small print, thus making it difficult for some residents to read. They also are only available in certain languages other than English and are therefore not an accessible resource to older people and their families from culturally and linguistically diverse (CALD) backgrounds. This is symptomatic of a range of issues in relation to making sure older people and families know their rights. In this case our members suggest that the Charter should be made more easily accessible to families, those with functional impairments and those from a non-English speaking background. This document is a good way to understand what the rights of older people are in aged care facilities and what the responsibilities of aged care facilities are to older people. Unfortunately, they provide little information on what to do if these rights are not respected or followed through. This must be made clear in the document and would be a small but significant step.
- A limitation of the Aged Care Complaints Commission is that they are not able to intervene unless the older person has given consent for the report to occur. Many older people may not be able to give this consent, or may not want to due to their misunderstandings regarding confidentiality. This is especially relevant in CALD communities where if other members of the community find out about the abuse, the victim may be put into further harm and social exclusion. The Aged Care Complaints Commission needs to review its processes and procedures in relation to situations where receiving consent from the older person is not possible.
- Aged Care Complaints mechanisms should focus more on the patient and the concerns for their wellbeing, and less on the facility as a whole and whether they have breached their provider responsibilities under the Aged Care Act. This needs to include unannounced external visits, talking to individual residents and family as nominated by the auditors.
- The complaints system is onerous and can be challenging for an older person to initiate and maintain a complaint against a provider in whose residential care they are living. An aged care facility is an elderly person's home, where they have established friendships and senses of

security that contribute to their sense of self, the protection of that person's residency, as a priority, must be reinforced while a complaint is processed.

Recommendation: The Aged Care Complaints Commission needs to review its processes and procedures in relation to accessibility of key information and situations where receiving consent from the older person is not possible.

3. The adequacy of consumer protection arrangements for aged care residents who do not have family, friends or other representatives to help them exercise choice and their rights in care.

- One approach to ensuring that older people are better able to exercise choice and control is by having accredited social workers employed in all aged care facilities. A social worker's role is to ensure that in striving towards improved health and wellbeing outcomes of older people, useful and appropriate support systems are in place, engaged and utilised to their full extent. This includes assisting older people to make significant life decisions based on the best aged-care-related information and resources available. Social workers collaborate with the older person to ensure person-centred health and wellbeing outcomes are achieved by engaging with appropriate support systems (formal and informal), and evaluating their effectiveness.
- Social workers have a unique appreciation of the importance of social support systems, and the isolation experienced by many older persons. In their commitment to human rights and social justice, social workers advocate for the rights of older people against the discrimination, reduced opportunities and abuse they can experience. At the broadest level, social workers hold the view, that as a life stage older age should provide people with the opportunities to live healthy, positive and productive lives. Connection to, and participation in, the wider community is a vital part of this process.
- Utilising professionals who have the skills and expertise needed to work with individuals from varying and diverse groups, cultures and backgrounds in an important part of an effective consumer protection system. Social workers have an understanding and knowledge of cultural diversity in order to work in a culturally responsive and inclusive way. This includes understanding how health, ageing and disability, for example, are conceptualised in the person's culture of origin. Including developing culturally appropriate ways in which the person can be effectively assisted in exercising their rights.
- Embedding social work systematically into the aged care system, will greatly assist the sector in its capacity to achieve its objective of equitable access for older Australians.

Recommendation 3: Improved integration of social work services in aged care facilities to support older persons exercise choice and their rights in care.

Submitted for and on behalf of the Australian Association of Social Workers Ltd



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