

Elder abuse is a
vilation of human
rights.



Faculty of Arts, Education & Human Development Assignment Cover Sheet | |

| | | Family Name: | First Name: | Student ID Number: | | RANJO | PRIMO |

3833328 | | | | Unit Code: | Unit Title: | | ASD 4001 | Introduction to Social &

Political Aspects of Ageing. | | | | Assignment Title / Reference: 5. Elder Abuse

Is A Violation of Human Rights. Critically Discuss This Statement in the

Contexts of Procedure & Practice In | | The Community or Residential

Environment. What Strategies Would You Use To Provide Structures That

Would Respond To This Largely Silent Problem? | | | | | Name of Lecturer /

Tutor: | Tutorial Group (Day & Time): | | Dr. Jocelyn Angus | | | | | Date

Submitted: 12th June, 2010. | Student Contact Telephone No./Student Email

Address | | Due Date: 14th June 2010 | Telephone No. 9360 4633/Mobile

04322 96552 or 04341 95732 | | | Student Email Address: primo.

ranjo1@live.vu.edu.au | Plagiarism and Collusion Plagiarism is ‘ a practice

that involves the using of another person’s intellectual output and presenting

it as one’s own’. This includes the presentation of work that has been copied,

in whole or part, from other sources (including other students’ work,

published books or periodicals, or unpublished works or unauthorized

collaboration with other persons), without due acknowledgement.

Consequences of Plagiarism and Collusion A student found guilty of

plagiarism will be subject to one or all of the following: Referral to Course

Coordinator for: counseling; submission of further work; use of the services

of Student Learning Unit; the placing of a record of the alleged infringement

on the student’s file. Referral of the matter to the Head of School for: issuing

of written warning; re-submission of work for assessment or the undertaking

of another form of assessment such as an oral or unseen examination;

allocation of a fail grade to part or all of the assessment; allocation a fail

<https://assignbuster.com/elder-abuse-is-a-violation-of-human-rights/>

grade to the unit. Referral of the matter to the Dean for: suspension from the course; official disciplinary action by the University Disciplinary Committee. | | Student Declaration | | I declare that this assignment is original and has not been submitted for assessment elsewhere. | | I declare that this assignment is my own work and does not involve plagiarism or collusion. | | I give my consent for the electronic version to be examined by relevant plagiarism software programs. | | I have made a photocopy or electronic copy of my assignment, which I can produce if the original is lost for any reason. | | | | | | Signed:

_____ Dated: 12th June 2010 |

| | How to submit Your assignment Students are required to submit their assignment to the relevant academic staff member. This may be done in class or via the staff member's pigeon hole, mailbox or locker. Students should ensure they are aware of the location by checking with the lecturer / tutor before the due date. How to Collect Your Marked Assignment Your work should be collected from the lecturer / tutor in class or from their office during their student consultation time. If work is not returned in class or prior to end of semester, please contact the unit coordinator. Please make the necessary arrangements for collection. Staff in School Offices and the Student Centre are NOT responsible for returning work to students. Copies of this Assignment Cover Sheet, and more information about Plagiarism are available from the Faculty of Arts, Education and Human Development Student Information Website: WWW. VU. EDU.

AU/FACULTIES/AEHD/STUDENT_INFORMATION/ Y: Arts Ed&HDS
Student CentreGeneral AdminAssignment Cover Sheet 2006. doc ASD 4001 —
Introduction to Social & Political Aspects of Ageing Course & Unit

<https://assignbuster.com/elder-abuse-is-a-violation-of-human-rights/>

Coordinator: Dr. Jocelyn Angus Assessment Task 3: 3, 000 words — 50%

Assessment Task Due: 14th June 2010 Assessment Task 3 Title: Elder Abuse

Is A Violation Of Human Rights. 5. Elder Abuse Is A Violation Of Human

Rights. Critically Discuss This Statement In The Contexts Of The Procedures and Practice In The Community Or Residential Environment. What Strategies

Would You Use To Provide Structures That Would Respond To The Largely

Silent Problem? Introduction: Elderly abuse and neglect in the community

care or residential aged care facility environment are important issues to

address regarding social problems in Australia and has become increasingly

systemic in attempting to clarify the nature and causes of the problems on

coordinated community responses to elderly abuse. Compared on the

growing level of knowledge about barriers to reporting faced by elderly

people and witnesses of elderly abuse, the increasingly integral role of the

Police Department in responding to the needs of elderly people and despite

the fact that mandatory reporting laws in Australia aim at curbing elder

abuse but there is no total success to show more good done harm. There is a

relatively inter-sectoral nature of strategy or multi-disciplinary approaches to

elderly abuse involving partnership with Police Department but still not a

total success to the prevention of elderly abuse in Australia (Lai, 2008;

Department of Health — South Africa, 2010). The prevalence of elderly

abuse is difficult to quantify for a number of reasons. Elderly abuse is

frequently hidden and may not be obvious even to the victim and it is most

likely to be under reported. Moreover, a lack of staff awareness of what

constitutes elderly abuse including poor practice, and inadequate knowledge

and training in how to detect abuse can also lead to under-reporting of cases

of elderly abuse. Overall therefore, robust evidence is very hard to obtain

<https://assignbuster.com/elder-abuse-is-a-violation-of-human-rights/>

regarding exact prevalence of elderly abuse (House of Commons: Health Committee, 2004). The community care or residential aged care facility environment has a zero tolerance to any form of elder abuse of the residents. A community care or residential aged care facility environment is responsible of ensuring that residents, their families and staff feel free to raise any concerns they may have about the elderly abuse or possible elderly abuse of the residents. As to have such concerns, they are responsible to managed appropriately and effectively to prevent any form of elderly abuse of the residents. In response to these responsibilities and philosophy of elderly abuse of the residents, a community care or residential aged care facility environment has taken a range of procedures and practices to measure ensuring resident safety (Victorian Government Elder Abuse Prevention Strategy, 2009; Aged Care Act, 1997). These measures of community care or residential aged care facility environment include: Police record checks for all staff/volunteers/contractors which are likely to have unsupervised access with a resident; Incident reporting and investigation processes; Resident rights and responsibilities processes; Resident of the day and ongoing care evaluation; Confidential opportunity to improvement process via a suggestion box; Training for all staff in relation to reporting requirements and incident management processes; Relevant policies and procedures maps; Current position descriptions (Victorian Government Elder Abuse Prevention Strategy, 2009; Department of Health — Republic of South Africa, 2010). The reforms to the Aged Care Act (1997) are to safeguard older Australians and provide greater access to justice for those who have suffered elderly abuse. In line with these reforms, community care or residential aged care facility environment and all of their staff have to be

<https://assignbuster.com/elder-abuse-is-a-violation-of-human-rights/>

diligent and vigilant in ensuring the safety and welfare of the residents.

Elderly abuse is relatively new phenomenon, not only in Australia but globally like Great Britain, Canada, South Africa, etc. and is emerging as a growing problem. Elderly abuse occurs across all economic, ethnic, religious, gender and cultural groups. In Australia the problem of elderly abuse is the major responsibility of the Department of Health and Ageing, (2007) under Aged Care Act 1997 with the result that elderly abuse is only dealt with residential aged care facility. With elderly people encourage to live in the community care environment as long as possible and the reality of most elderly people living in the community means that the responsibility for dealing with elderly abuse has shifted to many more sectors (Department of Health — Republic of South Africa, 2010). This legislative framework supporting the new complaints investigation, compulsory reporting, and whistleblower protection arrangements are contained in the following pieces of legislation: Aged Care Act 1997; Investigation Principles 2007; Accountability Principles 1998 (amended 2006); Aged Care Amendment (Security and Protection) Act 2007; Records Principles 1997 (amended 2006). In this legislation a reportable assault is defined as any unlawfully sexual contact, unreasonable use of force, or assault specified in the accountability principles and constituting an offense against a law of the Commonwealth of Australia that is inflicted on a person receiving a Commonwealth funded residential aged care services. Under this limited definition, the whistleblower protection provided for under the act will only be available in the reporting incidents of unlawful sexual or physical assault of the residents in residential aged care facility (Aged Care Amendment [Security and Protection] Act, 2007). The Aged Care Act 1997

(Commonwealth) sets the standards for Aged Care in Australia particularly under the quality of care provisions. This legislation is aimed at the agency level rather than individual staff member. Therefore, the agencies should have in place policies and procedures for their individual staff so that agency can comply with this Act. Non-compliance to these standards can result in various sanctions such as withdrawal of funding and/or accreditation.

Individual service providers such as community care or residential aged care facility environment have their own organisational policies and procedure and should therefore ensure that there is an adequate number of staff on duty and that staff members are trained appropriately and understand their rights and responsibilities. It is also the responsibility of staff members to approach the residential aged care facility and request training, a position description and their rights and responsibilities (Elder Abuse Prevention Unit, 2006; Aged Care Act, 1997). The police officers investigate any criminal action while Department of Health and Ageing investigates residential aged care provider compliance with the Aged Care Act, 1997. Residential aged care providers have to require staff members to report suspicions or allegations of assaults, have an internal policy on abuse, provide training to staff and maintain records of assaults, resident assessments and behaviour plans. Whistleblower protection provisions have been introduced for staff members or approved providers disclosing an assault in good faith. They protect a discloser from criminal or civil liability unless they are the perpetrator, defamation, termination of employment or victimisation (Aged and Community Services Australia, 2009; Aged Care Amendment [Security and Protection] Act 2007; Investigation Principles, 2007; Aged Care Act, 1997). When incidents of sexual or serious physical assault are reported,

<https://assignbuster.com/elder-abuse-is-a-violation-of-human-rights/>

investigation of the incident is the responsibility of the police officers. Only the police officers should make investigation of any criminal activities. The role of the Department of Health and Ageing is to ensure that the residential aged care provider has met its responsibilities to ensure that the victim of the alleged or suspected assault has received an appropriate care and support; residents are safe; compulsory reporting requirements have been complied with; and the residential aged care provider has an appropriate internal systems and protocols in place for compulsory reporting (Aged Care Amendment [Security and Protection] Act 2007; Investigation Principles, 2007; North West Melbourne Division of General Practice, 2009). The Department of Health and Ageing is also responsible for establishing: When the alleged assault occurred; Whether it has been reported within 24 hours of the approved residential aged care provider becoming aware of the alleged assault; Whether the alleged assault has been reported to the police officer; and Whether the alleged perpetrator continues to have unsupervised contact with the residents. During the course of investigation, The Department of Health and Ageing will assess if the alleged or suspected assault is a reportable assault and/or whether there are behavioural management issues which need to be considered; Determine whether the approved residential aged care provider has taken an appropriate action to advise the family of the residents (Investigation Principles, 2007; North West Melbourne Division of General Practice, 2009). The Department of Health and Ageing is also responsible for establishing: Ensure the resident has received medical attention, where appropriate; Ensure the alleged offender is no longer able to have unsupervised access to residents; Ensure counselling and support have been offered to all affected parties; Determine whether the

<https://assignbuster.com/elder-abuse-is-a-violation-of-human-rights/>

residential aged care provider has appropriate procedures in place to deal with reportable assaults including protection for those who report; ensure staff are aware and be able to demonstrate understanding of procedural reporting requirements; and Visit the residential aged care facility to ensure residents are safe and residential aged care providers are meeting their responsibilities (Aged Care Amendment [Security and Protection] Act 2007; North West Melbourne Division of General Practice, 2009; Accountability Principles 1998 [amended 2006]; Aged Care Act, 1997). Residential aged care provider must be able to demonstrate that policies and procedures for dealing with the abuse of elderly people have been developed and implemented such as: Elder Protection and Mandatory Reporting Policy; Alleged Elder Abuse Report Form; Policy and Procedure Manual known as Corporate and Operational Management of Elder Abuse under Section 1. Residential aged care provider must train all staff members about the Policy and Procedure in the management of Elder Abuse and the management must regularly assess and audit clinical care practices to ensure the resident's safety and welfare (Accountability Principles 1998 [amended 2006]; Aged Care Act, 1997). At this time the evidence in support of mandatory reporting is not convincing. The consensus of government reports and researchers has been to oppose the introduction of mandatory reporting (Australian Society for Geriatric Medicine, 2003). If the approved residential aged care provider receives an allegation of, or suspects on reasonable grounds in which a reportable assault has occurred, the approved residential aged care provider or delegate is responsible for: Reporting the allegation or suspicion as soon as reasonably practicable within 24 hours to the Victoria Police and Department of Health and Ageing; and Taking reasonable

measures to ensure staff are aware of their responsibilities to report an alleged or suspected assault (Investigation Principles, 2007; North West Melbourne Division of General Practice, 2009). In the event of an alleged assault being perpetrated by a resident with an assessed cognitive or mental impairment, and or where reports of the same or a similar incident have been made previously, residential aged care provider has the discretion not to report. However, responsibility of residential aged care provider is to ensure a safe environment for all residents by appropriately managing the behaviour of the resident in question (Investigation Principles, 2007; Aged Care Amendment [Security and Protection] Act 2007; Accountability Principles 1998 [amended 2006]). Once an allegation of reportable assault being perpetrated has been made against the staff, the staff should not come into contact with that resident and should not have any unsupervised contact with any resident. In a residential aged care facility the protection of the residents is paramount. While investigation of the allegation is the responsibility of the police officers, employers or residential aged care providers will also need to undertake an investigation into the incident to ensure that the performance management and/or disciplinary process is fair and reasonable (Aged Care Amendment [Security and Protection] Act 2007; Accountability Principles 1998 [amended 2006]; North West Melbourne Division of General Practice, 2009). At all times during the investigation and after the investigation, details of the alleged assault must be treated with the strictest of confidence and the resident protected from any harassment, intimidation and/or embarrassment. The staff members who are alleged perpetrator of a reportable assault have a right to be heard and given an opportunity to respond to the allegations. If the allegations of a reportable

<https://assignbuster.com/elder-abuse-is-a-violation-of-human-rights/>

assault is substantiated, the employer or residential aged care provider should consider disciplinary action or depending on the nature of the allegations, the termination of employment for serious misconduct (Aged Care Amendment [Security and Protection] Act 2007; Accountability Principles 1998 [amended 2006]; North West Melbourne Division of General Practice, 2009). A residential aged care provider must keep consolidated records of all incidents involving allegations or suspicions of reportable assaults. The records must include: Date residential aged care provider receives the allegation or suspected alleged assault; Brief description of allegation or circumstances; Information about whether the information has been reported to the Police Department and Department of Health and Ageing; and Details of those allegations that fall into the 'discretion not to report' category (Records Principles 1997 (amended 2006); North West Melbourne Division of General Practice, 2009). The abuse and neglect of elderly people is a complex problem. While it can occur in institutional care such as residential aged care facility or hospitals, it is more likely to occur in the community care environment. As such it has been referred to as a hidden problem which is not recognised or not reported due to lack of community awareness and stigmatisation. Aged Care Act 1997 takes the lead to develop national guidelines on prevention, early detection, diagnosis, assessment, management, and preventative strategies/ interventions of elderly people who are abused in the community care environment as well as residential aged care environment (Department of Health — Republic of South Africa, 2010; James, 2010; North West Melbourne Division of General Practice, 2009). The residential aged care provider must have strategies/interventions in the management of elderly abuse. The purpose of

<https://assignbuster.com/elder-abuse-is-a-violation-of-human-rights/>

the strategies/intervention of residential aged care facility is to ensure that elderly people ultimately enjoy a life of dignity, respect, security, empowerment and equality. The route to achieve this is complex and difficult. Elderly abuse should not be seen in isolation. It has many facets and must be approached in a holistic way. It is difficult in a relatively new and changing field to find agreement in describing the phenomenon of elderly abuse (Department of Health — Republic of South Africa, 2010). The World Health Organisation as cited in Council on Ageing of Ottawa, 2006 defines elder abuse as: " As a single or repeated act, or lack of appropriate action, Occurring in any relationship where there is an Expectation of trust that causes harm Or distress to an older person. " Some authors also state that elder abuse can have definition as any act occurring as harm inflicted within a relationship usually by someone in a position of power, trust or authority over an individual. Types of elderly abuse are commonly identified as physical, sexual, psychological, emotional, medical, financial, social, and violation of rights (New South Wales Carers Australia, 2006; Souliere, 2007; World Health Organisation, 2002; Victorian Community Council Against Violence, 2005). More recently some jurisdictions have adopted terms such as elderly abuse and change has occurred because of concerns that the term elderly abuse may attach a stigma to an older person who suffered abused and that its use may force concentration only on the oldest of the old. Another meaning in some ethnic and religious communities and such as it does with Australian Indigenous community. As other authors' ideas and state, Strengthening Victoria's Response to Elder Abuse, (2005) also agree the ideas and states that the definition of elder abuse is carried out by someone close to the elderly people with whom they have a relationship

<https://assignbuster.com/elder-abuse-is-a-violation-of-human-rights/>

implying trust which can a family members, friends or carers and may be perpetrated as a result of ignorance, negligence or deliberate intent (World Report on Violence and Health, [no date]). Elderly abuse and neglect have been with us for many centuries but attention has only given to children and women. The problem of elderly abuse became an issue at the end of nineteenth century but nothing has been done and it is dealt with under the perspective destitution. It is noticed that elderly people's lives are damaged in the same as those of women and children. Elderly abuse is legalised when elderly people become an issue where they are forced to leave areas where they worked all their lives then go back to the areas where virtually no resources existed (Department of Health — Republic of South Africa, 2010). Victorian Government Elder Abuse Practice Guide to Age, (2009) has formed the Victorian Government Elder Abuse Prevention Strategy with the purpose of outlining the response to the abuse of elderly people not only to the community care environment but also to the residential aged care facility environment. The approach of elderly abuse prevention strategy is based on empowering elderly people consistent with the universal human right to live life free from violence and abuse. The empowerment model is underpinned by values in policies and practices that support self determination, informed choice and the ability of elderly people to make their own decisions. Mandatory reporting is obligatory and supported by states of Australia and territories and have developed empowerment approaches base on World Health Organisation. (Victorian Government Elder Abuse Practice Guide to Age, 2009). Policy and practices regarding preventing elderly abuse of residents in community care and residential aged care facility environment in Victoria is the same as to compare globally. However, elderly abuse that

<https://assignbuster.com/elder-abuse-is-a-violation-of-human-rights/>

occurs in a residential aged care facility environment might better be characterised as a failure of care on the part of residential aged care services provider who has responsibility to ensure that residents are protected from elderly abuse (Victorian Government Elder Abuse Practice Guide to Age, 2009). Current government strategies addressing Aboriginal communities particularly in Victoria are establishing an Indigenous led taskforce to advice government how to address family violence within indigenous communities effectively. Cultural factors influence how all forms of elderly abuse are viewed and specific strategies and response to elderly abuse should address such differences. Knowledge of particular barriers facing by elderly people is important particularly in the context of safety planning. When working with elderly people from CALD background who does not speak English, all staff members should use a professionally qualified interpreter (Victorian Government Elder Abuse Practice Guide to Age, 2009). The inter-sectoral nature of the strategy is that elder abuse is a multiple responsibility that needs to be addressed by general practitioners, community organisations, families, government departments, private sector and elder people themselves. It is important to acknowledge the potential contribution of each sector to prevent and manage elderly abuse. Each sector may have a specific interest in the prevention and management of elderly abuse but a common goal and a single message should be the guiding principles. Within the inter-sectoral nature of strategy, provision is made for interventions to move from a position where elderly abuse is contained within family structures and relatively small scale of residential aged care facility environment (Department of Health — Republic of South Africa, 2010). Each in every role player in service provision should participate

in the development and implementation of the inter-sectoral strategies as follows: Awareness rising to highlight healthy ageing and elder abuse; Integration of inter-sectoral policies and programs of ageing and elder abuse; Effective functioning on organisation of elder people; research and activate an ombudsman system; standards with necessary systems, structures and enforcement protocols for services of elder people including community care and residential aged care environment; all national development including education and training activities on ageing; mechanisms to examine and adjust existing legislation and practices for discriminations with respect to elder people (Department of Health — Republic of South Africa, 2010).

Despite difficulties of intervention and prevention of elderly abuse, a few possible models emerged into care practice such as social network intervention model; advocacy and mediation intervention model; domestic violence intervention model; social work intervention model; legal intervention model; community, contract and policing services intervention model; and voice of the elderly intervention model (Department of Health — Republic of South Africa, 2010). Conclusion: The residential aged care provider must ensure that there is a policy in place to comply with the legislation of the abuse of elderly people and this should be communicated to all staff members. Ensure that there is a formal documented education program to ensure all staff members are aware of the requirements of the legislation of the abuse of elderly people. A process of elderly abuse should be included on this legislative requirement into an education program of all staff members in the residential aged care provider especially into the yearly education program for continuous improvement agenda. The compulsory reporting legislation must be repealed or amended. Continuing the current

system would fail an obligation to protect elderly people effectively and maintain yet one more area of unproductive over-regulation of residential aged care providers. Multiple strategies should be employed in interventions that prevent the recurrence of elder abuse. Strategies that should be considered is an inter-sectoral strategies that needs to be addressed by general practitioners, community organisations, families, government departments, private sector and elderly people themselves. References: Accountability Principles, 1998 (Amended 2006). Aged Care Act 1997. Aged and Community Services Australia, 2009. 'Elder Abuse: One Report Too Many?' Results of the ACSA Online Survey on Compulsory Reporting of Assaults. Aged Care Amendment (Security and Protection) Act 2007. Australian Society for Geriatric Medicine, 2003. 'Elder Abuse', Position Statement No. 1, Revised 2003. Department of Health — Republic of South Africa, 2010. 'National Strategy on Elder Abuse — Baseline Document'. Elder Abuse Prevention Unit, 2006. 'Position Statement on Mandatory Reporting of Elder Abuse. House of Commons: Health Committee, 2004. 'Elder Abuse', Second Report of Session 2003 — 2004. Investigation Principles, 2007. James, M, 2010. 'Abuse and Neglect of Older People', Elder Abuse — Family Matters. Australian Institute of Family Studies. Lai, S, 2008. 'Elder Abuse and Policing Issues: A Review of Literature', Community Mobilisation Empowering Seniors Against Victimization. New South Wales Carers Australia, 2006. 'Response to the New South Wales Abuse of Older People Inter-agency Protocol'. North West Melbourne Division of General Practice, 2009. 'Clinical Information Sheets — Elder Abuse', General Practice in Residential Aged Care. Records Principles 1997 (Amended 2006). Souliere, J G, 2007. 'Report of the National Seniors Council on Elder Abuse, National Seniors Council.

Strengthening Victoria's Response to Elder Abuse, 2005. ' Report of the Elder Abuse Prevention Project'. The Council on Ageing in Ottawa, 2006. ' Ontario Government Working to Combat Elder Abuse', Expert Share Innovative Approaches for Protecting Seniors. Victorian Community Against Violence, 2005. ' Preventing Elder Abuse Through the Health Sector'. Victorian Government Elder Abuse Practice Guide with Respect to Age, 2009. ' The Policy Approach — Empowering Older People'. World Report on Violence and Health, [no date]. ' Abuse of the Elderly'. World Health Organisation, 2002. ' What You Need to Know About Elder Abuse', The Prevention of Elder Abuse.