



DEPARTMENT OF IMMIGRATION AND MULTICULTURAL  
AND INDIGENOUS AFFAIRS



Dr Marget Kerley  
Committee Secretary  
House of Representatives  
Standing Committee on Ageing  
Parliament House  
CANBERRA ACT 2600

Dear Dr Kerley

I am pleased to enclose, for consideration by the Committee, responses to questions taken on notice by officials of the Department of Immigration and Multicultural and Indigenous Affairs at the public hearing of the Committee's inquiry into long-term strategies to address the ageing of the Australian population over the next 40 years, on 7 February 2003.

- **Attachment A** relates to a question asked by Ms Jill Hall MP, Member for Shortland, regarding resources to deal with aged persons in immigration detention facilities.
- **Attachment B** is a flow chart of the delivery of Indigenous services, within the public sector, for the aged population. It relates to a request for such information by Ms Annette Ellis MP, Member for Canberra.

I trust that the Standing Committee on Ageing will find this information useful. Please do not hesitate to contact me on (02) 6264 4633 if the Committee has further questions.

Yours sincerely

Chris Smith  
Assistant Secretary  
Migration Branch

Allyson  
Take all supp  
Sub

For  
6/5

4 March 2003



**RESPONSE TO QUESTION TAKEN ON NOTICE**

**House of Representatives Standing Committee on Ageing  
Ageing Inquiry public hearing - 7 February 2003**

**Transcript:**

**Ms HALL** - Do you have an issue with people in detention centres who may have need of aged care services?

**CHAIR**—Is this really related to the inquiry topic?

**Ms HALL**—Yes, it is.

**Mr Rizvi**—I am not an expert in detention centres, but I can make some general comments and if there are some more specific questions, we could take them on notice and see if we can get back to you.

**Ms HALL**—Yes. It is not going to be anything more specific than this.

**Mr Rizvi**—Certainly, we try to maintain medical services in detention centres at a high level of quality. The provision of medical services within detention centres is certainly a challenge. It is not an easy thing to do. We certainly try to tailor the services to the needs of the individual populations that we have. The challenges are probably more in trauma and so on, including the sorts of issues that arise from the backgrounds of individuals concerned. As a general rule, the populations of detention centres are not particularly aged. They tend to be quite young. Hence, I cannot recall the question of what services are provided to aged detainees. But we could examine it a bit further and get back to you.

**Ms HALL**—That is why I asked. I thought it would be more an exception, but there would probably be a few people who fell into that category. Therefore, I am wondering what sorts of resources you have to deal with them.

**Mr Rizvi**—I can take that on notice."

**Question:** (interpreted as) What sorts of resources do you have to deal with aged persons in immigration detention facilities?

**Response**

The Department of Immigration and Multicultural and Indigenous Affairs (DIMIA) has a duty of care for all detainees. DIMIA meets this duty of care through the framework of legislative and administrative measures, the requirements of the contract with the Detention Services Provider including the Immigration Detention Standards, its performance monitoring regime and arrangements with relevant State authorities.

DIMIA relies on the advice of medical professionals (including doctors, psychologists, nurses and counsellors) when determining the appropriate treatment for detainees. Once a detainee is received at a detention facility the Detention Services Provider's medical staff conduct an assessment of the detainee's medical needs. Once a comprehensive medical assessment is made an appropriate medical treatment plan is developed for each detainee.

All immigration detention facilities have a medical centre, providing 24 hour access, seven days a week, to triage, nursing and first aid. Detainees who cannot be treated within the detention facility are referred off-site to specialists, hospitals or other institutions for ongoing care.

FLOW CHART OF DELIVERY OF INDIGENOUS SERVICES, BY THE PUBLIC SECTOR, TO AGED PERSONS

