

23 February 2007

Committee Secretary
Community Affairs Committee
Department of the Senate
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Australia

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AGED CARE AMENDMENT (SECURITY AND PROTECTION) BILL 2007

Dear Committee Secretary,

Thank you for the opportunity to provide this submission in relation to the Aged Care Amendment (Security and Protection) Bill 2007.

Australian Unity is generally supportive of the reforms outlined in this Bill and the philosophy and intention contained therein, with regard to the protection of vulnerable older Australians.

Australian Unity is an established retirement living provider, offering independent and assisted living accommodation to older Australians including operating as an approved provider of residential and community places. Australian Unity is also a national private health fund and financial services organisation with more than 400,000 customers, including 200,000 members, with around \$600m in revenues. We employ more than 1,300 people, with the majority of staff working in our Retirement Living Services business unit.

As a mutual organisation, we are proud of a heritage that dates back more than 165 years. Australian Unity as an entity was formed with a merger of the Australian Natives Association and Manchester Unity Independent Order of Odd Fellows in Victoria in 1993. Further expansion of the organisation took place in 2005 through a merger with Grand United Friendly Society Limited.

As a membership-based organisation, we are very conscious of our responsibility to represent and advocate on behalf of our members.

We commend the Federal Government in addressing the issues of security and protection of older Australians, and in fact we see the potential to further expand this approach beyond the boundaries described within this Bill.

Care, attention to and protection of member wellbeing is the paramount driver of our business. With respect to our aged care services, our philosophy is that we are providing a home for individuals who have an inherent right to physical, emotional and financial security.

Therefore, Australian Unity puts forward a number of issues and comments for your consideration that we believe would support and enhance the intention of the Bill to protect older Australians.

Request for further consideration on the following issues.

 We recognise the difficulties the Federal Government faces in verifying, monitoring and acting upon suspected cases of abuse outside of the government subsidised care system administered by approved providers.

However, we wish to identify that there are many older Australians who live in residential settings, such as Boarding Houses, Supported Residential Services in Victoria and Retirement Villages that could equally be at risk of abuse.

Increasingly, older people will receive a variety of home and community care services such as Local Government HACC services, Community Nursing Services and Post Acute Care services from many different providers and it would be reasonable to assume that the risk of abuse for these care recipients would be no less than that of a person receiving a Community Aged Care Package or a Extended Aged Care at Home service.

In some situations, it would be possible that two residents living in adjacent retirement village units might be receiving funding from different sources. Under the current Bill, only the one with a Commonwealth subsidy would have the benefit of the measures in this Bill.

2. We notice, and support, efforts to protect the rights of those who report abuse, but have identified a lack of recognition in the Bill for victim support and no requirements for the appropriate mobilisation of services for victims. We suggest that counselling and support be offered to the victim at the earliest possible time. The victim will require sensitive management of their situation with their privacy and dignity considered paramount. An aged care facility is the resident's home and we believe, where appropriate, victims should have a choice as to the level of disclosure of their situation to the wider community within their aged care facility, and that any intervention by officials, either police or departmental, must be respectful of the victim's right to privacy.

3. We note that Section 63-1AA (2) (a) requires providers to report the reportable assaults within 24 hours to a police officer AND the Secretary. The committee might consider changing this requirement to reflect the difficulties this would create for any incident that occurred on the weekend.

Further, we anticipate that some of the strict prescriptive requirements of this legislation might not be constructive to resolving some of the complex and difficult situations that occasionally occur within an aged care setting. For example, a resident who is suffering dementia might refer to an abuse that might have occurred in an unspecified time-frame. The abuse might in fact have occurred decades previously. The requirement to contact a police officer instead of exploring the issue with appropriate professionals and clinicians might detrimentally affect a sense of security within the aged care facility as a whole by evoking the fear (possibly unfounded) of the existence of an unknown abuser in the facility.

Section 63-1AA (2) states

"If the approved provider receives an allegation of, <u>or</u> starts to suspect on reasonable grounds etc... "

Our recommendation is that the word 'or' should be replaced with 'and', so that aged care providers may assess the situation and establish that on reasonable grounds a particular incident is a case of suspected abuse.

4. Compulsory reporting should be managed in a sensitive way, so as to consider the reactions of other residents in the residential aged care facility. For example, police entering a facility in uniform could be quite unsettling for staff and residents. It must be recognised that the residential aged care facility is the older person's home and police should be appropriately trained in managing these types of situations in non-threatening ways.

We believe that there should be some discretion on the part of the provider, as to contacting police in every circumstance. It could be required that decisions to express this discretion be made only by the provider in conjunction with the Department, or with the Aged Care Commissioner.

Where police are required to investigate, we believe that community policing squads or sexual assault units are the most appropriate police to

intervene in these cases, and, the legislation should allow for their involvement and extend the compulsory reporting period accordingly, except where immediate action is imperative in order to apprehend the offender. Consideration of the gender of the investigating police officer will also be paramount to the victim and their family.

In the event of support and counselling services being required, there will need to be consideration of who will provide those services for older victims of abuse. As an example, in Victoria the Department of Human Services provides support services under the Victorian Children and Young Persons Act in child abuse cases.

5. We seek clarification on the obligations of other health professionals involved with our residents, such as GPs and allied health professionals in advising us as the approved provider of a suspected abuse. In addition, we seek clarification as to whether visiting GPs or allied health professionals would be considered a 'staff member' under section 9 of this Bill.

If an external professional suspects abuse, and informs the Secretary, then will the Secretary inform us as the approved provider within a specified timeframe?

At Australian Unity Retirement Living Services, we have a comprehensive policy of undertaking police checks on all staff across the business, not just those with direct care responsibilities.

As a progressive and responsive service provider, our human resources policy on resident security and protection covers all aspects of managing alleged abuse including financial, and is applicable across our entire resident population. This includes: those in residential aged care facilities and all retirement village residents including but not limited to residents in receipt of a funded care packages within the village.

We would be happy to elaborate on any of the issues raised in this letter.

Yours sincerely

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Living Services