

ELDER ABUSE PREVENTION GUIDE



DEFINITION OF ELDER ABUSE

Any act occurring within a relationship where there is an implication of trust, which results in harm to an older person.

| ABUSE TYPES | RISK FACTORS |
|---|---|
| <ul style="list-style-type: none"> • Financial • Physical • Sexual • Psychological/emotional • Social • Neglect | <ul style="list-style-type: none"> • Family conflict • Isolation • Dependency • Medical or psychological conditions • Addictive Behaviour • Language and cultural Barriers • Carer situation |

RELEVANT POLICIES

This tool should be used in conjunction with the following documents :

- With respect to age—2009: Victorian Government practice guidelines for health services and community agencies for the prevention of elder abuse <http://www.health.vic.gov.au/agedcare/publications/respect/index.htm#download>
- Elder Abuse Prevention Policy
- Occupational Health & Safety Policies
- Home Visiting Policy
- Client Confidentiality and Privacy Policy
- Storage of Client Records Policy
- Client Referral Policy
- Assessment of Client Capacity Policy
- Client Intake Policy
- Independent (Third) Person Policy
- Emergency procedure

KEY PRINCIPALS

| | |
|------------------------------------|--|
| Competence | All adults are considered competent to make informed decisions unless demonstrated otherwise. |
| Self-determination | With appropriate information and support, individuals should be encouraged to make their own decisions. |
| Appropriate protection | Where a person is not competent to make their own decisions, it may be necessary to appoint a guardian or administrator. If a person is represented, their wishes should be taken into account as far as possible. |
| Best interests | The interests of an older person's safety and wellbeing are paramount. Even when they are unable to make all decisions themselves, their views should be taken into account. |
| Importance of relationships | All responses to allegations of abuse should be respectful of the existing relationships that are considered important to an older person. |
| Collaborative responses | Effective prevention and response requires a collaborative approach which recognises the complexity of the issue and the skills and experience of appropriate services. |
| Community Responsibility | The most effective response is achieved when agencies work collaboratively and in partnership with the community. |

KEY QUESTIONS

1. How are things going at home?
2. How do you spend your days?
3. How do you feel about the amount of help you get at home?
4. How do you feel your (husband/wife/daughter/son/other carer) is managing?
5. How are you managing financially?
6. Is there anything worrying you?
7. What are the things worrying you?
8. What can I do to help?
9. Is there anything that you need?

DUTY OF CARE

A duty of care encompasses a duty not to be careless or negligent, and arises from a relationship between parties that are regarded as sufficiently close as to infer that an obligation to care exists in some form.

Duty of care involves a legal obligation and a duty to prevent harm occurring to another person. This only arises where it is reasonably foreseeable in a particular situation that the other person would be harmed by an action or an omission, without the exercise of reasonable care. If a worker breaches their duty of care, they have failed to meet the expected standards of care.

Duty of care not only refers to the actions of a worker but also to the advice the worker gives or fails to give. (p99 With respect to age—2009)

Elder Abuse Prevention Guide

ASSESSING MENTAL CAPACITY

- General Practitioner
- Psychiatrist
- Neurologist
- Psycho-geriatrician,
- Geriatrician
- Neuropsychologist
- Cognitive dementia and memory service clinic (CDAMS)

SUSPECT ABUSE

REPORT TO SUPERVISOR

Does client have competency to make relevant decisions in this situation?

Is it an Emergency?
i.e. a situation that poses an immediate threat to human life, or a serious risk of physical harm or serious damage to property

COMPETENT

- Is interpreter or Cultural Advisor required
- Discuss situation and options with client
- Assess Risk, existing support etc.
- Document
- Request clients consent to provide further assistance

CONSENT

- Document client consent
- Consider what interventions are required eg HACC, Office of Public Advocate, Seniors Rights Victoria,
- Does client consent to interventions?
- Make referrals
- Arrange Assistance
- Advocate as required throughout process

NO CONSENT

- Document client's non consent
- Provide information
- Provide referral contacts
- Consider whether duty of care is met
- Continue to monitor & review

FOLLOW UP according to agency policy

NOT COMPETENT

- Is interpreter or Cultural Advisor required
 - Discuss situation and options with client
 - Assess Risk, existing support etc.
 - Document
 - Determine who can provide consent and request consent to provide further assistance according to agency policy
 - Include client in decisions if practical
 - Clients' rights to be respected
- Fact sheets for powers of attorney and other matters can be found <http://www.publicadvocate.vic.gov.au/>

CONSENT

- Document consent
- Consider what interventions needed
- Does substituted decision maker consent to interventions?
- Make referrals
- Arrange Assistance
- Advocate as required throughout process

NO CONSENT

- Document non consent
- Provide information
- Provide referral contacts
- Consider whether duty of care is met
- Legal intervention may be required - e.g. if substituted decision maker is not acting in client's best interests

FOLLOW UP according to agency policy

REFERRAL POINTS AND CONTACT NUMBERS

EMERGENCY

POLICE, FIRE, AMBULANCE

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Refer to your agency's Emergency Policy

STATEWIDE SERVICES

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| Aged Persons Mental Health Services | 1300 650 172 |
| Beyond Blue | 1300 22 4636 |
| Carers Victoria | 1800 825 955 |
| Commonwealth Carelink Centre | 1800 052 222 |
| Elizabeth Hoffman House Aboriginal Women's Service Inc. | 1800 015 188 |
| Ethnic Communities Council of Victoria | 9349 4122 |
| Extended Aged Care at Home Dementia (EACHD) packages | |
| Aged and Community Care Information Line | 1800 500 853 |
| Immigrant Women's Domestic Violence Service | 1800 755 988 |
| Lifeline (24hrs) | 13 1114 |
| Mensline | 1300 789 978 |
| National Dementia Helpline & Referral Services | 1800 100 500 |
| National Dementia Support Program | |
| Alzheimer's Australia | 1800 015 188 |
| Office of the Public Advocate | 1300 309 337 |
| Relationships Australia | 1300 364 277 |
| Seniors Rights Victoria | 1300 368 821 |
| State Trustees Ltd | 9667 6444 |
| State-wide Sexual Assault Service (24hrs) | 1800 010120 |
| Suicide Helpline Victoria | 1300 652 251 |
| Victoria Legal Aid | 1800 677 402 |
| Victorian Aboriginal Legal Service | 9419 3888 |
| Veterans Line (24hr) | 1800 011 046 |
| Victims of Crime Helpline | 1800 918 817 |
| VCAT | 1800 133 055 |
| Women's Domestic Violence Crisis Service of Victoria (24hrs) | 1800 015 188 |

LOCAL SERVICES

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| Aged Care Assessment Service |
| Alzheimer's Australia |
| Centre Against Sexual Assault |
| Community Health Services |
| Department of Housing |
| HACC services |
| Local Community Legal Centre |
| Local Domestic Violence Services |
| Local Victoria Police Station |
| Regional Indigenous Family Violence Support Workers |
| Respite Hotline |