



**Violent death at
St Basil's Aegean Village
SA Coroner not impressed
with Aged Care Complaints**

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[complaints scheme]
investigation was essentially
to rule that the nursing home
could continue ‘business as
usual’ with just some
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ABC News, 8 December 2016

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PICTURE CHRIS CLARKE

**St Basils Aegean Village, Christie Downs, SA
88 residents, 86 high care (July 2015)**

**Law Reform
Commission proposals
Elder Care Watch
response**

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**Accreditation
standards & assessment
changes in the pipeline**

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Vale

**Grace Jackman
and
Margaret Rondello
from South Australia
advocates for better
care and valued
Elder Care Watch
supporters**

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Law Reform Commission proposals Elder Care Watch response

Reportable incidents scheme

Compulsory reporting by providers to Aged Care Complaints Commissioner of incidents relating to assault, neglect, ill-treatment, financial abuse and unexplained serious injury

Need for penalties and for transparent reporting

Elder Care Watch supports the scheme in principle but advocates (1) penalties for multiple incidents in a 12 month period and (2) mandatory public reporting on homes with multiple incidents.

The Commission doesn't mention penalties but rather sees the Commissioner's staff supporting and advising the provider on handling incidents. There is too much support for the provider and too little in the way of justice for the resident.

Current reporting on complaints by the Complaints Commissioner is bland and opaque. Unless there is an express requirement to be transparent about reported incidents, annual reports will likely continue to shield providers from exposure. As it stands, the proposed scheme is just like the Complaints Scheme: too supportive of the provider and completely lacking in teeth.

Restrictive practices (physical, chemical and mechanical restraint, seclusion, detention)

Introduce new provisions into the Aged Care Act to limit and carefully regulate such restrictive practices

Elder Care Watch strongly supports this proposal; restrictive practices can amount to abuse as the Commission recognises. Here again, as with the reportable incidents scheme, there needs to be express penalties for non-compliance. One option is to invest the Complaints Scheme with dedicated penalties.

Operation Home Truths (case 53) illustrates how there were no penalties applied despite a Complaints Scheme finding of inappropriate restraint of a resident at Allambee Nursing Home in Cheltenham, Victoria in 2013.

SA Coroner not impressed with Aged Care Complaints

“an underwhelming response to the gravity of events”

inquest proceedings re violent death at St Basil’s, Christie Downs

Resident attacked

In May 2012, a St Basil’s Aegean Village resident died in Flinders Medical Centre the day after sustaining severe injuries allegedly inflicted by another resident (For details see *Elder Care Watch*, Edition 60:8).

Coroner’s request

During the inquest the Coroner asked to hear from the office of the Aged Care Complaints Commissioner.

Limited information

The lawyer for the Commissioner provided a letter and other information but could not clarify whether this information could be made public.

Coroner not satisfied

The Coroner said it appeared the outcome of the complaints scheme investigation “was essentially to rule that the nursing home could continue ‘business as usual’ with just some changes to policies”.



RN still employed

The Coroner was critical of the fact that the RN on duty at the time of the assault was still employed. She had failed to check on residents for 3 hours, failed to confine the violent resident and did not convey sufficient urgency to the ambulance service.

“I can’t be confident that she [Mrs Latz] won’t behave in the same manner tonight or tomorrow night if the same thing happened”

Not the end of the matter

The Coroner told the lawyer he would like to hear from someone in the Commissioner’s office to obtain more information and if that did not happen he would have: “grave concerns for all persons who have anything to do with the aged care system”.

ABC News, 8 December, 2016.

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Law Reform Commission proposals Elder Care Watch response

Code of conduct for aged care workers

Apply the National Code of Conduct for Health Care Workers (via state legislation) to employees in aged care who provide direct care; disciplinary action to be possible if code standards violated

Elder Care Watch prefers a licensing system for those who provide hands-on care, similar to the registration system for nurses. This would offer better protection for the public.

A code of conduct is a second best solution but better than nothing. However, if a code is to apply to aged care, it should be based on occupation rather than industry. After all health professionals have separate standards (codes) for each occupation.

The broader the application of the code the more likely it will lack relevance. The existing *industry* code for health care workers does not recognise the close functional relationship between the work of nurses and personal carers (or nursing assistants as they are also known). Also, many of the code's clauses are not relevant to the residential care setting.

Official visitors scheme

Official visitors would have right of access to inquire into and report on whether residents' rights are being upheld; on the adequacy of information about their rights and the power to confer alone with residents and staff and to make complaints and reports about suspected abuse and neglect

Elder Care Watch strongly supports this proposal. Many residents do not have regular visitors. These isolated elders are typically highly dependent and without a voice. Official visitors could give them a voice. Also, official visitors, just by their presence, could help ensure that providers adhere to the reportable incidents requirements.

Vale Grace Joy Jackman

Grace Jackman, who died in January 2017, was a staunch advocate for her husband Harry while he was in residential care and she also became the leader of a group of relatives who shared her concerns about inadequate care.

Grace had to move her husband from Watterworth Nursing Home in Glenelg when the property was sold. The care had been good there and the move to St Catherine's (later Brighton Aged Care) in South Brighton proved an unsettling contrast. The care turned out to be terrible: a lack of caring staff, insufficient nursing staff; food of appalling quality and limited quantity; failure to dress wounds; and lack of attention to bathing. Grace was persistent and dedicated in pursuing justice for those suffering abuse.

Under Grace's leadership a group of relatives formed *Advocates for people without a voice*. They met monthly for mutual support and to plan action for change. They were frustrated by the mistakes that kept happening, again and again. However the Brighton home did have sanctions imposed in 2005 and 2007. Grace also provided moral and practical support to two carers who went to the police about the death of a resident. They lost their jobs but following a Coroner's inquest in 2008 the nursing home owner, a doctor who signed the death certificate, lost his provider status.

Grace was an early supporter of Elder Care Watch and she encouraged a number of relatives to become supporters. They include Ralph Beardsmore, Vera Nardelli, Alan Royce and Carole Royce. Other friends who became supporters include Athalie McComas, Chris Clarke, Jane Osborne and Anthea Poole. They will all miss Grace.

Grace was in hospital when the Productivity Commission visited Adelaide for its *Caring for Older Australians* inquiry so Carole Royce went in her place for the interview. Carole conveyed Grace's message including that more nursing staff must be on the floor every day and every shift and residents in high care should be referred to as patients. There are many of us who are indebted to Grace and to honour her, we should keep fighting.

Minister for Aged Care
invites you to have your say on proposed changes to accreditation standards and assessing performance

“How a community cares for vulnerable people is the measure of a just society. The people who built this nation deserve nothing less”

K. Wyatt, Speech, Opening of Hammondcare, Wahroonga, NSW, 10 February, 2017.



Ken Wyatt
Member for Hasluck (WA)
Minister for Aged Care

Ken Wyatt was appointed Minister for Aged Care on 24 January 2017 following the resignation of the then Minister, Sussan Ley. He had previously been acting as an Assistant Minister in aged care.

The Minister invites you comment on proposed changes to the accreditation standards and to the process for assessing whether providers meet those standards. The Department of Health has issued two draft papers and comments must be received on line by 21 April.

“The quality of our aged care services is everyone’s business”

“We want to hear if we’ve got it right. We want to hear from you”

K. Wyatt, ‘Quality Aged Care - Have Your Say’, Media Release, 9 March, 2017.

The complex papers



- SINGLE AGED CARE
 QUALITY FRAMEWORK
 Draft Aged Care Quality
 Standards Consultation
 Paper 2017 (38pp.)
- SINGLE AGED CARE
 QUALITY FRAMEWORK
 Options for Assessing
 Performance against Aged Care
 Quality Standards
 Options Paper 2017 (35pp.)

The invitation is a good thing but the papers are heavy going. One reason is the proposal for one set of standards for all care settings. Currently, for example, *accreditation* applies to nursing homes and *quality review* applies to home care.

The Health Department says a single set of standards will make it easier for consumers to understand what they can expect from their service. Elder Care Watch is not so sure.

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Vale
Margaret Elaine Rondello

Margaret Rondello, who died suddenly in 2016, fought for many years to see wrongs righted in aged care, most recently on behalf of her husband Cesare, who she visited almost every day while he was in residential care.

Margaret was a committed advocate for her husband. Her concerns about the care at Eldercare Allambi in Glengowrie, were so great that she arranged for her husband to move to Bethsalem Care in Happy Valley where the staff were more caring. As anyone who has tried it will know, organising a move between nursing homes involves considerable resolve and a massive physical effort.

Margaret was relentless in her lobbying of politicians and public servants. She never gave up. But all this meant she did not have a holiday for eight years. Then, in May 2016, her granddaughter took her on a road trip to Port Lincoln to visit her brother. Margaret loved it, happy and relaxed after such a long time, chatting, laughing and singing *On the road again*.

In recent years Margaret was a generous supporter of Elder Care Watch. While working tirelessly as an advocate for her husband she still found time to record her experience with the first nursing home and her vivid, detailed account appeared in *Operation Home Truths (case 56)*.

Margaret was a woman of indomitable spirit. As her son Jeff said in his eulogy “*If she is in your memory she is in your heart and she will live forever*”. In her memory we must keep fighting for better care.

Accreditation

new standards & new assessments

complex changes in the pipeline

One set of standards

Elder Care Watch believes this is fine for the public servant in Canberra looking across the whole system and spending a lot of their time becoming familiar with the thousands of words in a large document.

For the person receiving aged care however, what matters are the standards and processes in their care setting.

They are not interested in the big picture. They want to know about standards that are relevant to their situation and which are easy to understand. For patients and consumers, broad generic or academic language is unhelpful. A concise document in plain English is what they need.

The same argument applies to the process for assessing performance. Elder Care Watch favours separate rules for each care setting that is, the *status quo*.

The change needed is to have resources redirected towards unannounced assessments and these audits kept separate from 'educational' visits and for the reports on such audits to be made public.

To get some sense of the changes in standards you could compare the current *Health and personal care* items in the *Quality of Care Principles*, (Schedule 2, Part 2) with the proposed *Standard 3, Delivering personal care and/or clinical care* in the Standards Paper (pp. 20-23).

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Coroner as advocate for residents?

Could it be that a person with the high standing of the SA Coroner will prove to be the one to publicly challenge the insipid aged care complaints scheme?

Will Mark Johns be the one who brings to the attention of our politicians the travesty of the limp official responses to serious abuse? Will he be the one who makes them see that this is a scheme which has no penalties worthy of the name?

Watch and listen for further reports on the inquest proceedings into the violent death of a resident at St Basil's Aegean Village.

See *The Advertiser*, *ABC TV News* and *ABC Radio Adelaide*.

Independence

Elder Care Watch is independent. It does not seek or accept funds from governments or from private organisations. It relies on support from subscribers to help meet the costs of operation.

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