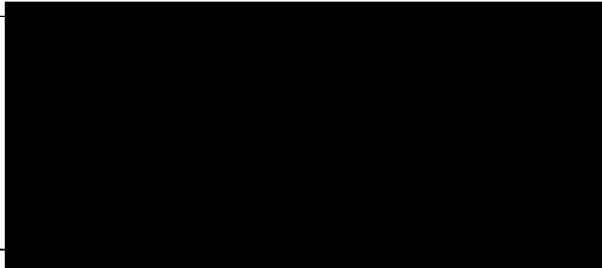


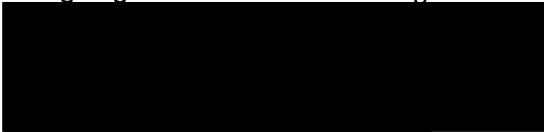
**IN THE MATTER OF THE ROYAL COMMISSION  
INTO FAMILY VIOLENCE**

**ATTACHMENT FD-29 TO STATEMENT OF FRANCES MARIE DIVER**

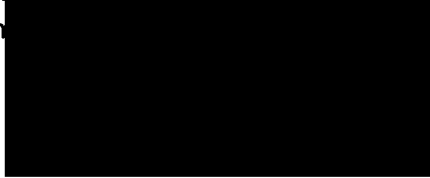
Date of document: 3 August 2015  
Filed on behalf of: the Applicant  
Prepared by:  
Victorian Government Solicitor's Office  
Level 33  
80 Collins Street  
Melbourne VIC 3000



This is the attachment marked '**FD-29**' produced and shown to **FRANCES MARIE DIVER** at the time of signing her Statement on 3 August 2015.



Before n



Attachment FD-29



**ST VINCENT'S  
HOSPITAL**  
MELBOURNE

**Elder Abuse Prevention & Response Initiative  
Seniors Programs and Participation  
Ageing and Aged Care Branch  
Department of Health, Victoria  
December 2014**

St. Vincent's Hospital (Melbourne)  
Limited  
ABN 22 052 110 755

St. Vincent's Hospital  
Caritas Christi Hospice  
St. George's Health Service  
Prague House

### Introduction

This report has been prepared for the Department of Health Victoria following a meeting held on the 18<sup>th</sup> November 2014 at St Vincent's Hospital Melbourne's (SVHM). The focus of this meeting was to provide information on SVHM's response to the management of suspected Elder Abuse (EA).

At SVHM the response to elder abuse is one of shared responsibility across the health service with a focus on active engagement by key health professionals. In March 2013 SVHM introduced a new Policy for the Protection of Vulnerable Older People (VOP), a model of care and a governance structure which included the establishment a multidisciplinary VOP Coordination and Response Group (VOP C&RG). The aim is to deliver an integrated and consistent approach to the detection and management of suspected EA across the health service. The governance framework is underpinned by the following components:

- Organisational system and processes
- Education and Training
- Effective Clinical Care
- Risk Management
- Culture and Leadership
- Performance Measurement

### Background

Health professionals report lack of confidence and knowledge regarding defining, diagnosing and reporting on EA (Cooper et al 2009). SVHM is uniquely placed to address this domain of health care. In 2009 through the Medical, Aged and Community Care directorate, SVHM partnered with the University of Melbourne's School of Health Sciences in an Australian Research Council Linkage Grant entitled: *From suspicion to intervention: improving responsiveness to abuse of the elderly in acute and sub-acute health care*. This project was informed by a 2005 pilot study conducted at SVHM (Joubert & Posenelli 2009). The study confirmed that although a high proportion of staff reported suspicion of EA in the previous 12 months, fewer than one fifth of those staff explored the situation further and even fewer attempted an intervention. This study confirmed that the hospital was a 'window of opportunity' to assist health professionals in the detection and management of suspected elder abuse.

Ms Meghan O'Brien Social Work is in the final stage of completing the PhD linked to this project. In 2009 she was awarded a Department of Health Victoria Scholarship: *Improving Care for older people and people with complex needs*, which enabled her to travel to the United Kingdom (UK) to gain knowledge and insight into the work undertaken by the Department of Health "No Secrets" (2000). This landmark work underpins the UK's national framework developed to help prevent and tackle elder abuse under a "safeguarding framework." The findings of the PhD work to date and the scholarship have led to an evidenced based approach which underpins the SVHM policy and model of care.

SVHM's progress and outcomes to date can be reviewed in Attachment 1: Safeguarding Vulnerable Older People at St Vincent's Hospital, Melbourne: From Research to Innovation. Key outcomes include:

- Development of a hospital wide policy and model of care to assist in the exploration and management of suspected EA
- Improved knowledge base about the barriers surrounding a health service's response to EA (achieved via online survey to 275 staff and staff participation in focus groups)
- Enhanced knowledge base about appropriate hospital based service delivery in the assessment and management of suspected EA



- Development of a competency framework based on three levels of training for hospital staff to assist staff with improving their knowledge, confidence and competence to respond to suspected EA
- Development and evaluation of a unique education package including a professionally filmed training DVD for hospital staff to improve recognition, confirmation and response of EA. This DVD includes five EA scenarios which focus on an interaction between an older person and a health professional. The scenarios were assessed for face and content validity by a panel of experts. These experts were from a range of disciplines and involved a consumer and a representative from the Victorian Department of Health. Staff who received the training improved their confidence to act on suspicion of EA by 20%
- Information and education sessions on SVHM's policy and approach have been delivered to over 500 hospital staff
- Analysis of the first 100 notifications of suspected EA across SVHM

### **Introduction of the new SVHM Policy, Model of Care & Governance Arrangements**

In April 2011 an in-house working group was established to review and update SVHM policy on the protection of vulnerable older people in accordance with the *'With respect to age (WRA) 2009: Victorian Government practice guidelines for health services and community agencies for the prevention of elder abuse'*, also incorporating the *Victorian Government's Elder Abuse Prevention Strategy 2010*. This review aimed to ensure a consistent approach at SVHM to responding to suspicion of abuse.

Staff involved in developing this policy represented all key program areas and disciplines from across the health service. They included: Executive Director Medical Services, Aged and Community Care SVHM, SVHM VOP C&RG Members: Chief Social Worker (Chair), Director of Geriatric Medicine, Director of Mission, Social Work Team Leader, Manager Complex Care Services, Manager Aged Psychiatry Assessment & Treatment Team (APATT), Manager Ellerslie Unit, Senior Social Work Clinician APATT, Nurse Unit Manager Acute, Manager Aged Care Assessment Service and Community Transition Care Program, Manager Treatment Response and Assessment for Aged Care (TRAAC).

In May 2013 the SVHM VOP C&RG was established. The group reports to the SVHM Clinical Innovation and Improvement Committee and aims to:

- Establish a monitoring, reporting and response system across the health service
- Enhance risk management at patient care and organisational levels
- Coordinate data collection for all SVHM cases with suspicion, detection and/or confirmation of abuse, to inform processes and future workforce training. This data collection is based on staff completing a VOP notification for suspected EA cases across the organisation.
- Contribute to the Protection of VOP policy implementation and its evaluation
- Promote continuous quality improvement in line with Accreditation standards
- Make recommendations regarding an ongoing education strategy.

### **Striving for best practice through staff education and information management**

#### **Overview**

The PhD research has highlighted three elements as important in the management of elder abuse – staff confidence, knowledge and competence. An education strategy covering three levels of training for staff is essential: Level 1 - awareness raising; Level 2 – Education for managers; Level 3 – Education for clinicians undertaking the assessment of suspected EA. Education and training has been designed to reach different individuals/groups and the educational process should be ongoing to address staff turnover.

#### **Implementation to date:**

**Phase 1:** All clinical staff in Social Work and Care Coordinators in the Emergency Department have received Level 3 education on EA using the SVHM hospital based training package. This includes assessment and case management for patients suspected of abuse based on the SVHM Policy and model of care.



**Phase 2:** Quality assurance (QA) applications were submitted to SVHM Research Governance Unit (March and November 2014) to analyse current data and evaluate the management of the first 100 notifications of suspected EA made to the VOP C&RG. Analysis of the data continues to assist in the ongoing review of the current policy, the model of care, systems, clinical practice and the education strategy. This initiative has provided measures regarding SVHM VOP case numbers, referrals and outcomes of cases managed. This data provides the organisation with information regarding the types of suspected EA, risk factors, level of risk to the older person, intervention and management strategies.

**Phase 3:** In May 2014 following a brainstorming session with managers /team leaders from SVHM Community Programs - a specific education session was tailored to address their identified needs to improve the response of EA notifications across SVHM from community programs. In June 2014 key managers and team leaders participated in a two hour (Level 2) training session (n = 16). Following this session we have seen a significant increase in VOP notifications.

**Phase 4:** Internally at SVHM a key priority in 2015 will be to develop a plan for Level 1 Training (Awareness raising) for key clinical staff across the organisation who have direct contact with vulnerable older people. This will be focus on allied health staff, nursing staff and medical staff on key units. This training be informed by the QA review and is dependent upon resource factors. It is envisaged that SVHM will seek the input of Senior Rights Victoria in rolling out Level 1 training. Externally SVHM would like to consider opportunities to provide access to resources, education and training for the broader health field – i.e. Level 3 Training. This will be a priority consideration for action in 2015.

#### **Performance Measures**

Based on SVHM's data monitoring and review strategy, the QA ethics approval enabled representatives of the VOP C&RG to undertake retrospective audits of a consecutive sample of 100 notifications of suspected EA and related medical records, using the Ritchie and Spencer Thematic Framework (1994). This audit has been undertaken in two distinct phases.

Results from Audit 1 of the first 50 notifications of suspected EA is available in a comprehensive report for review. Results from the second 50 notifications (Audit 2), which is currently being completed, will be available for review in early 2015.

#### **National Elder Abuse Conference 2014 & St Vincent's Health Australia Quality Award 2014**

Following a presentation at the National Elder Abuse Conference in September 2014 we received overwhelming interest from other agencies including the NSW Elder Abuse Prevention Unit regarding our innovative work.

In October 2014 at the St Vincent's Health Australia Quality Awards, the work undertaken at SVHM in the area of protecting Vulnerable Older People was a winner in the category of: Exceptional Care – Effective Clinical Governance.

#### **Continuing benefits into the future**

SVHM is building capacity within the organisation to respond systematically to EA. We have developed an important academic-practice research partnership in the area of EA and this research has already evidenced strong translational components. SVHM has set in place an effective structure, policy, processes and developed education resources/tools. Staff commitment is high however sustainability and expansion are key future challenges. We are seeking opportunities to refine, expand and develop our model of care, training and data collection initiatives through future collaboration with key external stakeholders, in particular current policy makers.

#### **References:**

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MELBOURNE

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Attachment 1: Safeguarding Vulnerable Older People at St Vincent's Hospital, Melbourne: From Research to Innovation

