

Inquiry into Elder Abuse in Queensland

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Forensic Patients held in secure dementia wards: Some of our most vulnerable elders live in secure dementia wards within aged care facilities. The staff within these facilities are often required to manage complex situations in relation to their residents' needs. They are generally trained to do this in relation to dementia. Forensic patients have been deemed by the legal system to have high level, complex mental health needs. Even with the higher funding afforded to the care facility in return for accepting a forensic patient, the complexity of demands that the inclusion of a forensic patient involves places great pressure on everyone within the facility on an ongoing basis. Staff within these facilities are not adequately supported, trained and qualified to manage these situations effectively.

Whilst the care facility is somewhat accountable in relation to any significant incidents that occur (absconding, assaults etc), there is an ongoing, ever-present difference in the needs of both the forensic patient and other residents. There is also a significant incentive on behalf of the care facility owners (who receive additional funding) to report positively on situations within the facility that may arise. Due to confidentiality, other residents or their friends and family are not consulted - either routinely or post-incident. Regular reviews may include selected staff and the patient, but never extend to the wider population - who can be negatively impacted as a result of having a current or recently released forensic patient living in such a close environment. Purpose-built and staffed facilities for all forensic patients are needed to support their needs until the end of life (in many cases). It may be that some of these facilities will need to be secure (as with a dementia unit) and staff will require the necessary training/support to manage the mental health issues that may arise. In a mental health facility, this would generally include ready access to security support as well as appropriate medical support. Purpose-built facilities require both this, and also an environment that is conducive to safe and comfortable living conditions. Whilst recommendations may suggest the benefit of life in a community environment, the overall safety of all people must be considered as a priority. Some patients will always require supervision and management of medication and support. It is only right that they receive this in a safe and effective manner. Placing them in a facility where they may cause harm to highly vulnerable people is neither safe, nor effective.