

CHCAGE013

Work effectively in
aged care



LEARNER GUIDE

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This Learner Guide

CHCAGE013 - Work effectively in aged care (Release 1)

This unit describes the performance outcomes, skills and knowledge required to work effectively in an aged care work context. The unit covers meeting job requirements, complying with organisational requirements and working in an aged care sector context.

This unit applies to individuals who work with older people in a range of community services and health contexts. Work performed requires some discretion and judgement and is carried out under regular direct, indirect or remote supervision.

The skills in this unit must be applied in accordance with Commonwealth and State/Territory legislation, Australian standards and industry codes of practice.

No occupational licensing, certification or specific legislative requirements apply to this unit at the time of publication.

A complete copy of the above unit of competency can be downloaded from the TGA website:

<https://training.gov.au/Training/Details/CHCAGE013>

About this Unit of Study Introduction

As a worker, a trainee, or a future worker, you want to enjoy your work and become known as a valuable team member. This unit of competency will help you acquire the knowledge and skills to work effectively as an individual and in groups. It will give you the basis to contribute to the goals of the organisation which employs you.

It is essential that you begin your training by becoming familiar with the industry standards to which organisations must conform.

This Learner Guide Covers

Work effectively in aged care

- I. Meet job role requirements
- II. Work within organisational requirements
- III. Work within an aged care context
- IV. Implement self-care strategies

Learning Program

As you progress through this unit of study, you will develop skills in locating and understanding an organisation's policies and procedures. You will build up a sound knowledge of the industry standards within which organisations must operate. You will become more aware of the effect that your own skills in dealing with people have on your success or otherwise in the workplace. Knowledge of your skills and capabilities will help you make informed choices about your further study and career options.

Additional Learning Support

To obtain additional support you may:

- Search for other resources. You may find books, journals, videos and other materials which provide additional information about topics in this unit.
- Search for other resources in your local library. Most libraries keep information about government departments and other organisations, services and programs. The librarian should be able to help you locate such resources.
- Contact information services such as Infolink, Equal Opportunity Commission, Commissioner of Workplace Agreements, Union organisations, and public relations and information services provided by various government departments. Many of these services are listed in the telephone directory.
- Contact your facilitator.

Facilitation

Your training organisation will provide you with a facilitator. Your facilitator will play an active role in supporting your learning. Your facilitator will help you at any time during working hours to assist with:

- How and when to make contact
- What you need to do to complete this unit of study
- What support will be provided

Here are some of the things your facilitator may do to make your study easier:

- Give you a clear visual timetable of events for the semester or term in which you are enrolled, including any deadlines for assessments
- Provide you with online webinar times and availability
- Use ‘action sheets’ to remind you about tasks you need to complete, and updates on websites
- Make themselves available by telephone for support discussion and provide you with industry updates by email where applicable
- Keep in touch with you during your studies

Flexible Learning

Studying to become a competent worker is an interesting and exciting thing to do. You will learn about current issues in this area. You will establish relationships with other students, fellow workers, and clients. You will learn about your own ideas, attitudes, and values. You will also have fun. (Most of the time!)

At other times, studying can seem overwhelming and impossibly demanding, particularly when you have an assignment to do and you aren't sure how to tackle it, your family and friends want you to spend time with them, or a movie you want to see is on television.

Sometimes being a student can be hard.

Here are some ideas to help you through the hard times. To study effectively, you need space, resources, and time.

Space

Try to set up a place at home or at work where you can:

- Keep your study materials
- Be reasonably quiet and free from interruptions
- Be reasonably comfortable, with good lighting, seating, and a flat surface for writing.

If it is impossible for you to set up a study space, perhaps you could use your local library. You will not be able to store your study materials there, but you will have a quiet place, a desk and chair, and easy access to the other facilities.

Study Resources

The most basic resources you will need are:

- A chair
- A desk or table
- A computer with internet access
- A reading lamp or good light
- A folder or file to keep your notes and study materials together
- Materials to record information (pen and paper or notebooks, or a computer and printer)
- Reference materials, including a dictionary

Do not forget that other people can be valuable study resources. Your fellow workers, work supervisor, other students, your facilitator, your local librarian, and workers in this area can also help you.

Time

It is important to plan your study time. Work out a time that suits you and plan around it. Most people find that studying, in short, concentrated blocks of time (an hour or two) at regular intervals (daily, every second day, once a week) is more effective than trying to cram a lot of learning into a whole day. You need time to ‘digest’ the information in one section before you move on to the next, and everyone needs regular breaks from study to avoid overload. Be realistic in allocating time for study. Look at what is required for the unit and look at your other commitments.

Make up a study timetable and stick to it. Build in ‘deadlines’ and set yourself goals for completing study tasks. Allow time for reading and completing activities. Remember that it is the quality of the time you spend studying rather than the quantity that is important.

Study Strategies

Different people have different learning ‘styles’. Some people learn best by listening or repeating things out loud. Some learn best by ‘doing’, some by reading and making notes. Assess your own learning style and try to identify any barriers to learning which might affect you. Are you easily distracted? Are you afraid you will fail? Are you taking study too seriously? Not seriously enough? Do you have supportive friends and family? Here are some ideas for effective study strategies:

1. **Make notes.** This often helps you to remember new or unfamiliar information. Do not worry about spelling or neatness, as long as you can read your own notes. Keep your notes with the rest of your study materials and add to them as you go. Use pictures and diagrams if this helps.
2. **Underline keywords** when you are reading the materials in this Learner Guide. (Do not underline things in other people’s books.) This also helps you to remember important points.
3. **Talk to other people** (fellow workers, fellow students, friends, family, or your facilitator) about what you are learning. As well as help you to clarify and understand new ideas, talking also gives you a chance to find out extra information and to get fresh ideas and different points of view.



Using this Learner Guide

A Learner Guide is just that, a guide to help you learn. A Learner Guide is not a textbook. Your Learner Guide will:

1. Describe the skills you need to demonstrate to achieve competency for this unit.
2. Provide information and knowledge to help you develop your skills.
3. Provide you with structured learning activities to help you absorb knowledge and information and practice your skills.
4. Direct you to other sources of additional knowledge and information about topics for this unit.

How to Get the Most Out of Your Learner Guide

Some sections are quite long and cover complex ideas and information. If you come across anything you do not understand:

1. Talk to your facilitator.
2. Research the area using the books and materials listed under Resources.
3. Discuss the issue with other people (your workplace supervisor, fellow workers, fellow students).
4. Try to relate the information presented in this Learner Guide to your own experience and to what you already know.
5. Ask yourself questions as you go. For example, 'Have I seen this happening anywhere?' 'Could this apply to me?' 'What if...' This will help you to 'make sense' of new material, and to build on your existing knowledge.
6. Talk to people about your study. Talking is a great way to reinforce what you are learning.
7. Make notes.
8. Work through the activities. Even if you are tempted to skip some activities, do them anyway. They are there for a reason, and even if you already have the knowledge or skills relating to a particular activity, doing them will help to reinforce what you already know. If you do not understand an activity, think carefully about the way the questions or instructions are phrased. Read the section again to see if you can make sense of it. If you are still confused, contact your facilitator or discuss the activity with other students, fellow workers or with your workplace supervisor.

Additional Research, Reading, and Note-Taking

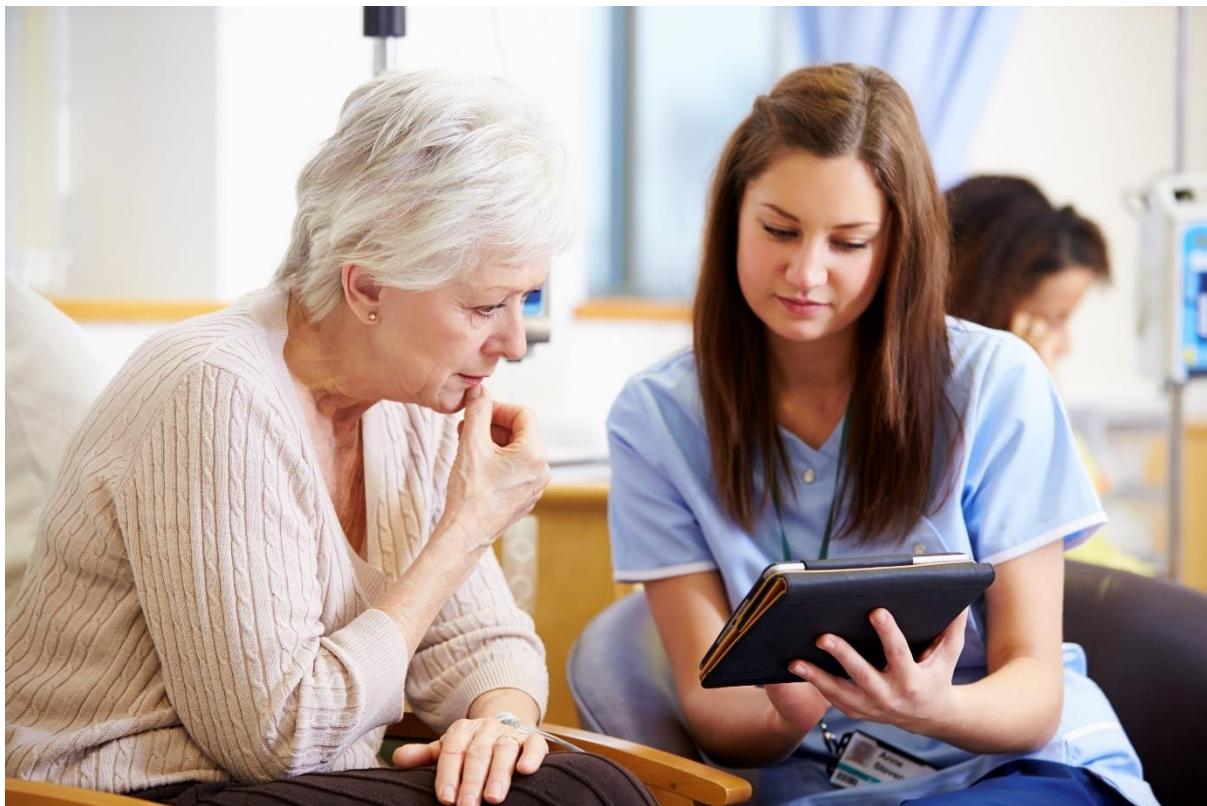
If you are using the additional references and resources suggested in the Learner Guide to take your knowledge a step further, there are a few simple things to keep in mind to make this kind of research easier.

Always make a note of the author's name, the title of the book or article, the edition, when it was published, where it was published, and the name of the publisher. This includes online articles. If you are taking notes about specific ideas or information, you will need to put the page number as well. This is called the reference information. You will need this for some assessment tasks, and it will help you to find the book again if you need to.

Keep your notes short and to the point. Relate your notes to the material in your Learner Guide. Put things into your own words. This will give you a better understanding of the material.

Start off with a question you want answered when you are exploring additional resource materials. This will structure your reading and save you time.

Introduction



Aged care services provide daily living assistance and support to older people. These services include both physical and emotional support. Australia offers several options for aged care services:

- **Commonwealth Home Support Programme (CHSP)** – They give minor support services to older people who are still living independently.
- **Home Care Packages Program (Home Care)** – They give increasing levels of support to older people. These are for people who want to keep living at home as much as possible.
- **Residential aged care** – These are services for older people who stay in residential facilities. Residential facilities are for people who can no longer stay at home independently. Older people can stay here on a temporary or permanent basis.
- **Flexible care** – These are different services for people in special situations. An example is *Transition Care*, a service for people coming home from a hospital stay.
- **Mainstream aged care** – This is an aged care stream that includes both types of residential aged care (permanent and respite), as well as home care.

Based on Australian Institute of Health and Welfare material. [Aged care](#), used under CC BY 4.0

The term *older people* refers to Australians aged 65 and above. This term also includes Aboriginal and Torres Strait Islander peoples from 50 to 64 years old. As of 2020, they make up around 16% of Australia's population. Their numbers have grown a lot in the last few decades. This age group may increase even faster in the coming years. The quick increase in this population is due to the following:

- People are living longer because of a better quality of life.
- Fewer people have children.

Based on Australian Bureau of Statistics data. Twenty years of population change, used under CC BY 4.0

Aside from 'older people', there are other terms related to aged care that you should learn:

Terminology	Meaning
Activities of daily living	Things performed in day-to-day life, such as eating, bathing, and using the toilet
Personal care	Services that help people with their activities of daily living
Admission	When someone enters aged care services
Discharge reason	Reason for an exit from aged care services
Exit or discharge	When someone leaves aged care services
Primary care services	Another term used for health care
Provider	Any organisation that provides aged care services
Specialist	A doctor trained in a specific area of medicine

Based on Australian Institute of Health and Welfare material. Glossary, used under CC BY 4.0

As an aged care worker, you will help provide aged care services to older people. You will support them in their daily activities. You will also provide social and emotional support. Your goal will be to help them live their best lives. You must learn the legal and professional standards to follow to do these things. You must also know the major issues older people face and how you can address them.

In this learner guide, you will learn how to:

- Meet job role requirements
- Work within organisational requirements
- Work within an aged care context
- Implement self-care strategies

I. Meet Job Role Requirements

Working with older people comes with a lot of requirements. These requirements help ensure the safety and dignity of people in aged care. This chapter will discuss your responsibilities as an aged care worker. You will read about the scope of your work and the expectations related to it. The chapter will also discuss the duties of other people in aged care.

To provide the best care for older people, you should examine your attitude towards them. Identify if there are any negative stereotypes about them that you still believe. A *stereotype* is a preconceived notion or image of a particular sort of person or thing that many people have. However, this is frequently untrue in reality. Society, in general, has many harmful beliefs and practices about older people. Below are some examples of these negative attitudes and stereotypes:

Paternalism

Paternalism means taking away older people's control over their own lives. It is when an aged care worker makes all the decisions related to an older person's care and daily life. This comes from the belief that older people cannot make good decisions. It assumes that they do not have the mental capacity to think about what is good for them. This loss of control leads to frustration and disempowerment for older people.

Ageism

Ageism means discriminating against a person based on their age. An example is when an employer refuses to hire older people. Their reasoning could be that older people are slower workers. They could also say that older people will need more days off due to medical reasons. These two reasons are assumptions that make it hard for older people to find work.



Stigma

Stigma means shame attached to a person because of their characteristic. There can be stigmas against mental health issues, disabilities and ageing.

Ageing is often seen as a negative thing by younger people. There is the stigma that older people are burdens to their families. Society and the media tend to show ageing as something people should fear or fight against. This leads to the feeling that older people are no longer desirable or valuable.

Common Misconceptions

There are a lot of misconceptions about older people. The following are examples of such fallacies:

- Older people are set in their ways. This means they will refuse to change their beliefs or habits.
- Older people are less tolerant of people of different races or sexual orientations.
- Older people are lonely.
- Older people are unhealthy.
- Older people lose their desire to live.
- Older people contribute little to society.

These misconceptions affect how society treats older people. Some may see them as fragile; others may see them as hindrances to progress. The truth is that older people differ in personality just as younger people do. They may be much happier at their current age than when they were younger. They can have as much capacity for change and growth as anyone else.

Dangers of Values Judgement on Perceived Quality of Life

Values judgment identifies something as wrong or good based on your own standards. *Perceived quality of life* is how good or satisfying you think your life is. Society tends to judge characteristics associated with ageing as negative. This association is something that people learn at a young age. Therefore, they may bring it with them when they get older. This can affect how they view their quality of life. They may view ageing as unfavourable, which will impact their happiness and satisfaction. Older people may feel that they can no longer do the things they used to do when they were younger, which may discourage them.

Identifying these negative attitudes and stereotypes will help you fight against them. If you can recognise some of these beliefs in yourself, you can change them. Having a more positive outlook on ageing motivates and empowers the people in your care.

In this chapter, you will learn how to:

- Identify job role requirements
- Discuss job role requirements with supervisor
- Identify and refer work tasks outside own job role scope



1.1 Identify Job Role Requirements

Your role as an aged care worker focuses on assisting older people. The specific scope of your function depends on where you are working. It is essential to understand what you should do to perform your role properly. If you do not know the limitation of your role, you may overstep your boundaries.

Make sure to read and understand the details of the role when you are applying for a job in aged care. There are different roles in aged care work, and each role comes with various tasks. Different employers may also have varying job descriptions for each position.

1.1.1 Job Roles in the Aged Care Sector

There are several jobs in the aged care sector. These jobs can range from entry-level support workers to trained medical workers. Regardless of your role, you will play an essential part in caring for older people. You should understand what is expected of you in each job role. The following are some of the job roles in the aged care sector:



- **Home care worker**

- Visit the homes of some older people during the day to check up on them and help them with house chores.
- Visit older people a few times a week to help them with errands, such as grocery shopping.
- Stay in the older person's home to provide full-time assistance if they have severe needs. This includes assistance with eating, bathing, etc.

- **Residential care worker**

- Provide care for older people in residential facilities.
- Facilitate group activities for older people to help them socialise and exercise.
- Help keep family members updated on the condition of their loved ones.

- **Community support worker**

- Handle social or educational programs where older people can participate.
- Provide leisure or recreation activities appropriate for older people.
- Promote healthy activities for older people to increase well-being.

▪ Nursing support worker

- Observe health and behavioural changes in older people and maintain their medical records.
- Assist registered nurses in providing basic medical procedures, such as:
 - Checking blood pressure
 - Checking blood sugar levels
 - Taking oxygen and temperature readings
- Administer first aid when needed.

▪ Registered nurse

- Provide clinical care for older people.
- Train and manage nursing support workers.
- Administer medicine and provide end-of-life care.

Higher-level jobs in this sector include the following:

Case manager

- Organises the details of the services received by an older person

Residential facility manager

- Oversees the day-to-day operations of a residential care facility

Home care coordinator

- Oversees the day-to-day operations of home care services



Lotus Compassionate Care

Lotus Compassionate Care is the simulated organisation that provides services in disability support, home and community support, and residential care referenced in our learning resources.

Access and review their handbook for more detailed information on different job roles in aged care through the link below:

[Lotus Compassionate Care – Staff Handbook](#)

(username: newusername password: new password)

1.1.2 Scope of Practice

Your *scope of practice* is the limitation of your role based on your position and training. This just means the scope of your responsibilities in the aged care sector. You can know your scope of practice by looking at your job position in your employee handbook. You can also check your company's policies regarding your role.

Going beyond your scope of practice can lead to negative consequences. You may cause harm to an older person if you do something outside of your work role or training. That is why it is essential to know your responsibilities and limitations.

Consider this example of a job post:

Home Care Worker

Role

The successful candidate will work part-time (two to three days a week). The role involves visiting client homes in the Carlton area. Each home care worker is assigned to visit three homes for six hours per home each week. The company will provide transportation for each home visit. The successful candidate will work with a care team to provide high-quality care.

Key Responsibilities

- Do routine checks on the physical and emotional well-being of clients.
- Assist in basic house chores, such as changing light fixtures or general cleaning.
- Assist in grocery shopping and meal planning.
- Report any issues or changes in the client's condition or home.

Qualifications

- Certificate III or IV in Aged Care
- Updated first aid certification

If you apply for this role, you should recognise what the position requires. You will be responsible for basic assistance in chores and errands. You may also provide basic first aid since the post says you need a first aid certification. You should also know how to recognise signs of problems with an older person so you can report them.

What you are not allowed to do, based on the job description, are the following:

Suggest and administer medication.

Make decisions on behalf of the person.

Stay with the person for full-time care without approval.

Referrals

Referrals are job tasks that another aged care worker has assigned to you. These tasks may be outside of their job role but within yours. You must understand the tasks that someone refers to you. This ensures that you can do your job and perform the tasks well. To make sure you understand a job referral, you can do the following:

- Check if the task falls within the scope of your job role.
- Confirm the task with the aged care worker who referred it to you.
- Confirm the task with your supervisor.
- Read the person's individualised plan to understand the task better.



Multimedia



This video shows a more detailed look into the daily tasks of an aged care worker in Australia.

[A Day in the Life of an Aged Care Worker](#)



Checkpoint! Let's Review

1. There are different roles in the aged care sector. Each role comes with its specific responsibilities and limitations.
2. It is essential to understand the scope of your work role so you can provide the best care. To do this, you should read your job description carefully.

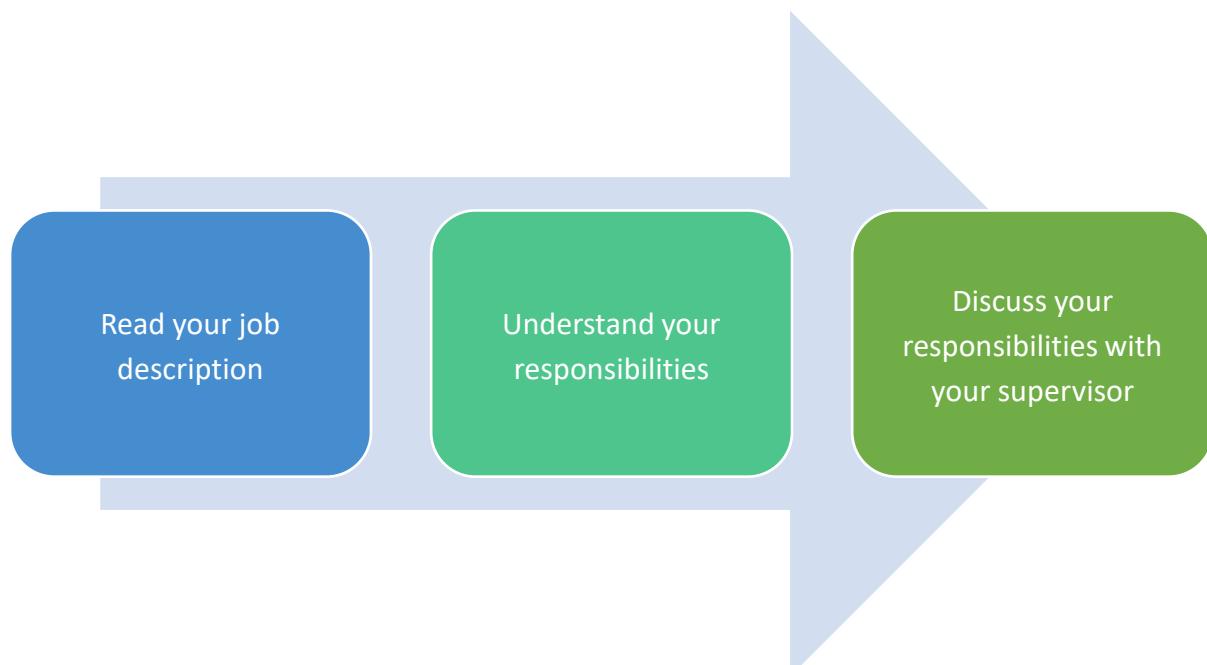
1.2 Discuss Job Role Requirements With Supervisor

Once you understand your job role, you should confirm it with your supervisor. You must discuss your work role with them. This ensures that you agree on your responsibilities. You can ask your supervisor for any questions and clarifications you might have. If you do not confirm the scope of your role, you cannot confirm if your interpretation is correct. You might make assumptions about responsibilities that you are not qualified to perform.

Ideally, this discussion is something you should have as soon as you get hired. Your supervisor will likely describe your responsibilities in detail. This should include your work hours, job responsibilities and expectations. You should listen carefully and ask for clarifications if needed. You might get new responsibilities that you should also confirm at any point.

It is also vital that you discuss what you expect from your role. This helps make it clear what you hope to get from your job. Agreeing on these will ensure that expectations are clear from both sides.

This graphic summarises the process of understanding and confirming your job role:



Clarifying and Confirming Your Job Role

In discussing your job role with your supervisor, there are some questions you should ask. These questions will help you understand exactly how you should do your job.

To ensure that you understand your job role, know the answer to the following questions:

What is my job title?

What are the qualifications for this job?

What will a typical workday look like for me?

Who are my immediate supervisors?

To ensure an understanding of your job responsibilities, know the answer to the following questions:

What are my main responsibilities?

What are other possible responsibilities my supervisor might assign to me?

What other tasks am I qualified to perform?

To ensure an understanding of your job scope, know the answer to the following questions:

What tasks am I not allowed to perform?

If there is a need for these tasks, to whom do I refer them?

Clarifying and Confirming Your Job Expectations

Aside from understanding your role, you should also know your job expectations. This means you should clarify what people in your workplace expect from you. You should also know how to meet those expectations.

To ensure an understanding of your expectations, know the answer to the following questions:

What does my supervisor expect from me?

What do the older people in my care expect from me?

What do my colleagues expect from me?

What criteria measure whether I meet those expectations?

What happens if those expectations are not met?

At the same time, you should also confirm what you expect from the job with your supervisor. These could include expectations about work hours, safety or salary details. You and your supervisor need to discuss these things. Confirming these will help ensure a good working relationship.

To ensure that you have made your expectations clear, discuss the following:

What support do I expect from my supervisor?

What do I expect from my colleagues?

To whom can I ask for help if my expectations are not met?



Checkpoint! Let's Review

1. You should discuss your role with your supervisor to confirm your responsibilities.
2. You should know the limitations of your role so that you do not perform tasks you are not qualified to do.

1.3 Identify and Refer Work Tasks Outside Own Job Scope

You learnt how to confirm your role and responsibilities in the previous section. After doing that, you should get to know the roles of the people you work with. Knowing the general functions of your coworkers helps you identify who is in charge of which task. This will help you if you ever need to refer to a task outside of your scope of practice. Not knowing other people's roles will make it hard for you to refer work tasks to the correct person.

1.3.1 Delegation Requirements by Health Professionals

Health professionals in aged care are university-trained practitioners who work as part of an aged care team. They help the older person to recover following an illness or injury. They also assist in managing the older person's chronic conditions.

Delegation means transferring the responsibility of a task to a specific person. All jobs require delegation. In aged care, the head of the care team assigns aspects of customer care to appropriate personnel. The state of Victoria has released guidelines for this purpose. These guidelines are the *Delegation and Supervision Guidelines for Victorian Nurses and Midwives*, covering the nurses working in aged care. Other states and territories follow their own similar guidelines.

The guidelines list the following responsibilities for delegating and accepting delegation:

Responsibilities for Delegating	Responsibilities for Accepting Delegation
<ul style="list-style-type: none"> ▪ Training the worker to ensure they qualify for the task ▪ Providing an assessment to test their competence ▪ Providing support and supervision ▪ Ensuring understanding and willingness for new responsibilities ▪ Evaluating the worker's performance in their role 	<ul style="list-style-type: none"> ▪ Seeking training and supervision ▪ Informing supervisors if they cannot perform a task for a valid reason ▪ Understanding the scope and limitations of the delegated task ▪ Performing delegated tasks to the best of their abilities ▪ Cooperating in evaluation sessions

*Based on Delegation and supervision guidelines for Victorian nurses and midwives, used under CC BY 3.0 AU.
© Copyright State of Victoria, Department of Health, 2014.*

There are various tasks that a health professional delegates to an aged care worker. One would be being responsible for the delivery of the support plan's elements. Aged care workers would also be required to participate in appropriate professional development activities.

Remember that the person who delegates a task is still responsible for it. Consequences for not performing the task will still fall on the person in charge.

This is why it is important to delegate the job to the correct person. The proper delegation will ensure that the person will perform the task correctly.

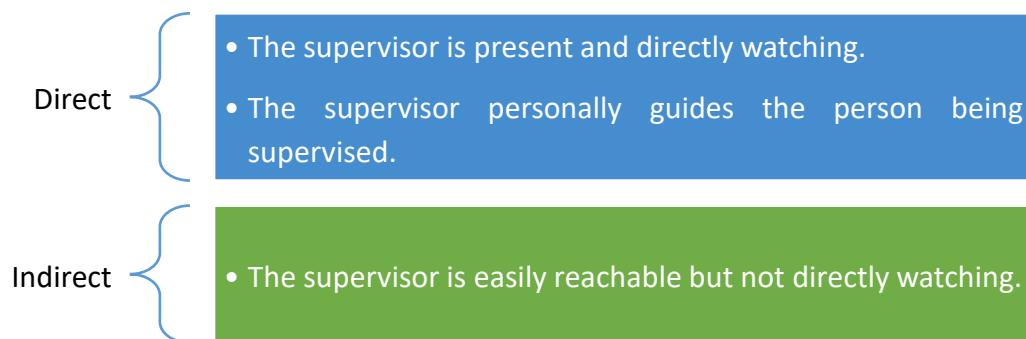
The table below provides sample delegation requirements that various health professionals may assign to you. You can also see the recommended support practices that you can follow when executing the delegated task.

Health professional	Delegation Requirement	Support Practices
Geriatric nurse	Assist the older person in overcoming mobility issues in daily activities.	Assist them in carrying out mobility exercises.
Orthopaedic nurse	Monitor the effects of pain medications to an older person.	Ask the person about what they are feeling after taking their medication. Do this as necessary.
Dietitian	Collect information about the person's health and diet.	Ask the person's family or carer for their medical background, as well as what they usually eat and drink.
Clinical psychologist	Assist the older person in psychotherapy.	Start simple conversations or stories with the person to help them share what they are currently feeling.

1.3.2 Supervision Requirements by Health Professionals

Supervision means watching a group of people to ensure they are doing their work. It involves keeping track of work performance and helping correct mistakes. Supervision is essential because it guarantees that everyone in the team is doing their job. The guidelines discussed in the previous section also talk about the types of supervision.

Working under supervision in aged care means performing tasks under the instructions and control of a supervisor. Your supervisor can observe your work through direct and indirect manner. The graphic below briefly explains the difference between the two:



You can determine who your supervisor is by looking at the organisation's reporting lines. You can also check the job description of a supervisor and confirm who among your colleagues are performing the work tasks mentioned in it.

The Aged Care Quality Standards are standards for providing aged care. All aged care providers must comply with these standards. Standard 7 is about human resources in aged care. Part of this standard states that providers should give their workers adequate supervision.

Similar to the previous section, the table below provides sample supervision requirements that various health professionals may assign to you. You can also see the recommended support practices that you can follow when executing the task.

Health professional	Supervision requirement	Support practices
Geriatric nurse	Ensure that the worker develops a positive and caring relationship with the person they are supporting.	Use encouragement to boost a person's self-esteem and make them feel capable.
Orthopaedic nurse	Ensure that the person is closely monitored after taking pain medications.	Regularly check the person's vital signs after they take pain medication.

Health professional	Supervision Requirement	Support Practices
Dietitian	Ensure informed consent is given before asking for the person's medical background from their family or carer.	Ask for the person's consent to collect information regarding their medical background.
Clinical psychologist	Ensure that the standards for providing psychotherapy are being observed.	Follow codes of practice for delivering psychotherapy support services.



Further Reading

You can read more about standard seven of the Aged Care Quality Standards by clicking the link below:

[Standard 7. Human resources](#)



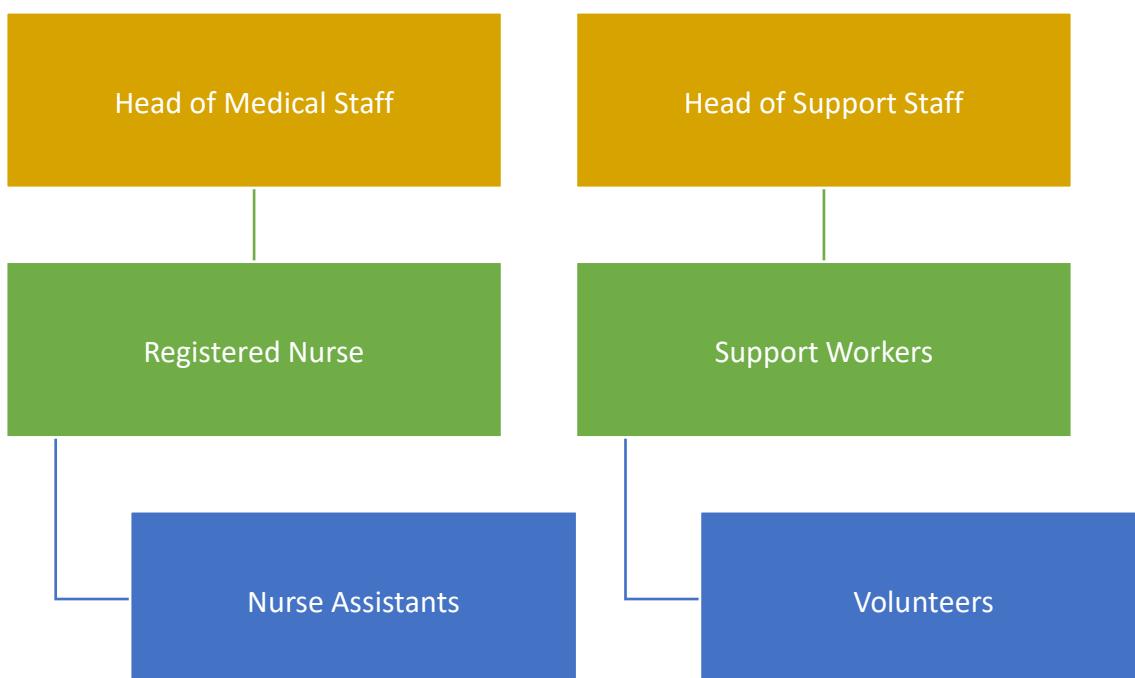
1.3.3 Reporting Lines and Delegation

A *reporting line* refers to the structure of an organisation. This tells you to whom you will report within your workplace. It is also known as an organisational chart. You need to realise the reporting line of your organisation to identify the people to whom you can refer certain tasks. It also helps you identify who is supposed to supervise you.

Below is a simplified example of a reporting line for an aged care provider:



In this chart, you can see to whom each role reports. Under the bottom row, there are still different hierarchies, such as the following:



For example, if you are a support worker, you will be supervised by a registered nurse. The registered nurse will be the one delegating tasks to you. Part of your job will be to report any issues or updates to them. Part of their job is to help you if needed and make sure you are doing your work well. Meanwhile, the head of the medical staff will delegate tasks to the registered nurses. If there is a task outside of your work role, you can use the reporting line to refer the job to the correct person. To do this, you should follow the policies and procedures set by your workplace.

Organisational Reporting Policies and Procedures

Reporting lines differ between organisations. This means the reporting procedures also vary depending on where you work. It would be best to learn the reporting policies and procedures in your job. Typically, reporting policies and procedures would include the following:

How to identify the limits of your role

To whom you should refer a task outside your role

Steps in referring a task outside your role

Steps in confirming that a task outside your role has been referred correctly



Checkpoint! Let's Review

1. Delegation is when a supervisor assigns tasks to workers. This depends on the reporting line of the organisation.
2. Supervision is when a supervisor helps someone learn their role. It can be direct or indirect.



Learning Activity for Chapter 1

Well done completing this chapter. You may now proceed to your **Learning Activity Booklet** (provided along with this Learner Guide) and complete the learning activities associated with this chapter.

Please coordinate with your trainer/training organisation for additional instructions and guidance in completing these practical activities.

II. Work Within Organisational Requirements

There are a lot of requirements aged care providers must follow. These requirements include legislation and standards set by the government. They also have requirements within different organisations. It is crucial to work within these requirements to ensure proper care for older people. Not following them can lead to legal issues for you or your organisation.

Organisations in the Aged Care Sector

There are many providers within the aged care sector. The government runs some of them, while others are private organisations. They all follow the same standards and laws. They all aim to provide the best care for older people.

Here are some organisations that connect older people with different care services:

Organisation	Function
My Aged Care	My Aged Care is the government's official website for finding relevant aged care needs. They provide access to services funded by the government. The website also has valuable links for providers, workers, and carers.
National Aged Care Alliance	The National Aged Care Alliance (NACA) represents 52 major aged care organisations in Australia.
Aged & Community Care Providers Association	They support non-profit and charitable aged care providers.
Aged Care Industry Association	They are an association that any Australian aged care provider can join. They promote and support the members within their association.
Leading Age Services Australia	They are another organisation that accepts membership from any care provider in Australia. They provide events and training programmes related to aged care.
Older Persons Advocacy Network	They are a network that provides free support services for older people. They help older people address issues related to their care.

Different care providers can join these organisations to get support. Some organisations help provide funding and training. Others assist members in accessing more people. These organisations also help older people find services for themselves.

Funding Systems

Aged care providers need funding to operate. *Funding systems* refer to the act of providing resources to finance an organisation's services in the aged care sector. Many private organisations get their funding from profit. This means they charge older people or their families for their services. The government and different organisations can fund these providers as well.

Residential care providers can apply for grants from the government. They can use these grants to build or fix their care homes. They use the *Aged Care Funding Instrument* (ACFI) to claim aid for each resident they provide care for. Home and community care providers can also apply for assistance from the government.

Aside from helping providers, the government also helps older people afford aged care. Older people who are on a low income can ask for help from the following services:

Commonwealth Home Support Programme (CHSP)

Home Care Package (HCP) funding

Community Assistance and Support Program

- **Commonwealth Home Support Programme (CHSP)**
 - Provides help for those experiencing homelessness
 - Provides home care and personal care
 - Helps with home repair or modifications as needed
- **Home Care Package Program Subsidy**
 - Provides help for people with more complex home care needs
 - Helps with meal assistance and medical care
- **Community Assistance and Support Program**
 - Provides help for those who are not eligible for CHSP or HCP grants
 - Helps with minor and short-term support, such as home maintenance

The Australian Government also offers residential aged care subsidy and residential respite subsidy. Flexible care subsidies for the Short-Term Restorative Care and Transition Care Programmes are provided as well.

Further Reading



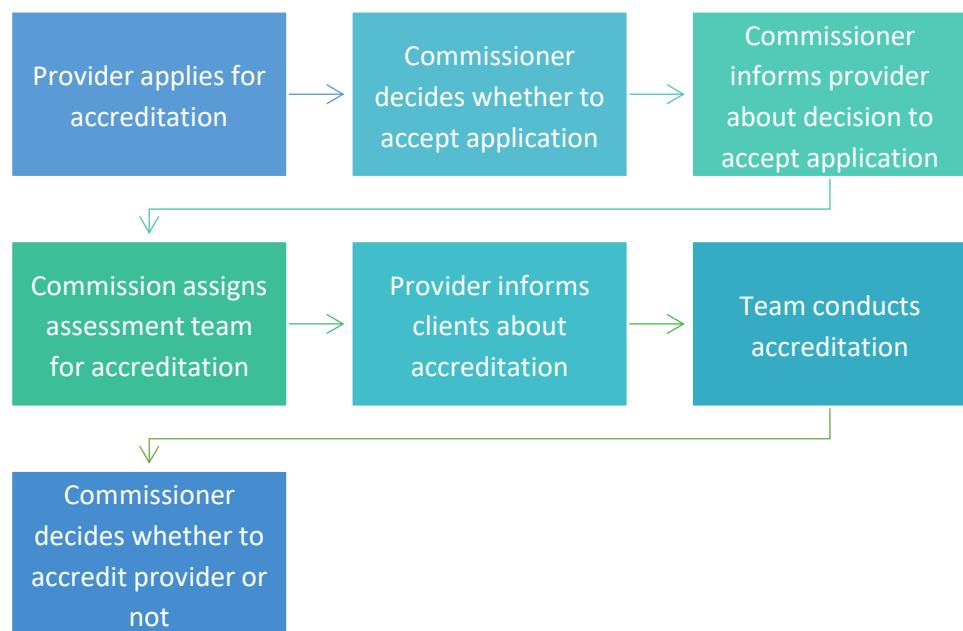
You can read more about government funding for aged care service providers below:

[Funding for aged care service providers](#)

Accreditation Systems

Accreditation means officially recognising that a provider is qualified to provide their services. Providers must get accreditation before they can receive help from the government. The *Aged Care Quality and Safety Commission* assesses providers for accreditation.

Below is a summary of the accreditation process:



Based on content from the Federal Register of Legislation at October 12, 2021. For the latest information on Australian Government law please go to <https://www.legislation.gov.au>. Aged Care Quality and Safety Commission Rules 2018, used under CC BY 4.0

Accreditation systems seek to assess the quality and care of services delivered by approved providers against the Quality Standards. This is done to contribute to improved safety, quality and continuous improvement of services.

Both accreditation and funding systems help ensure that older people can access care. Accreditation bodies check registered organisations if they meet recognised standards in the aged care sector. Receiving accreditation confirms the level of quality the organisation has achieved. This entitles them to receive funds from either government or other organisations.

For the rest of this chapter, you will read about other ways to secure good care for older people.

In this chapter, you will learn how to:

- Comply with professional conduct requirements
- Comply with legal and human rights framework requirements
- Work with interdisciplinary team members
- Use digital technology in the workplace

2.1 Comply With Professional Conduct Requirements

As an aged care worker, you have to follow certain professional conduct. *Professional conduct* refers to the expected behaviour of people in a specific job. In this subchapter, you will learn about your duties in aged care. You will also read about the standards and requirements you must live up to. Following professional conduct requirements ensures that you give older people the best care.

Duty of Care

Duty of care refers to a person's obligation to their job. It relates to the responsibility to not cause harm or injury to another person that could be reasonably foreseen. In an aged care setting, this requires capable staff, safe premises and quality clinical care.

Duty of care lists what you should do as an aged care worker. It outlines the standards of reasonable and appropriate care. It also provides a legal basis for determining how to make the best decisions regarding aged care.

In addition, duty of care is connected to the Charter of Aged Care Rights. You must perform your obligations to ensure that older people enjoy their rights. Your duty of care as an aged care worker includes the following:

Providing safe and high-quality service	Treating people with dignity and respect	Informing people about their care	Helping people maintain independence
Preventing abuse and neglect	Giving people control over their decisions	Listening to people's opinions and feedback	Protecting people's privacy



Further Reading

You can read more about the Charter of Aged Care Rights below. You can see how the duty of care listed above helps uphold these rights.

[Charter of Aged Care Rights](#)

2.1.1 Industry Standards

The *Aged Care Quality Standards* list the requirements that care providers must meet. The *Aged Care Quality and Safety Commission* created these standards. This Commission protects and improves the safety, health, well-being and quality of life of people receiving Australian funded aged care.

The Standards cover the rights of older people. They also include the services provided and the people working in aged care. All aged care providers must meet these standards. Here is a summary:

Standard	How to Comply
Standard 1 – Consumer dignity and choice	<ul style="list-style-type: none"> ▪ Treat people with respect. ▪ Value people's culture and diversity. ▪ Support people to make decisions for themselves. ▪ Help people live their best lives.
Standard 2 – Ongoing assessment and planning with consumers	<ul style="list-style-type: none"> ▪ Consider risks to people's well-being when providing care. ▪ Assess people's conditions when planning for care. ▪ Evaluate the organisation's services for effectiveness. ▪ Inform people about their care and services.
Standard 3 – Personal care and clinical care	<ul style="list-style-type: none"> ▪ Provide people with the best care to meet their needs. ▪ Monitor people's condition and respond to changes. ▪ Control health risks related to infection. ▪ Refer people to appropriate services when needed.
Standard 4 – Services and supports for daily living	<ul style="list-style-type: none"> ▪ Provide services such as food, home assistance and recreation. ▪ Support people to take part in their community. ▪ Ensure meals provided are healthy and enough for each person. ▪ Ensure provided equipment is safe and updated.

Standard	How to Comply
Standard 5 – Organisation’s service environment	<ul style="list-style-type: none"> ▪ Ensure the environment is safe, welcoming and comfortable. ▪ Provide accessible furniture and equipment. ▪ Provide people with opportunities to move freely.
Standard 6 – Feedback and complaints	<ul style="list-style-type: none"> ▪ Encourage people and their carers to give feedback and express complaints. ▪ Give people ways to express their opinions. ▪ Resolve complaints from people. ▪ Improve services based on people’s feedback.
Standard 7 – Human resources	<ul style="list-style-type: none"> ▪ Hire enough workers to provide care for every person. ▪ Ensure that workers are respectful and caring towards people. ▪ Train workers to have the required qualifications to work in aged care. ▪ Evaluate workers regularly to ensure good performance.
Standard 8 – Organisational governance	<ul style="list-style-type: none"> ▪ Create a safe and inclusive organisational culture. ▪ Manage the organisation well. ▪ Establish good risk management plans.

Each standard has its own role in aged care and how it promotes aged care rights. You can look at the table on the next page to see examples for Standards 4 and 7.



Further Reading

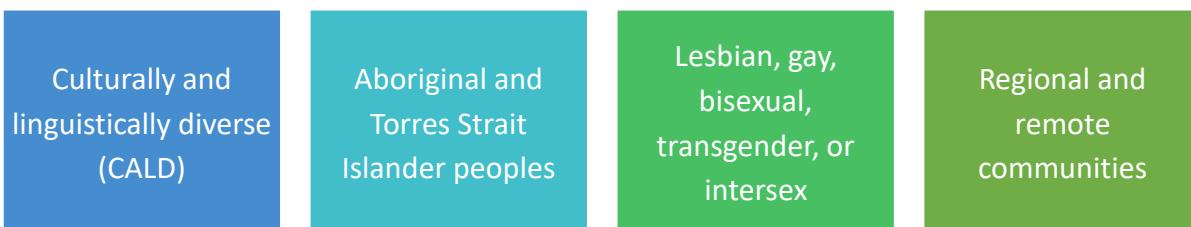
You can read more about the eight aged care quality standards in the fact sheet here:

[Aged Care Quality Standards fact sheet](#)

Industry standard	Role in aged care	How this industry standard promotes aged care rights
<i>Standard 4:</i> Services and supports for daily living	Provide safe and effective services and supports for daily living that optimise the consumer's independence, health, well-being and quality of life.	This industry standard ensures that older people get the services and supports for daily living that are important for their health and well-being.
<i>Standard 7:</i> Human resources	Ensure there is a workforce that is sufficient, and is skilled and qualified to provide safe, respectful and quality care and services.	This industry standard ensures that older people get quality care and services when they need them from people who are knowledgeable, capable and caring.

2.1.2 Cultural Diversity in the Aged Care Sector

Cultural diversity is the variety of cultures in society. Australians who are culturally diverse may face disadvantages in finding services. Diverse cultural groups of older people include the following:



- **Culturally and linguistically diverse (CALD)**
 - Tend to come from poorer backgrounds
 - May have difficulty accessing services due to language barriers
- **Aboriginal and Torres Strait Islander peoples**
 - Tend to be more represented in community care programs
 - Fall into the older population at age 50 instead of 65
- **Lesbian, gay, bisexual, transgender, or intersex**
 - May have experienced violence and discrimination
 - May feel like they must hide their sexuality when accessing services

- **Regional and remote communities**

- Make up less than one per cent of the older population
- Have minimal access to aged care services

Cultural Competency Requirement in Aged Care

Part of the first standard of the Aged Care Quality Standards specifies respecting the culture of older people. This means an aged care worker must know how to deal with older people from different cultural backgrounds. It can include differences in the following:

- Cultural/ ethnic identity
- Language
- Country of birth
- Religion
- Heritage/ ancestry
- National origin
- Race



Aged care services must be culturally respectful. Older people should feel accepted and valued no matter what their culture is. This respect for culture is also stated in the Charter of Aged Care Rights discussed in Subchapter 2.1. The third item in the Charter says that older people have the right to have their culture valued.

As an aged care worker, you must be culturally competent as you execute your work tasks. This is done by being sensitive to the cultural and social needs of older people. For example, older people from CALD backgrounds may struggle with communicating since English is not their first language. You can demonstrate your cultural competence by using English words that are easy to understand and avoid jargons and figures of speech.

Respect for Differences

As an aged care worker, you will meet older people from various cultural backgrounds. These backgrounds may be very different from what you are used to. It would be best to treat cultural differences with respect. It would help to show respect for older people's cultures by making an effort to learn more about them. You can politely ask them to talk about their culture. Encourage them to let you know if you are doing anything culturally inappropriate.

Here are some examples of how you can respect cultural differences:

Identify and address your prejudices.

Do not judge people's beliefs and traditions.

Seek opinions of people from different cultures.

Learn about other cultures.

Accept correction from people from different cultures.

Multimedia



This video talks about issues that indigenous Australians face in aged care.

[Indigenous Australians call for more culturally appropriate aged care facilities](#)

2.1.3 Risk Assessment

As an aged care worker, part of your role involves minimising risks to yourself and older people. To do that, you must know how to conduct a risk assessment. *Risk assessment* evaluates potential risks that may affect the older person you are supporting. It helps you plan ways to minimise the harm that risks can bring to them.

There are risks in some aspects of your work, especially since you are working with older people. It is crucial to identify these risks. Knowing the risks allows you to take action to avoid them.

You should conduct a risk assessment in the following areas or situations:

Doing your role as a care worker

Working in a person's home

Assisting a person to engage outside their regular setting

Planning an activity

Examining medication safety

Risks in Aged Care Worker Role

The Work Health and Safety Act 2011 protects your safety as an aged care worker. This Act states the duties of people in the workplace to maintain health and safety. Division 4, number 28 talks about the duties of workers in the workplace. These duties include:

- Taking care of your personal safety
- Making sure your actions do not risk the health and safety of others
- Complying with organisational policies or procedures related to health and safety

Part 2 of the Act talks about the consequences of breaking health and safety rules; Part 3 talks about how and when to report incidences of work accidents.

Based on content from the Federal Register of Legislation at October 13, 2021. For the latest information on Australian Government law please go to <https://www.legislation.gov.au>. Work Health and Safety Act 2011, used under CC BY 4.0

You can assess the risks to your health and safety at work by asking questions about the following areas:

Workplace violence

Physical risks

Stress

- **Workplace violence**

- Is the person prone to violent or angry outbursts?
- Is anyone close to the person prone to violent or angry outbursts?
- Will I be working alone or at night?
- Will I be working in a safe area?



- **Physical risks**

- Will I need to help lift or move the person?
- Will I need to help lift or move the person's furniture?
- Will I be working in a position that is bad for my posture?
- Will I be working in an area with a slip or fall risk?

- **Stress**

- Do I have a reasonable workload and deadlines?
- Can I handle this job emotionally?
- Are my superiors understanding and approachable?
- Do I feel supported in my job?

Risks in Working in a Person's Home

You face risks when you are working inside another person's home. Aside from the workplace violence risks above, there are other risks related to:

- Getting to a person's house
- The environment outside the person's house
- The environment inside the person's house
- The health of the person inside the house

You can assess the risks of working in a person's home by asking questions about the following:

Consideration	Questions
Getting to a person's house	<ul style="list-style-type: none"> ▪ Is the house in a traffic-safe area? ▪ Am I travelling alone?
The environment outside a person's house	<ul style="list-style-type: none"> ▪ Are there slippery or uneven walking surfaces? ▪ Are there animals outside the house?
The environment inside a person's house	<ul style="list-style-type: none"> ▪ Is the house fire-safe? ▪ Does the house have stairs? Do the stairs have sturdy railings?
The health of the person inside the house	<p>Does the person have any infectious diseases?</p>

Risks in Assisting a Person to Engage Outside of Their Regular Setting

Things can go wrong when you are helping a person try new activities. The health and safety risks can come from the physical strains of assisting a person. These risks can also come from the environment where the person will go. To assess these risks, you can ask the following questions:

- **Physical risks**
 - Does the person have issues with walking or moving?
 - Is the person prone to wandering when outside?
 - Does this person require lifting aides?
- **Environmental risks**
 - Is the place too loud, too busy, or too bright?
 - Are there slippery or uneven surfaces?
 - Do the people around pose any risk to the person or myself?

Risks in Planning an Activity

Sometimes you will need to plan activities for older people. You should consider the risks that may come with any activity. The risks depend on what activity you are planning. Here are some general factors to consider when planning activities:

Factors	Questions You Can Ask
Physical risks	<ul style="list-style-type: none"> ▪ Can the person physically do this activity? ▪ In what ways can the person potentially hurt themselves in this activity?
Emotional risks	<ul style="list-style-type: none"> ▪ Is there anything in this activity that can cause the person stress or have the potential to cause a behaviour? ▪ Is there anything in this activity that can cause the person emotional pain?

In assessing these risks, you base the answers on each specific person. Each person will have different needs and capabilities. Make sure to plan an activity that comes with minimum risks.

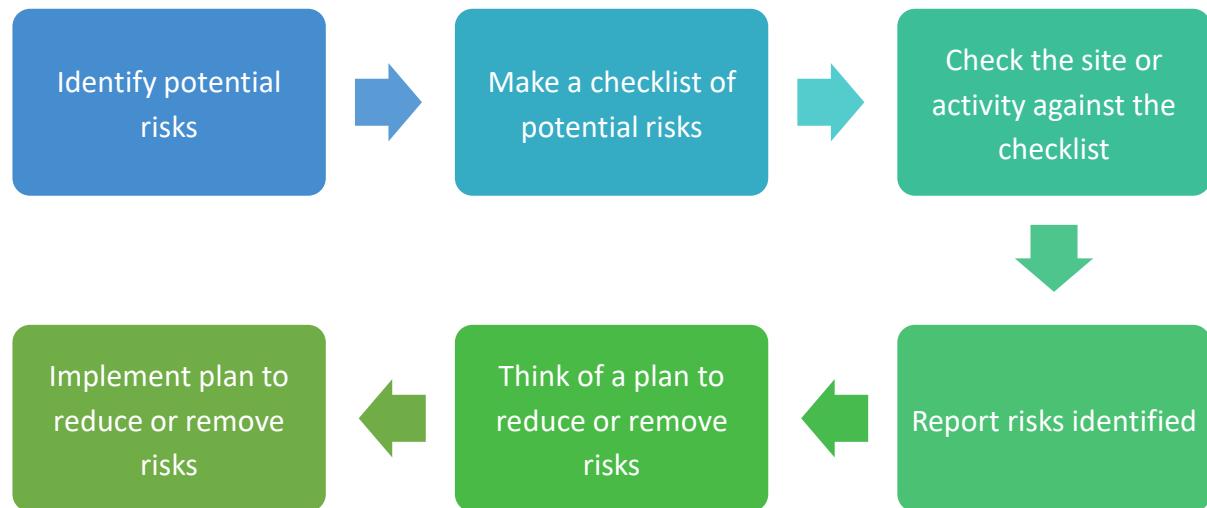
Risks in Giving Medication

If you have the authority to give medication to an older person, you should be very careful with it. Many things can go wrong when giving medication. You should know the appropriate reporting mechanisms of your organisation when giving medications. To assess and minimise medication risks, you can consider the following:

- **Dosage**
 - Do I know the correct medication to give?
 - Do I know how much medication to give?
- **Time**
 - How many times a day should the person take this medication?
 - What time should the person take this medication?
- **Side effects**
 - What are the possible side effects of this medication?
 - Has the person experienced side effects in the past?
 - Am I prepared to handle any side effects the person may experience?

Process of Assessing and Addressing Risks

Different organisations have processes for complying with work health and safety laws. These processes start with identifying risks and end with reducing them. Here is an example of a framework for risk assessment:



The risk assessment framework evaluates the risks involved in your work role to plan ways in minimising the harm it can bring to older people.



Further Reading

This page from WorkSafe Victoria provides further information on the risks of working in aged care:

[Aged care: Safety basics](#)



Checkpoint! Let's Review

1. To comply with professional conduct requirements, you should know your duty of care.
2. The Aged Care Quality Standards are the qualities that care providers should meet. It lays out eight general categories of standards in aged care.
3. It is essential to inform yourself about cultural diversity in aged care. Your services must be culturally respectful.
4. Your work comes with various health and safety risks. It is crucial to identify those risks so you can avoid them.

2.2 Comply With Legal and Human Rights Framework Requirements

Aside from professional conduct, there are other legal requirements related to aged care. There are also human rights frameworks to consider when providing care. These laws exist to protect and improve the quality of life of older people. Knowing these laws will help you act legally and properly. All aged care providers must comply with these legislations and frameworks. Not doing so may lead to complaints and legal investigations. It may also eventually lead to the closure of the service.

Role of the Office of the Ombudsman

An *ombudsman* is someone who investigates issues in organisations. The Ombudsman Act 1976 led to the creation of the office of Commonwealth Ombudsman. This is responsible for receiving complaints that an organisation cannot resolve by themselves. They must be fair and must not take sides.

When it comes to aged care, the office of Commonwealth Ombudsman helps older people sort out problems with Australian Government agencies. This is done by taking and investigating complaints about Australian agencies that deliver aged care services, such as:

- Department of Health and Ageing (the Department)
- Aged Care Complaints Investigation Scheme (CIS)
- Aged Care Commissioner (ACC)

If someone wants to file a complaint, they must contact their respective state or territory ombudsman. Below are the investigating bodies for each state or territory:

State or Territory	Links
Australian Capital Territory	ACT Ombudsman
Queensland	Queensland Ombudsman
Victoria	VictorianOmbudsman
New South Wales	Ombudsman New South Wales
Northern Territory	OmbudsmanNT
Tasmania	Ombudsman Tasmania

State or Territory	Links
Western Australia	Ombudsman Western Australia
South Australia	OmbudsmanSA

2.2.1 National Legislation

There are a few laws created to protect the welfare of older people. These laws also regulate the providers of aged care. Regulation is vital in managing the quality of aged care services. It ensures that care providers meet the standards and do not abuse older people.

This section will discuss the following legislation for older people:



Aged Care Act 1997

The Aged Care Act 1997 is the framework for government funding for aged care services. It also states what care providers must meet to get government assistance. Below is a summary of what the chapters within this Act contain:

Chapter	Details
Chapter 2	<ul style="list-style-type: none"> ▪ Conditions for becoming an approved provider ▪ Obligations of an approved provider ▪ Allocation of places for aged care
Chapter 3	<ul style="list-style-type: none"> ▪ Details about government financial aid ▪ Process of receiving government financial aid ▪ Conditions for receiving financial aid
Chapter 4	<ul style="list-style-type: none"> ▪ Responsibilities of an approved provider
Chapter 5	<ul style="list-style-type: none"> ▪ Conditions for receiving grants for improving services

Based on content from the Federal Register of Legislation at October 13, 2021. For the latest information on Australian Government law please go to <https://www.legislation.gov.au>. Aged Care Act 1997, used under CC BY 4.0

Quality of Care Principles 2014

The Quality of Care Principles 2014 regulates the quality of aged care providers. Schedule 2 of this document contains the Aged Care Quality Standards discussed in Section 2.1.1. Below is a table showing the relevant legal requirements in Schedule 2 and how they can promote aged care rights.

Relevant legal requirement in Quality of Care Principles 2014	How meeting this legal requirement will promote aged care rights:
<p><i>Standard 3: Personal and Clinical Care</i></p> <p>Each consumer gets safe and effective personal care, clinical care, or both personal and clinical care that:</p> <ul style="list-style-type: none"> ▪ Is best practice ▪ Is tailored to their needs ▪ Optimises their health and well-being 	<p>Providing older people with the best care will enable them to meet their needs.</p>
<p><i>Standard 4: Services and Supports for Daily Living</i></p> <p>Each consumer gets safe and effective services and supports for daily living that meet the consumer's needs, goals and preferences and optimise their independence, health, well-being and quality of life</p>	<p>Providing older people with services and support for daily living enables them to do what they want to do.</p>
<p><i>Standard 6: Feedback and Complaints</i></p> <p>Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.</p>	<p>Providing older people with the right to feedback and complaints will ensure their concerns are addressed and appropriate action is taken.</p>

Based on content from the Federal Register of Legislation at October 13, 2021. For the latest information on Australian Government law please go to <https://www.legislation.gov.au>. Quality of Care Principles 2014, used under CC BY 4.0

Aged Care Quality and Safety Commission Act 2018

This Act established the commission that monitors aged care providers. The Commission ensures that providers meet the standards for aged care services. Parts 3 to 5 of the Act state the process of forming the Commission. Parts 6 onward state the processes of investigating care providers. These include:

- Making yearly reports
- Maintaining privacy and confidentiality
- Approving providers
- Deciding consequences for providers who do not meet the standards
- Entering and searching home or residential care facilities

Based on content from the Federal Register of Legislation at October 13, 2021. For the latest information on Australian Government law please go to <https://www.legislation.gov.au>. Aged Care Quality and Safety Commission Act 2018, used under CC BY 4.0



2.2.2 State and Territory Legislation

Some states and territories have their own laws related to aged care. Their laws are still based on or similar to national legislation. Some states and territories just use the national legislation and do not make their own. All states and territories use the three laws discussed in Section 2.2.1. In this section, you will read about state or territory laws related to:

- Making authorised medical decisions
- General work health and safety

Laws About Medical Decisions

There are specific laws in some states and territories about making medical decisions. These decisions usually relate to end-of-life care. The laws enable older people to make decisions on their own medical care in advance. These include consent for medical procedures, such as surgery. These decisions also include consent for ventilation and resuscitation. For end-of-life care, older people may also decide on organ donation.

Here are the laws about medical decisions for each state or territory:

State or Territory	Links
Australian Capital Territory	Medical Treatment (Health Directions) Act 2006
Queensland	Powers of Attorney Act 1998
Victoria	Medical Treatment Planning and Decisions Act 2016
New South Wales and Tasmania	Common Law Advance Care Directives
Northern Territory	Advance Personal Planning Act 2013
Western Australia	Advance Health Directives
South Australia	Advance Care Directives Act 2013

Work Health and Safety

The Work Health and Safety Act 2011 was discussed in Section 2.1.3. Aside from that, states and territories also have their own work health and safety laws. They are all based on the national Act, with only minor changes. Here are the work health and safety laws for each state or territory:

State or Territory	Links
Australian Capital Territory	Work Health and Safety Act 2011
Queensland	Work Health and Safety Act 2011
Victoria	Occupational Health and Safety Act 2004
New South Wales	Work Health and Safety Act 2011 No 10
Northern Territory	Work Health and Safety (National Uniform Legislation) Act 2011
Tasmania	Work Health and Safety Act 2012
Western Australia	Work Health and Safety Act 2020
South Australia	Work Health and Safety Act 2012

2.2.3 Human Rights Frameworks

Human rights are rights that every person should enjoy. They recognise the inherent value of each person, regardless of background, where we live, what we look like, what we think or what we believe.

Human rights are based on principles of dignity, equality and mutual respect, which are shared across cultures, religions and philosophies. They are all about being treated fairly, treating others fairly and having the ability to make genuine choices in our daily lives.

Australian laws relevant to human rights are anchored on international human rights treaties. These treaties are used as legal basis for upholding and protecting human rights. They include the following:

- [International Covenant on Civil and Political Rights \(ICCPR\)](#)
- [International Covenant on Economic, Social and Cultural Rights \(ICESCR\)](#)
- [International Convention on the Elimination of All Forms of Racial Discrimination \(CERD\)](#)

- [Convention on the Elimination of All Forms of Discrimination Against Women \(CEDAW\)](#)
- [Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment \(CAT\)](#)
- [Convention on the Rights of the Child \(CRC\)](#)
- [Convention on the Rights of Persons with Disabilities \(CRPD\)](#)

The laws related to aged care aim to protect the rights of older people. These rights include the following:



Right to Healthcare

Older people have the right to receive quality healthcare. Governments must have laws that address the following aspects to meet this right:

Aspect	Details
Availability	There should be enough medical goods and services in all areas.
Accessibility	<ul style="list-style-type: none"> ▪ Medical goods and services should be non-discriminating and affordable. ▪ Medical goods and services should be physically accessible. ▪ It should be easy to find information about medical goods and services.
Acceptability	Medical goods and services must meet the needs of a diverse population.
Quality	Medical goods and services must be safe, effective and efficient.

Freedom From Discrimination

Older people have the right to protection from discrimination. An example of discrimination that older people face is 'ageism'. Chapter 1 introduction discusses this concept. Culturally diverse older people may also face discrimination based on their culture. Governments must have laws that protect older people against discrimination. For example, Australia has anti-discrimination laws, including the Age Discrimination Act 2004.

Right to Information

Older people have a right to access information about their care. This includes information about their service options and medical records. The government has set up an aged care information website called 'My Aged Care' to address this. Chapter 2 introduction provides a link to this website and a brief description of it.

Right to Autonomy

Autonomy means having control over one's decisions. Older people have a right to make decisions in matters directly affecting them. This includes decisions over their care, health and home. The government ensures this by having laws that protect their freedom over their care. This is addressed in the first standard of the Aged Care Quality Standards. Section 2.2.2 also discussed specific legislation about advanced care decisions.

Right to Participate

Older people have the right to take part in activities within their community. This means they also have the right to have their needs accommodated. The community must make sure that activities welcome older people to join. They must also take measures to ensure that they can safely and fully participate in these activities.



Older people also have the right to participate in decision-making in their community. They deserve to voice out their opinions and suggestions. This allows them to take a more active role in society and empowers them.



Further Reading

For more information on the role of human rights in aged care, you can read the report from the Australian Human Rights Commission below:

[A human rights approach for ageing and health - Respect and choice: home based and residential care for older people](#)

2.2.4 Complying With Legal and Human Rights Requirements

The first step to complying with legal requirements is understanding what they are. Legal language can be hard to understand. However, some websites summarise key points of relevant legislation. Once you know the laws, it will be easier to comply with them. Here are some things you can do to ensure legal compliance:

Understand the legal requirements of your job role.

Research the provider you will work for.

Act in accordance with the law.

- **Understand the legal requirements of your job role.**

- Learn about the laws relevant to aged care.
 - Learn about the standards in aged care.

- **Research the provider you will work for.**

- Find out if they are part of any reputable organisations.
 - Read reviews about the provider.
 - Ask if they are an accredited provider.

- **Act in accordance with the law.**

- Perform your job role to the best of your abilities.
 - Follow organisational policies and procedures.
 - Treat people with care and respect.

Complying with human rights requirements means respecting the rights of older people. Here are some ways you can do that:

What You Can Do	How You Can Do Them
Know their rights	Learn and understand what rights older people have.
Treat them with respect	<ul style="list-style-type: none"> ▪ Respect their autonomy and dignity. ▪ Respect their privacy.
Provide their basic needs	<ul style="list-style-type: none"> ▪ Provide them with companionship. ▪ Ensure their safety. ▪ Provide them with food and shelter.



Checkpoint! Let's Review

1. The three primary laws related to aged care are the following:
 - Aged Care Act 1997
 - Quality of Care Principles 2014
 - Aged Care Quality and Safety Commission Act 2018
2. States and territories follow the same national laws. However, they have their own laws about medical decisions for older people.
3. The laws regarding aged care are based on protecting the human rights of older people.

2.3 Work With Interdisciplinary Team Members



Interdisciplinary means coming from more than one discipline or specialty. Caring for older people is a team effort. Thus, care providers have interdisciplinary teams to provide services for older people, including medical care, counselling, personal care and administrative care. Each team member has a role to play in taking care of an older person.

Section 1.1.1 discussed the different roles you could have as part of a care team. It is essential to know your role and how you can contribute to the team. You should have good communication skills as a team member. You should also know how to cooperate with the other people in the team. If you cannot collaborate with your team, you cannot provide good services.

Roles of Team Members

An interdisciplinary care team consists of one older person and several aged care workers. The members depend on the needs of the older person. Examples of members of an interdisciplinary team include the following:

Team Members	Roles and Responsibilities
Medical staff <ul style="list-style-type: none"> ▪ Doctors ▪ Nurses ▪ Specialists 	<ul style="list-style-type: none"> ▪ Provide medical care depending on the person's needs. ▪ Provide routine check-ups. ▪ Monitor the person's health and nutrition.
Support staff <ul style="list-style-type: none"> ▪ Aged care workers ▪ Counsellors 	<ul style="list-style-type: none"> ▪ Help with daily living activities. ▪ Help with errands and community participation. ▪ Provide socialisation and mental health care.
Administration <ul style="list-style-type: none"> ▪ Residential facility staff ▪ Contact persons 	<ul style="list-style-type: none"> ▪ Manage the person's care schedule. ▪ Manage the person's care costs. ▪ Keep track of daily operations in residential facilities.



Further Reading

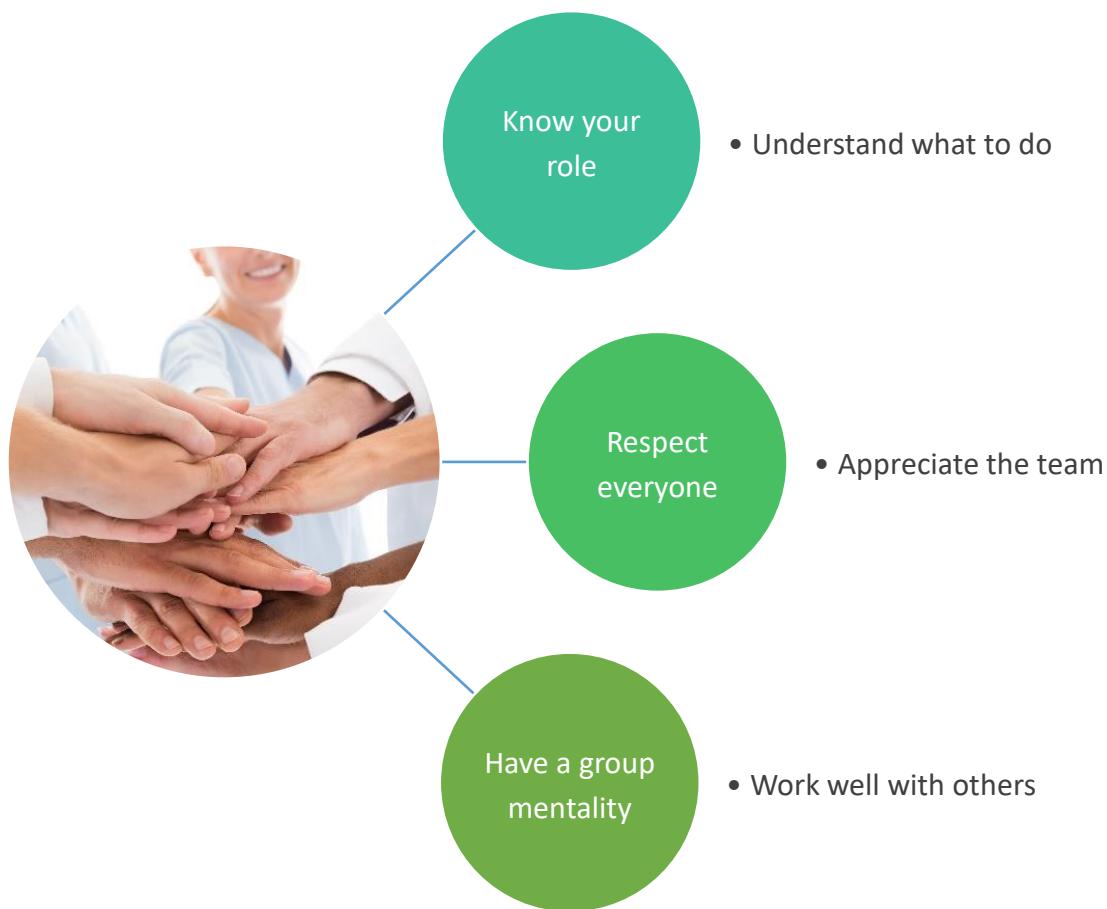
You can read more about the different roles of workers in the aged care sector here:

[Who's who in aged care](#)

2.3.1 Working With Your Team

It is crucial to have good teamwork when working in aged care. Teamwork means putting your skills together for a common goal. Each member needs to do their part well so that the whole team can function correctly. Teamwork also makes the environment more pleasant. Having a good relationship with the team will significantly benefit older people in your care. Without teamwork, the care you provide may be incomplete or inconsistent.

Here are some tips for working well with a team:



Knowing your role means knowing what to do and doing it well. Respecting everyone means appreciating what each member does. It also means working within your role and not taking over all the work. Having a group mentality means helping when you can. You should not overstep your boundaries, but you should also not ignore a team member who needs help. Finally, you should keep everyone updated on details about older people in your care. This is important in making sure they are receiving the best care.

Consider the following when working with an interdisciplinary team:

Situation	What to Do
When you first meet the older person	<ul style="list-style-type: none"> ▪ Introduce yourself to them and the other members of their care team. ▪ Understand your specific role in this care team. Confirm it with your supervisor if needed. ▪ Understand the roles of the other members of the team. Confirm it with them if needed.
When there is a task that you are not qualified to do	<ul style="list-style-type: none"> ▪ Identify who in the team is qualified to do that task. ▪ Refer the task to the correct member. Provide them with all the information they need related to the task.
When there is a problem with an older person's care	<ul style="list-style-type: none"> ▪ Identify the details of the problem. ▪ Identify the possible causes of the problem. <ul style="list-style-type: none"> ○ If you caused the problem, take responsibility, and apologise for it. ○ If you did not cause the problem, remember not to judge and focus on fixing it instead. ▪ Discuss any possible solutions with the other members of the team. ▪ Work with the other members in implementing the solutions.



Checkpoint! Let's Review

1. Each person in aged care has a team that consists of workers from different disciplines.
2. All members of an interdisciplinary team need to work together. This allows the whole team to provide the best care for older people.

2.4 Use Digital Technology in the Workplace



Information sharing is vital in aged care. You need to access and share information about people in aged care, including:

- Basic information (name, age, address, family)
- Medical records
- History of their care and service
- Any complaints or feedback they have given

You will also need to access information about your workplace and your employment. This information can include shared files and reports. They can also have your employment details, like your records and benefits.

Keeping paper records is okay, but it is easier and safer to keep digital records. Technology makes it easier to find the information you need. Technology also makes sending data to other people who need it more accessible. This is why you should learn to be proficient in the technology used in your workplace. You may need to look up an important detail about someone at some point. Without knowing how your digital record system works, you will have a hard time with this.

2.4.1 Engaging With People and Organisation Using Technology

Using technology is an effective way to connect with the people you work with. Technology has become the best way to connect with others. In doing your job, you will be using technology to engage with your team members and older people. You should have at least a basic knowledge of using the systems that let you do that.

Engaging With the Care Team

Communicating with the care team using technology is essential. You cannot always meet with each other in person, so you will need a different way to talk to them. Below are some examples of technology that you might have to use to contact your colleagues:



There are many reasons you need to use technology to connect with your colleagues. Here are a few examples:

- A person's new doctor asks for a record of their medical history. You can find these records in your organisation's files. Then, you can send the records through email.
- A new employee has just joined the care team. You can help them catch up on details about an older person through a group video meeting. You can also share the relevant records with them.
- You will find a video with some valuable tips about working in aged care. You can share this video with your colleagues by sending a link to your group chat.

Engaging With Older People

We tend to think that older people struggle to use technology. This is true in some cases, but some can use technology just as efficiently as younger people. You can use the same ways mentioned above to communicate with the older people in your care. There are also ways to keep them engaged and entertained using technology. Here are a few examples:

- If they have a computer and Internet access, you can teach them how to research their interests. They can also learn to search for their favourite shows on video hosting sites.
- If they have a tablet or mobile phone, you can help them look for apps and games they will enjoy. They can play word games to keep their minds stimulated. They can play games with their friends to keep them socially engaged.

Engaging With the Organisation

Most organisations rely heavily on technology for their operations. People within an organisation usually communicate using technology. The organisation can also manage their employees, clients and operations digitally. Here are some examples of ways you will engage with your workplace using technology:

- Applying for annual leave
- Checking for updates on people or the organisation
- Storing and accessing records
- Recording your attendance and completed tasks



Checkpoint! Let's Review



1. Knowing how to use technology is vital in communicating and cooperating with others. Technology offers a quick and easy way to find and share information.
2. You will use technology in your job to engage with your team members, older people and the organisation.



Learning Activity for Chapter 2

Well done completing this chapter. You may now proceed to your **Learning Activity Booklet** (provided along with this Learner Guide) and complete the learning activities associated with this chapter.

Please coordinate with your trainer/training organisation for additional instructions and guidance in completing these practical activities.

III. Work Within an Aged Care Context



Your job as an aged care worker must focus on the aged care context. This means you should know about aged care's current strategies and views. You should also know the processes and procedures related to caring for older people. Care for older people differs from care in other sectors.

This chapter discusses the different aspects of working in aged care. It focuses on the practical aspects of your work. You will learn about how to work directly with older people. It would be best to know this because this is the most crucial part of your work.

Within the aged care sector, there are different approaches and opinions. Understanding them will help you form your own thoughts. This will also help you find strategies that will work best for you and the older people in your care.

Person-Centred Approaches

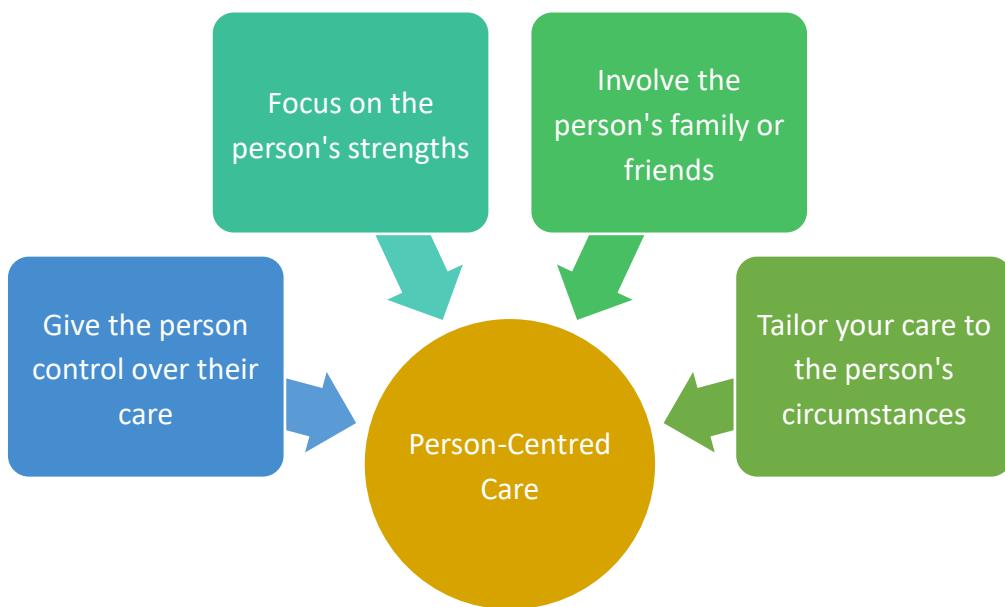
As the name suggests, *person-centred* means putting a person at the centre of their care. This means seeing them as a person first and not as a ‘case’. The person-centred concept aims to protect the rights and dignity of a person. It focuses on matching services to meet a person’s needs and wishes. For example, using a person-centred approach will give the person the power to choose. You can let them choose what activity they want to do or where they want to receive services.

Using a person-centred approach in aged care provides the following benefits:



- Minimise the functional decline of older people in hospitals
- Increase patient and carer satisfaction
- Decreased healthcare acquired infections
- Improved functional status

In providing person-centred care, you should do the following:



Based on [What is a person-centred approach?](#), used under CC BY 4.0. © State of New South Wales NSW Ministry of Health. For current information go to www.health.nsw.gov.au.

Contemporary View of Aged Care

Contemporary is another word for present or modern. Modern views on aged care have changed a lot from traditional opinions. Today, there is a more favourable opinion on aged care. Society's views on aged care slowly shift as people live longer and healthier lives. Below are some examples of how views on ageing and aged care have changed:

Past Views	Present Views
People saw ageing as a negative thing.	People are starting to see ageing as a natural part of life. It is not something that people should fear or avoid.
Receiving aged care services means people can no longer do things for themselves. Aged care workers do everything for older people.	Receiving aged care services does not mean losing independence. Aged care workers are there to help and not do everything for older people.
Older people should avoid being too active because it could be physically dangerous.	Older people should stay as active as possible to maintain their health.

Difference Between Care and Support

The terms 'care' and 'support' are sometimes used interchangeably. However, there is a difference between these two in the aged care context. Caring for a person means doing things for them. Supporting a person means encouraging them to do something for themselves. Here is an example of their difference in practice:

Caring for Someone	Supporting Someone
Going grocery shopping for a person: <ul style="list-style-type: none"> ▪ Identifying what they need and buying the things for them ▪ Asking them if there are other things they want you to buy ▪ Unpacking the groceries for them 	Supporting a person in grocery shopping: <ul style="list-style-type: none"> ▪ Going with the person to the grocery or teaching them to shop online ▪ Letting them decide what to buy on their own ▪ Helping with carrying or unpacking only when needed

There are instances when care is needed, such as when people do things they cannot do on their own. However, it is vital to prioritise support. You should help older people stay as independent as possible.

Empowerment of Person Receiving Care

Empowerment means a person has control over the decisions that affect their life. An empowered person is confident in making choices for themselves. It is important to help older people feel empowered in their care. This involves promoting and encouraging their self-determination. Older people must be supported to make their own choices and decisions, particularly where the outcomes directly affect their lives.

You and the care team should respect their decisions as long as these decisions do not harm them. Here are some ways you can empower older people:

What You Can Do	How You Can Do It
Always ask for their opinions	<ul style="list-style-type: none"> ▪ Even for small things like the milk brand, make sure to ask them what they want. ▪ Give choices that will let them make decisions as often as possible. Honour those decisions instead of deciding for them.
Reassure them	<ul style="list-style-type: none"> ▪ Let them know that you will help them and support them with whatever they choose to do. ▪ Let them know that it is okay to change their minds.
Help them feel productive and valued	<ul style="list-style-type: none"> ▪ Give them as much independence as possible. ▪ Find activities that they can enjoy on their own. ▪ Find opportunities for them to help others.

Social Role Valorisation

Valorisation is assigning a higher value to something. Social role valorisation is a theory about people's value in society. It states that people with more 'useful' roles in society get better treatment. For example, society sees teachers, doctors and young people as 'useful'. Therefore, they are more valued. They receive better treatment and more opportunities.

Older people, especially retired ones, have lower social roles. This means they may not be as valued in society. As discussed earlier, modern views on aged care are changing this perception. The aged care sector is working on raising the value of older people in society. They do this by finding opportunities for older people to take on more valued roles. Examples of these opportunities are volunteering and community involvement.

Risks in Segregating and Congregating Older People

Segregating and congregating are similar concepts with major differences. *Segregating* means separating a group from the general population. *Congregating* means gathering people with similar beliefs or interests. In the aged care context, segregating older people means forcefully separating them. Congregating older people means giving them a safe space to gather with their peers. Here is an example showing the difference between the two:



- **Segregation**

- Family members forcefully leaving an older relative in a residential facility
- A dance studio where older people can only join a special class with other older people

- **Congregation**

- Older people choosing to move to a residential facility to be with other older people
- A dance studio where there is a special class available for older people, but they can also join the other classes

Congregation implies that there is a choice to gather with similar people. Segregation means that the separation is forced. Here are the risks involved with both:

- **Segregation risks**

- Older people may have increased feelings of isolation and rejection.
- Older people may have less access to services available to younger people.

- **Congregation risks**

- There may be a further cultural separation between younger and older people.
- Large groups of older people may have greater medical needs that are more difficult to meet.

Key Issues in Aged Care



The aged care sector faces several issues related to providing care and services to older people. These issues include the following:

Key Issues	Details
Funding	<ul style="list-style-type: none"> ▪ Providing quality care can get expensive. ▪ Many government and non-government-funded providers lack the resources to improve their services.
Workforce	<ul style="list-style-type: none"> ▪ The lack of skilled staff in the aged care sector is heavily dependent on the skills of the workforce. ▪ There are difficulties in recruiting and retaining staff.
Treatment of older people	<ul style="list-style-type: none"> ▪ Some older people report not having their needs met. ▪ Some older people report experiencing abuse from aged care workers.

You need to know the different concepts and major issues in aged care. This allows you to make good choices in providing care and services. This knowledge also helps you adjust your views and expectations for your role. Understanding how to empower older people will improve your relationship with them.

You can refer to the table below to know the key issues in aged care and aged community support services. Their impact to the provision of care services for older people are also covered.

Support service	Key issue	How this key issue hinders the care and services provided to older people
Aged care support	Harassment and abuse	This issue prevents old people from living without abuse and neglect.
	Insufficient equipment and resources	This issue prevents old people from having high quality care and services.
Aged community support	Lack of aged care awareness activities	This issue prevents old people from feeling valued and supported by the society.
	Lack of funds for aged care services	This issue prevents old people from availing high quality care and services funded by the government.

Psychosocial Disability of Older People

Psychosocial disability refers to the impact that a person's mental illness has on their social life. These people struggle to participate in society and communicate with others. Specifically, they find it difficult to:

- Join in certain types of environments
- Concentrate
- Have enough stamina to complete tasks
- Cope with time pressures and multiple tasks
- Interact with others
- Understand constructive feedback
- Manage stress

Based on [What is psychosocial disability?](#), used under CC BY 4.0,
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As an aged care worker, you might encounter clients who prefer to isolate themselves or struggle to communicate their needs. This can be due to their psychosocial disability. As such, you must be familiar with the nature of this disability and how you can provide support as required.

This section will cover the following topics:

Differences between psychosocial disability and mental health

Impacts of psychosocial disability in the lives of older people

Episodic nature of psychosocial disability and additional or alternate supports that may be required during these periods

Ways in which psychosocial disability interacts with other disabilities

Differences Between Psychosocial Disability and Mental Health

The mental health of a person refers to their emotional, psychological, and social well-being. It is the capacity of a person to handle various situations in their lives. When a person experiences things that negatively impact their emotions, thinking, or behaviour, then a mental health condition is formed.

Psychosocial disability is tied to a person's mental health condition. It is not a diagnosis but a term to describe the functional effects, obstacles or barriers to equality that the person experiences as they interact with the social environment. It is more about the struggle to function in everyday tasks, unlike other people.

You must keep in mind that older people with mental health conditions do not automatically have a psychosocial disability. Some people with mental health conditions may experience challenges related to their condition. However, this will not affect their ability to concentrate, complete tasks, cope with stressful situations, interact with others, manage stress or accept constructive feedback.

Among older people, various factors can become the cause for developing a psychosocial disability. One of the possible reasons can be their trauma from past experiences. For example, there might be older people who have discovered this disability early in life and have experienced shaming or discrimination for it. As an aged care worker, you might feel challenged in helping them overcome their barriers to social inclusion. However, remember to be patient and sensitive as you encourage them to avoid triggering any negative response.

Impacts of Psychosocial Disability on the Lives of Older People

The Survey of Disability, Ageing, and Carers (SDAC) in 2015 revealed that the number of people with psychosocial disability increases with their age. The survey recorded the highest number of this disability in people aged 85 years and over.

*Based on [Disability, Ageing and Carers, Australia: Summary of Findings](#), used under CC BY 4.0,
© Commonwealth of Australia*

Older people experience various health issues that come with their age. These issues can become worse due to psychosocial disability. Older people who have this condition experience restrictions on the following:

Ability to understand constructive feedback

Ability to cope with time pressures and multiple tasks

Ability to interact with others

- **It restricts a person's ability to understand constructive feedback.**

Older people with psychosocial disability may struggle in accepting words that may come off as criticisms. They might interpret it negatively or withdraw themselves from any interaction. In these instances, it is best to provide words of comfort and reassurance so that the older person will not feel discouraged.

- **It restricts a person's ability to cope with time pressures and multiple tasks.**

Older people with psychosocial disability lack organisational skills. It is common among them to experience a decline in their core ability. This refers to the inability to perform either self-care, mobility, or communication independently. They would require external assistance to perform these tasks. There are even times when they cannot perform basic everyday tasks.

- **It restricts a person's ability to interact with others.**

Older people with psychosocial disability struggle with interactions. Their hesitation to communicate with others makes it difficult for them to ask for assistance. Therefore, you must always be observant of how they act, like checking their facial expressions or body movements. This will help you in attending to their needs.

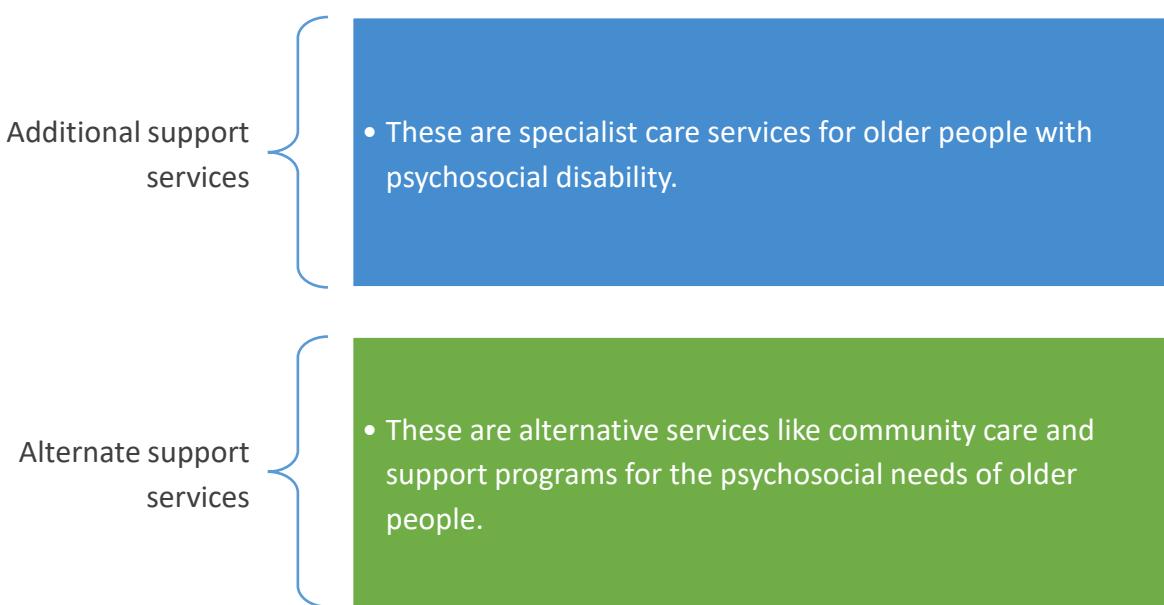
Episodic Nature of Psychosocial Disability



Episodic means not constant and changing every day. This means that an older person is fine one day, and then they would suddenly not want to interact at all the next day. This is the nature of psychosocial disability. It can also vary in intensity, duration, and impact on the person. For example, someone who experiences anxiety can find it uncomfortable to interact with you, but they still manage to do it. However, when faced with other people, their anxiety gets heightened, and they return to isolation.

Due to the episodic nature of psychosocial disability, older people who have this condition require support services. Depending on how much the disability affects the safety and well-being of the client, you can seek the help of other professionals or agencies.

Support services can be any of the following:



Additional Support Services

States and territories in Australia have their own support services for older people. These services focus on specialist and clinical care to aid in the mental health recovery of the person. Since psychosocial disability is episodic, the type of additional support service that an older person with this condition requires varies depending on its intensity.

Medical professionals, together with the support team, manage support services. Medical professionals that help older people who experience episodes of psychosocial disability include the following:

- **General practitioners/ specialist doctors**

Psychosocial disability in older people puts their health at risk. General practitioners conduct regular check-ups on their clients to check if their body functions are stable.

On the other hand, specialist doctors focus on monitoring an existing health illness of the client. Both general practitioners and specialist doctors can prescribe medication to manage older people's diseases and improve their health.

- **Mental health practitioners**

Mental health practitioners provide consultations, professional advice, therapy and treatment to older people with psychosocial disability. They can also prescribe medicine to help stabilise the mental health of the client. This can lead to less occurrence of episodes and better emotional well-being of the client.

- **Occupational therapists**

Occupational therapists can also help older people who experience episodes of psychosocial disability. They are responsible for improving the strength, mobility, and basic motor skills of older people. This, in turn, can help older people become more independent in doing their everyday tasks. Occupational therapists also help encourage older people to socialise with others.

Alternate Support Services

Alternate support services include national and local support programs for older people with psychosocial disability. They provide a wide range of support activities that can help older people recover and interact with others. They also reduce the likelihood of needing more intense or serious health services for older people.



Examples of alternate support services include the following:

- **National Disability Insurance Scheme (NDIS)**

NDIS is a program that grants financial assistance to people with disability between the age of 7 and 65. It provides a wide range of support programs for mental health wellness, depending on the needs of the person.

Older people who are past 65 years of age but were recipients of NDIS when they were younger can continue to avail its benefits. For older people with psychosocial disability, NDIS can help by:

- Connecting them with a psychosocial recovery coach
- Providing mental health services

- **Disability Support for Older Australians (DSOA) Program**

This is a Commonwealth-established program for older people who were not able to avail of the NDIS. The DSOA program can directly provide support services to clients or coordinate with other disability service providers. Their services for older people with psychosocial disability are similar to the NDIS.

- **My Aged Care**

My Aged Care is another alternative for older people who did not qualify for the NDIS. This assesses older people with psychosocial disability to determine which government-funded aged care they would be eligible for.

The focus of these support services is not on curing the disability but rather on the recovery of the clients. They aim to help older people to do their everyday tasks and socialise with others despite having a psychosocial disability.

Other care strategies to address the mental health needs of older people include:

- Providing an environment that promotes well-being and allows people to have a healthy life with its living conditions
- Using interventions like medical treatment and therapy
- Training health providers in working and dealing with people with psychosocial disability and other mental health conditions like depression

Ways in Which Psychosocial Disability Interacts with Other Disabilities

Older people's psychosocial disability can negatively affect their other existing long-term conditions. These can be any of the following:

- **Various kinds of dementia, like Alzheimer's and Parkinson's disease**

The negative emotions brought by psychosocial disability can increase the occurrence of behavioural symptoms in dementia. This refers to the expression of agitation, irritability and aggression of older people with dementia.

- **Diagnosed mental conditions like anxiety, depression, or phobias**

Psychosocial disability in older people makes them more prone to experience negative feelings. This includes anger, sadness, helplessness and fear. If an older person has a diagnosed mental condition, the negative emotions brought by psychosocial disability can worsen it.



The table below shows a sample of a mental health condition common to older people that is associated with a psychosocial disability. The phases and description of the condition are provided. Corresponding additional and alternate support services to address the condition are also included for your reference.

Mental health condition common to older people that is associated with a psychosocial disability		Bipolar disorder	
Phases	Description	Additional support given	Alternate support given
Manic episode	<p>This is a period of at least one week during which a person has more energy than normal, is extremely elated or agitated most of the time, and exhibits at least three of the behavioural changes listed below:</p> <ul style="list-style-type: none"> ▪ Decreased need for sleep (e.g., feeling energetic despite significantly less sleep than usual) ▪ Increased or faster speech ▪ Uncontrollable racing thoughts or quickly changing ideas or topics when speaking ▪ Distractibility ▪ Increased activity (e.g., restlessness, working on several projects at once) ▪ Increased risky behaviour (e.g., reckless driving, spending sprees) 	Introduce relaxation strategies to the person	Educate the person's carer about the relaxation strategies that they can assist the person in doing when they have manic episodes

Phases	Description	Additional support given	Alternate support given
Depressive episode	<p>This is a period of at least two weeks during which a person has at least five of the following symptoms (including at least one of the first two symptoms):</p> <ul style="list-style-type: none"> ▪ Intense sadness or despair ▪ Loss of interest in activities the person once enjoyed ▪ Feelings of worthlessness or guilt ▪ Fatigue ▪ Increased or decreased sleep ▪ Increased or decreased appetite ▪ Restlessness (e.g., pacing) or slowed speech or movement ▪ Difficulty concentrating ▪ Frequent thoughts of death or suicide 	Encourage the person to join social activities in their local community	Provide a list of same-interest groups that the person can participate in so they can make connections with people who have similar or shared experiences

- **Health-related conditions like diseases and disability**

When it comes to interacting with other people with disabilities, an older person with psychosocial disability can use various methods for effective communication. For example, when communicating with a person with visual disability, the older person can provide a clear word picture when describing things to them. They can also inform the other person when they enter or leave the room.

They can also be more expressive in their facial reactions so the other person with disability (i.e. hearing disability) can understand them better. They can maintain eye contact while communicating. They can use normal lip movement and refrain from overexaggerating each word.



When you see a client's health worsening or not showing improvements despite interventions, immediately inform your supervisor for the appropriate action.

Multimedia



Watch the video to learn more about how people with psychosocial disability get through their everyday.

[What does psychosocial disability mean to you?](#)

In this chapter, you will learn how to:

- Identify tasks based on individualised plans
- Use person-centred communication techniques in doing work tasks
- Seek consent before providing care
- Recognise and report signs of abuse
- Record, maintain and store workplace information.

3.1 Identify Tasks Based on Individualised Plans

Older people in aged care have individualised plans. These plans dictate the services they receive. Specifically, they detail an old person's medical and care information and what services or lifestyle modifications they may need to address their individual needs.

A care team prepares an individualised plan together with the person. If the person cannot prepare the plan, an assigned advocate can represent them. The care team considers the following when creating a plan:

What are the person's needs and goals?

What services will meet those needs and goals?

Who will provide those services?

When and where will they provide those services?

How will those services be evaluated?

Individual plans are vital because they are tailored to each person. It ensures that older people do not just receive generic services that do not fit their needs. It also enables them to decide when and how to receive services.

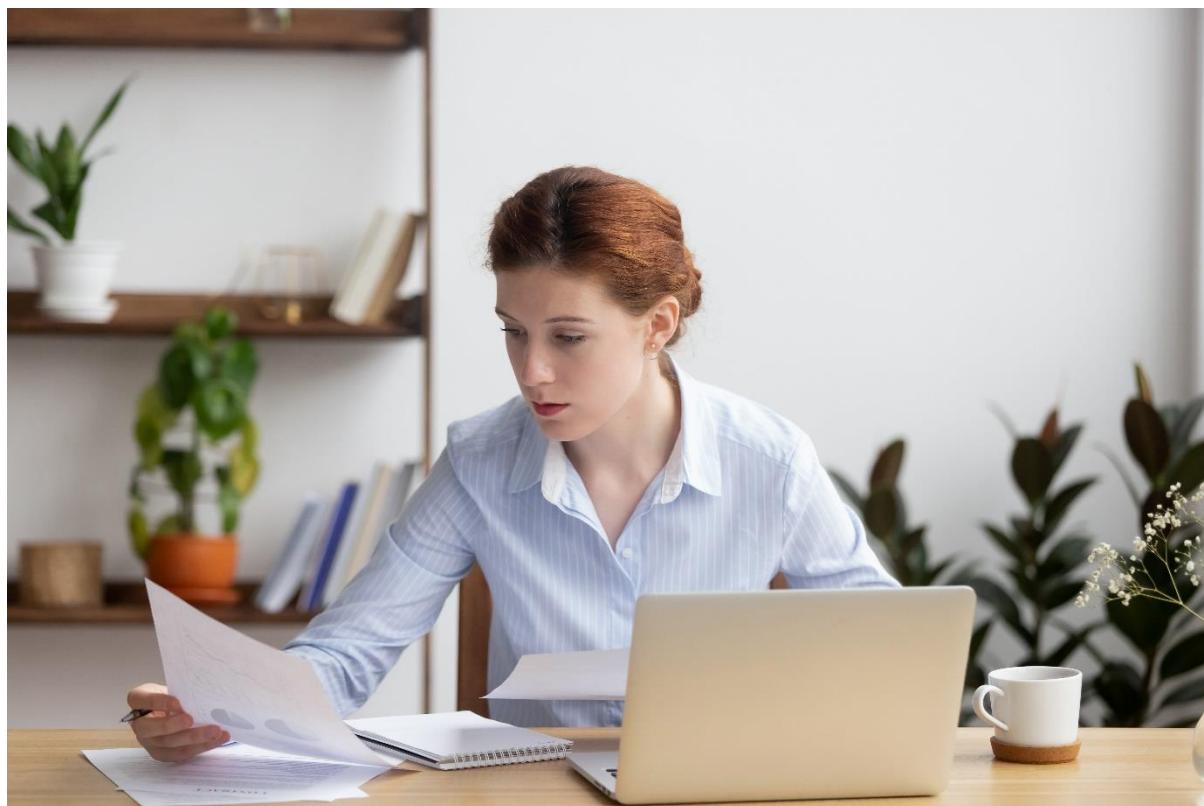
A person's individualised plan contains the following information:



A person's individualised plan serves the following purposes:

- Tells the team basic and medical information about the person
- Tells each aged care worker what to do for the person and when to do it
- Serves as a record of the person's goals and progress
- Serves as an agreement between the person and the care provider

3.1.1 Identifying Tasks From an Individualised Plan



How do you figure out your tasks based on an individualised plan? Once you have a person's plan, you can follow these general steps:

Understand what is in the plan.

Confirm understanding with your supervisor and with the person.

Identify the parts of the plan relevant to your job role.

Check the services you should provide.

Check when and where you will provide these services.

The case study below shows how to identify a task based on an individualised plan:

Marie's Individualised Plan

Marie is 74 years old and living in a residential care facility. A few years ago, she suffered a stroke that paralysed the right side of her body and weakened the left side. Her individualised plan includes getting support with the following:

- Assisting with meals
- Grooming
- Physical therapy
- Medication

Claire is a residential support worker assigned to Marie's care team. When looking through Marie's plan, she can see which tasks she will help Marie with. She is tasked to help with feeding and grooming. She knows she is not assigned to do physical therapy or give medication. Those are outside of her job scope.

Under 'feeding', Marie's goal is to eat independently with her left hand. She has expressed that she wants help cleaning up if she spills food. Under 'grooming', Marie has expressed that she can clean the right side of her body with her left arm. However, she needs help cleaning the left side of her body because she cannot move her right arm.

Upon reading these goals, Claire understands that her tasks are as follows:

- Stay with Marie during meals to help her clean up in case of spills
- Assist Marie in cleaning the left side of her body

She talks to her supervisor to confirm these tasks. She also has a conversation with Marie to confirm the level of support Marie wants to receive.

In this situation, the aged care worker used the details in the plan to identify what task they must perform. They considered which services they could and could not provide. They also read and understood their goals to figure out what they needed to do.

Checkpoint! Let's Review



1. An individualised plan states the needs and goals of a person in aged care. It also lists details about the services a person will receive.
2. You should understand the contents of an individualised plan to know what your tasks are.

3.2 Use Person-Centred Communication Techniques in Doing Work Tasks

In the introduction to this chapter, you read about what person-centred means. To summarise, it means focusing on the person when providing services. In this subchapter, you will read more about the different person-centred communication techniques. It would be best to learn these techniques to use them to assist older people.

This subchapter will discuss using person-centred communication to achieve specific goals. These goals include upholding autonomy, exercising choice, and promoting self-determination. The steps discussed here may not be possible for all older people. Some may be suffering from conditions such as dementia. In these cases, a trusted carer or advocate should be involved in making decisions for them.

Upholding Autonomy

You should help older people feel that they have autonomy over their lives. This means giving them power over decisions that affect them. In a person-centred approach, an older person must be at the centre of their care. Here are some ways you can apply person-centred approaches in upholding autonomy:

Adjust your attitude

- Believe that older people are capable of making decisions for themselves.

Use the correct language

- Avoid saying, 'You will...', and instead say, 'Would you like to...?'

Ask first before helping

- Avoid assuming that an older person wants your help.

Exercising Choice

Supporting a person to exercise choice is similar to upholding their autonomy. Exercising choice means encouraging them to make good choices that improve their lives. To do this, you must help them feel confident and comfortable making choices. Some older people do not feel comfortable making decisions. Sometimes, even just choosing what to eat can be difficult.

Older people need to exercise their right to choose. This allows them to be more active in running their lives. Below are a few ways you can support older people to exercise choice:

Provide many opportunities for making choices.

Help them make good choices.

Give them good options.

Respect their choices.

- **Provide many opportunities for making choices.**
 - Ask them to choose what they want to wear for going outside.
 - Engage them in conversation by asking which they prefer between two shows or movies.
- **Help them make good choices.**
 - Inform them of the pros and cons of their options.
 - Give them your opinion if they ask for it. Focus your opinion on which option will help them the most.
- **Give them good options.**

Whenever possible, make sure every option you give them will benefit them somehow.
- **Respect their choices.**
 - Go with the things they choose as much as possible.
 - Assure them that there will be no judgement no matter what they choose.

Right to Self-Determination

Self-determination is letting a person set their own goals. It means taking responsibility for one's own life. In aged care, this means letting an older person decide what to put in their individual plan. It also includes allowing them to determine their schedule and activities. It would help to recognise that they still have big and small goals that they want to achieve. Having them decide on their goals will encourage them to work harder. Setting goals for them without their input will make them feel disempowered.

To use person-centred communication techniques in promoting self-determination, you can do the following:

- Make sure to focus conversations on them and what they want to do.
- When making or reviewing an individualised plan, constantly ask for their input.
- When they express a desire to do something, help them brainstorm ways to do it.
- Point out their strengths and suggest activities that highlight those strengths.
- Encourage them to talk through their decisions and express difficulties they are having. Help them come up with ways to overcome those difficulties.
- Provide them with opportunities to talk to people who have the same goals.



Multimedia



This video talks more about person-centred approaches and why they are essential.

[Personalisation in care homes: Person-centred approaches](#)

3.2.1 Dignity of Risk



The *dignity of risk* accepts that older people can choose what they do and how they live. It acknowledges that these choices come with possible dangers. You must respect their dignity by helping them carry out their choices despite the risks. You and the care team should help minimise the risk involved with the person's choices.

Here are some examples of choices and the risks involved:

A person wants to continue living alone despite their mobility issues.

They may hurt themselves without anyone there to help them.

A person wants to continue using a cane instead of a wheelchair.

There is a greater risk of falling and injury when using a cane.

A person does not want to receive a flu vaccine.

They are at a higher risk of a serious flu infection.

In such instances, you should respect their choices and accept the risks of these choices. To perform your duty of care, you must ensure that the older person you are supporting is able to live their lives however they choose while maintaining their health and safety. It is also your duty to reduce the risks as much as possible. You can develop ways to honour their dignity of risk while protecting their well-being.

Here are some ways to reduce the risks in the examples given on the previous page:



- **They may hurt themselves without anyone there to help them.**
 - Ask them to always keep an emergency cell phone with them. They can use it to call for help in case of emergencies.
 - Schedule more frequent check-ins and home visits.
 - Ask one of their neighbours to check in on them at least once a day.
- **There is a greater risk of falling and injury when using a cane.**
 - Ask them if they agree to have physical therapy to strengthen their arms and legs. This would make it safer for them to use a cane because they will be more stable.
 - Make sure they have a sturdy, stable, and comfortable cane to use.
- **They are at a higher risk of a serious flu infection.**
 - Monitor their health more closely.
 - Minimise their potential exposure to the flu.

Checkpoint! Let's Review



1. Using person-centred approaches means giving older people power over their care.
2. You can empower older people by using communication techniques that focus on them.
3. It is essential to make older people feel that they still have control over their own lives.

3.3 Seek Consent Before Providing Care

Consent is permission given by one person to another person to do something. When someone consents to something, it means they agree to it. Always remember that you are working with people. It is essential to get consent before doing anything to them or with them. This applies to any action, especially ones that involve touching them. Even if the person does not talk, you must still find a way for them to confirm their consent. If you do something to a person without their consent, you violate their human rights.

In any situation, consent must be as follows:

Given freely

- The person consents willingly.

Continuous

- The person consents each time.

Clear

- You are sure that the person consents.

Informed

- The person knows what they are consenting to.

In aged care, here are some examples of situations where getting consent is essential:

- When bathing, dressing or feeding a person
- When performing a medical exam
- When giving medication
- When taking a person outside
- When taking pictures or videos of a person

Informed vs Uninformed Consent

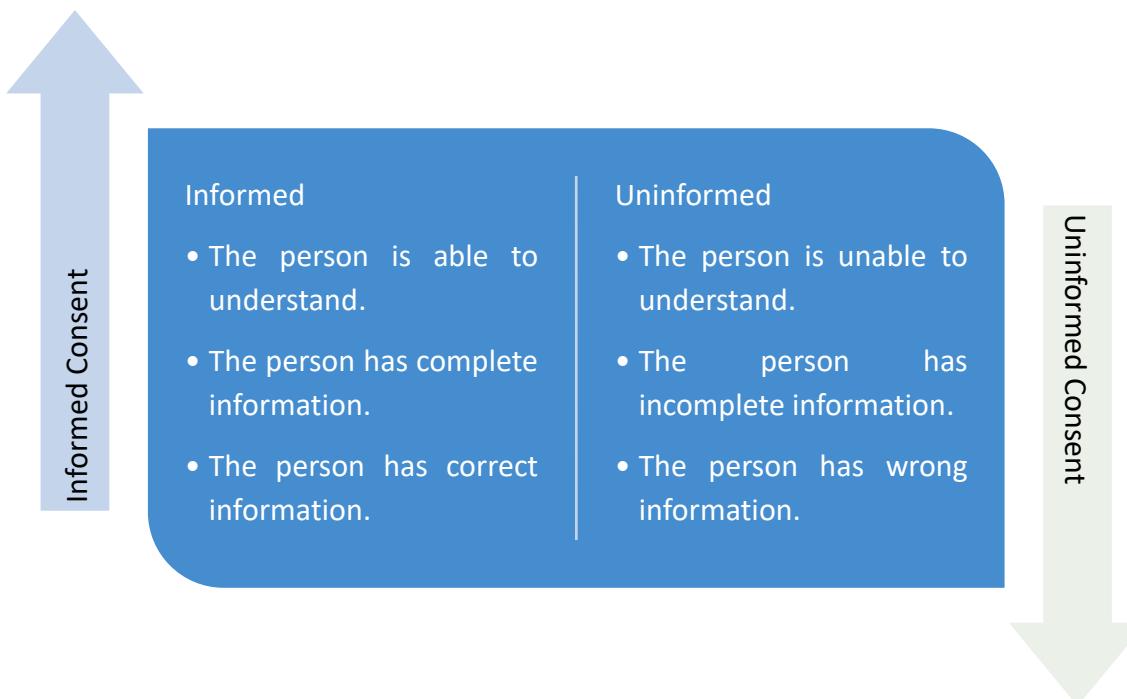
Informed consent is when a person has all the knowledge they need to make a good decision. This includes the possible outcomes and risks that come with the decision. The effects that the decision may have on the person's financial assets must be said to them as well. Informed consent can also include possible alternative options that the person can choose from. It enables older people to have a complete understanding of any proposed care before giving them their approval.

For example, when caring for an older person, you must tell them exactly what you will do. It would be best to let them know what will happen and for how long. When prescribing medication to a person, doctors must explain what it is for. They must also explain the possible side effects of the medication.

Uninformed consent is when a person agrees to something without understanding it. This could be a result of incomplete information. They may not have received the correct information, or they did not get any information at all. This can often happen in aged care. Seeking uninformed consent prevents older people from understanding the risks that arise from any proposed care given to them.

For example, an older person is mentally compromised. This means they are unable to understand what is happening entirely. Consent given without enough information is not implied consent.

Below is a summary of the difference between informed and uninformed consent:



Keep in mind that informed consent is necessary in all cases, except when:

- A court order requires you to provide information without the consent of the person.
- Disclosing the information is necessary to assist law enforcement agencies and other relevant government agencies.
- There is reason to believe that the person is in grave danger or risk of harm, and the information is necessary to file a report.

3.3.1 Restrictive Practices

Restrictive practices are interventions that limit the movement of a person. Ideally, this is done as a last option and only to ensure the safety of everyone involved. The Aged Care Quality Principles 2014 lists the five types of restrictive practices:

Type of Restrictive Practice	Parameter for Use
Physical restraint	<ul style="list-style-type: none"> ▪ This involves using physical force to limit a person's movement (e.g. physically holding a consumer in a specific position). ▪ The older person must be treated with dignity and respect at all times. ▪ Monitor the person carefully during the period of restraint and conduct a physical health review after the use of physical restraint.
Chemical restraint	<ul style="list-style-type: none"> ▪ This involves using medication or substances to calm a person down (e.g. using a sedative) ▪ Carefully monitor for side effects. ▪ If unclear about the purpose of a person's medication, seek clarification directly from the prescriber. Ask questions as to why the medication has been prescribed, and when and how the medication must be administered to ensure the safety and best outcomes for the person.

Type of Restrictive Practice	Parameter for Use
Environmental restraint	<ul style="list-style-type: none"> ▪ This involves limiting a person's access to parts of their environment (e.g. not allowing a person to go outside). ▪ Seek consent of the person, guardian, or the Restrictive Practices Authorisation (RPA) panel before implementation of this restraint. ▪ Particular care must be taken if any restriction is applied or proposed to be applied to basic human rights. This includes access to food, water, and toileting and bathing facilities.
Mechanical restraint	<ul style="list-style-type: none"> ▪ This involves using a device to limit a person's movement (e.g. using bedrails or using a lap belt) ▪ The use of mechanical restraint devices requires the approval of a health professional. ▪ Explain to the patient the reason for mechanical restraint. This includes what will happen during the process, and the circumstances in which the restraint may be removed.
Seclusion	<ul style="list-style-type: none"> ▪ This involves confining a person by themselves without a way to escape (e.g. locking someone in their bedroom). ▪ This restraint should only be used after all other forms of behaviour management or appropriate alternative restrictive practices have been exhausted. ▪ This restraint should never be used as a punishment.

Acceptable Use of Restrictive Practices

The Quality of Care Principles 2014 also talks about the acceptable use of restrictive practices. It states when workers can use restrictive practices and how they can do it. It also says who can perform these restrictive practices.

Restrictive practices can only be used:

- When you have tried all other means to prevent harm
- When you have considered all the risks and effects of the practice
- When the person or their advocate has given consent, unless in situations of absolute emergency
- When it is in the best interest of the person
- When there is an expert present who can ensure the person's safety

Responsibilities When Using Restrictive Practices

Anytime there are restrictive practices, aged care workers have specific responsibilities. These responsibilities aim to ensure that the person they are supporting will stop causing harm either to themselves or others. These responsibilities include the following:

Timeline	What To Do
Before the use of restrictive practices	<ul style="list-style-type: none"> ▪ Get informed consent from the person or a representative. ▪ Have an expert assess that the practice is safe and needed. ▪ Ensure that the use of restrictive practices is agreed upon in the care plan, if possible.
During the use of restrictive practices	<ul style="list-style-type: none"> ▪ Monitor the person for signs of physical or mental harm. ▪ Have someone who can remove or end the restraint in case of emergencies.
After the use of restrictive practices	<ul style="list-style-type: none"> ▪ Check the person for any signs of injury or distress. ▪ Record the use of the restrictive practice in the person's file. Include the reason why the workers used the practice. ▪ Review whether the use of restrictive practice was effective. ▪ Review whether it is acceptable to use restrictive practices on the person again.

There may be emergency cases where you cannot get a person's consent beforehand. It is vital to inform the person or their representative why the practice was done in these cases. You may also need to ask for their advanced consent to any future use of restrictive practices.

Based on content from the Federal Register of Legislation at October 15, 2021. For the latest information on Australian Government law please go to <https://www.legislation.gov.au>. Quality of Care Principles 2014, used under CC BY 4.0

Further Reading



You can read more about the use of restrictive practices in aged care below. It also explains the laws regarding the use of restrictive practices.

[Restrictive practices in aged care – a last resort](#)

3.3.2 Consent in Medical Practices



There are laws in Australia that ensure the rights of people to consent when it comes to medicine. These laws apply to all people, including older people. There are a lot of medical practices involved in aged care. Therefore, it is crucial to know the consent laws related to giving medical care.

National Safety and Quality Primary and Community Healthcare Standards

These standards list the healthcare rights of Australian citizens. Specifically, the Partnering with Consumers standard states that people receiving healthcare have the right to decide on their care. It recognises the importance of involving the patient in deciding for their own care.

Healthcare services must inform the consumer about their services. They must ask for the consumer's consent in anything care-related. They must also get consent from a consumer to share their medical information. They can only share this information with other people in the patient's care team.

Powers of Attorney

A *power of attorney* is the power that allows someone to make decisions for another person. An older person can choose someone they trust to consent on their behalf when they can no longer do it. This power is usually given to a family member, close friend or advocate. When someone has this power, they can consent to medical procedures for someone else. An example is when a person has severe dementia. Another example is when a person is in a medical coma.

Here are the powers of attorney laws for each state and territory:

State or Territory	Links
Australian Capital Territory	Powers of Attorney Act 2006
Queensland	Powers of Attorney Act 1998
Victoria	Powers of Attorney Act 2014
New South Wales	Powers of Attorney Act 2003 No 53
Northern Territory	Powers of Attorney Act 1980
Tasmania	Powers of Attorney Act 2000
Western Australia	Guardianship and Administration Act 1990
South Australia	Powers of Attorney and Agency Act 1984

3.3.3 Asking for Consent

Now that you know what consent is and why it is crucial, you need to learn how to ask for consent. You should always secure a person's informed consent before performing care activities. Here are some things to consider when asking for consent:

- **Inform**
 - Tell the person what you plan to do.
 - Give the person the details about the act, including where you will touch them if needed.
 - Tell the person why you will do these things.

■ **Ask**

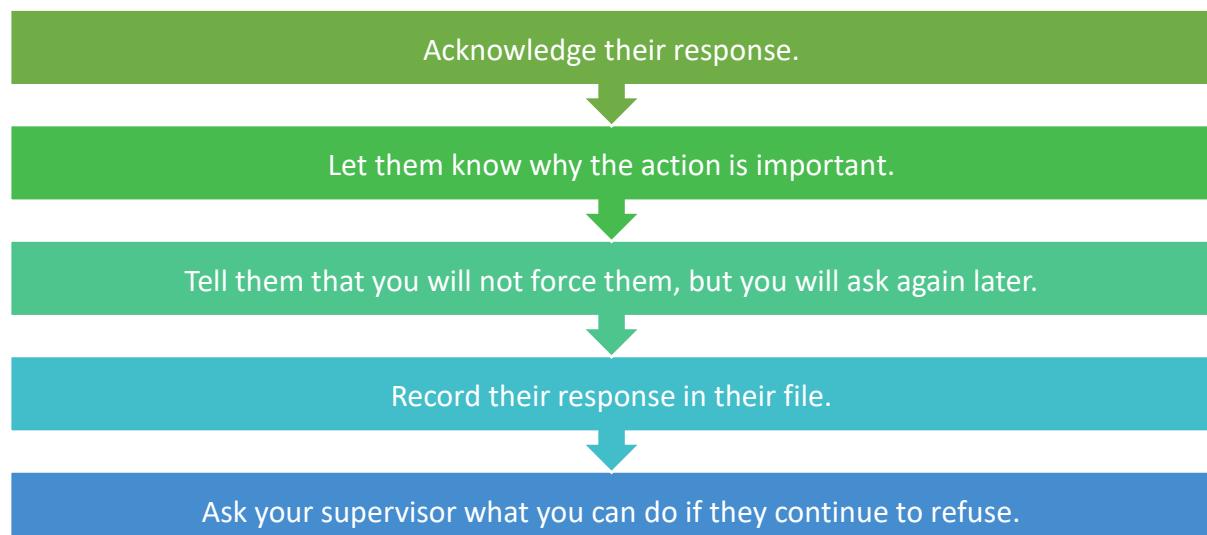
- Ask the person if they agree to receive this specific care from you.
They can answer verbally, in writing or through gestures.
- If the person cannot respond, check if they have provided advanced consent.
This information should be in their care plan.

■ **Reassure**

- Inform the person that they can stop you at any time.
- Ask them again at every step if they are okay with you continuing.

If Consent Is Not Given

If the person does not give you their consent, you cannot force them to agree. You cannot perform care activities for someone without them agreeing to it first. Therefore, if they say 'no', you cannot do the task. You can refer to your organisation's policies and procedures for what you can do instead. Here is an example of what you can do if a person does not give their consent:



Lotus Compassionate Care

Access and review the Lotus Compassionate Care Handbook for the policies and procedures on consent through the link below:

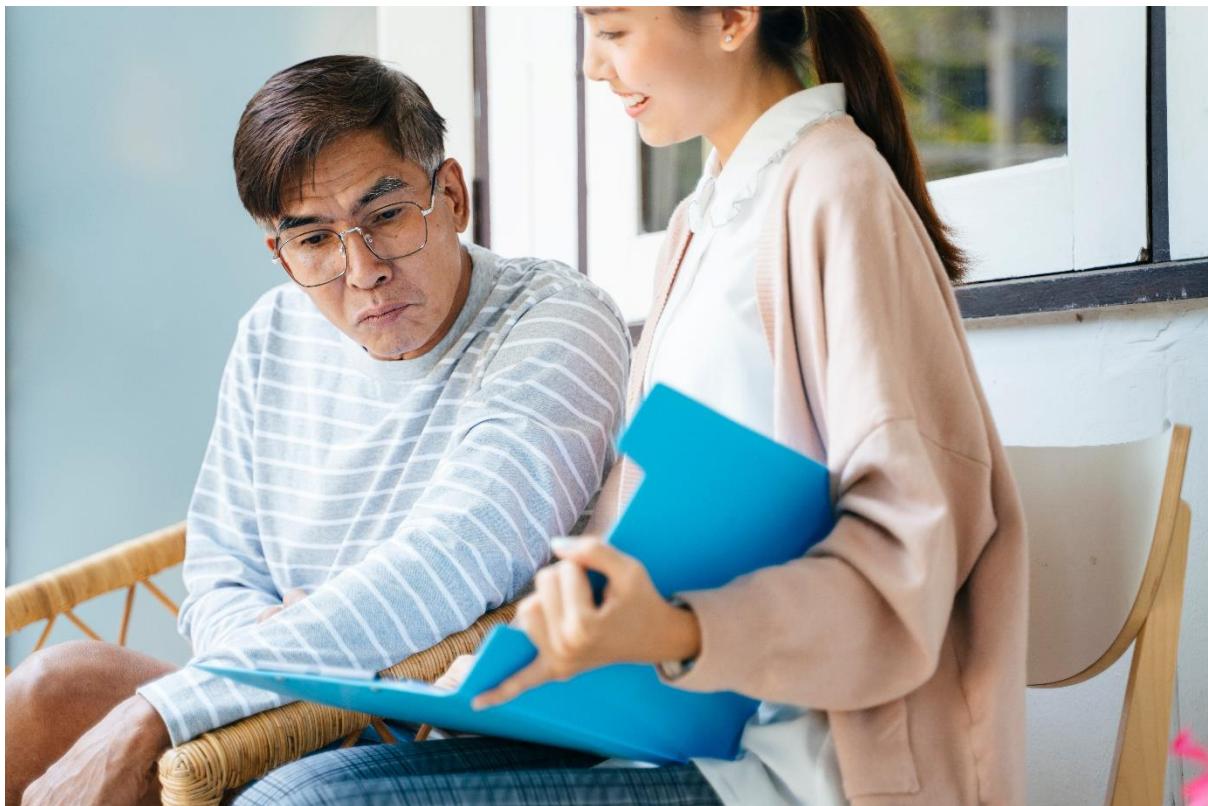
[Lotus Compassionate Care Handbook](#)

(username: newusername password: new password)

Checkpoint! Let's Review



1. Consent confirms that a person agrees to have something done to them. It must be given willingly and clearly.
2. Give a person complete and correct information before asking for their consent. Uninformed consent is not implied consent.
3. A person can take away their consent at any time. Giving consent once does not mean that it is always given.
4. Some laws protect a person from giving or not giving their consent. These relate to medical services and the use of restrictive practices.



3.4 Recognise and Report Signs of Abuse

Anytime someone is under the care of another person, they are at risk for abuse. *Abuse* is treating someone with violence or cruelty or taking advantage of them. Someone in a position of power usually does it. For example, an aged care worker can abuse an older person. Family members also can abuse their older relatives.

Recognising signs of abuse is vital so that you can act immediately. You should learn how to spot abuse in older people. You should also know your organisation's policies and procedures for reporting abuse. This is important in protecting the physical and mental safety of the people in your care. Missing signs of abuse will lead to further harm for older people.

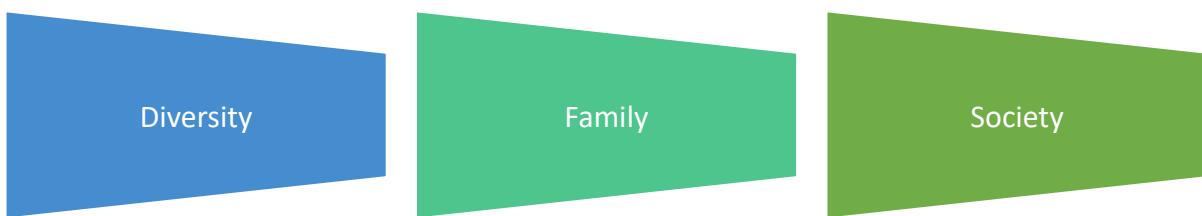
Types of Abuse

There are different forms of abuse that older people can face. The most common types of abuse include the following:

Type of Abuse	Examples
Physical	<ul style="list-style-type: none"> ▪ Hitting, scratching, or forcefully pulling them ▪ Restraining and keeping them captive ▪ Neglecting them, including ignoring their medical needs
Emotional and psychological abuse	<ul style="list-style-type: none"> ▪ Humiliating them, including laughing at their bodily functions ▪ Verbal abuse, such as screaming at them or calling them names ▪ Intimidating them or pressuring them to make certain decisions
Financial	<ul style="list-style-type: none"> ▪ Stealing from them ▪ Forging cheques, credit cards or accounts
Sexual	<ul style="list-style-type: none"> ▪ Forcing them to engage in sexual acts ▪ Touching them inappropriately

Risk Areas for Abuse

Several risk factors lead to increased abuse of older people. These factors make older people more likely to be victims of abuse. These risk factors can be classified into three groups:



- **Diversity**

- Older people from diverse groups (see Section 2.1.2) are more likely to be abused. This comes from negative perceptions about their cultures.
- Older people from the LGBTI community may experience homophobic or transphobic abuse.
- Older Aboriginal and Torres Strait Islander peoples may experience abuse in the form of disrespect for their culture.

- **Family**

- Mistreatment can come from abusive family members.
- Family members can pressure them to give up their money or possessions.
- Family members can leave them in care homes and never visit or call again.

- **Society**

- Negative views on ageing can lead to abuse and neglect from society.
- Older people may experience discrimination.
- Older people may be taken advantage of by society.

Aside from the groups above, older people are also at risk of abuse due to their lack of knowledge on aged care rights. This can lead to situations where they allow others to mistreat them. As such, you must help them by explaining their rights in aged care. You can give examples and applicable situations that can help them better understand their rights.

In addition, if the care team is unfamiliar with the indicators of abuse and reporting process, they may not be able to intervene quickly enough to protect the older person or prevent the abuse from occurring. This is why the staff must attend trainings relevant to recognising and reporting signs of abuse of older people.

Systemic Issues

A *systemic issue* is a problem that results from a system in place. This means it is not a result of an individual factor. These are issues caused by multiple factors that are not as easy to address. In most cases, systemic issues are consequences of government programmes and society.

In aged care, systemic issues can result from the following:



Poor funding of care services



Inadequate protection for older people



Poor regulation of aged care workers

- **Poor funding of care services**

Public care services tend to be poorly funded. This results in a lack of facilities or a lack of staff. Not having enough facilities or staff can lead to the neglect of some older people in care.

Some older people may not have their physical or medical needs met. Some may receive inadequate care because there are not enough people to care for them.

- **Inadequate protection for older people**

Some laws protect the well-being of older people in aged care. However, sometimes these laws are not enforced as well as they should be. Some may file complaints about abuse, but it may take a long time before someone acts.

- **Poor regulation of aged care workers**

As of 2021, there are no regulating bodies for aged care workers. There is a regulatory body for medical workers but not non-medical aged care workers. There is currently a push to regulate aged care workers and require registration.

Because of the lack of regulation, some aged care workers may not be appropriately trained to work in aged care. Some providers might not run background checks on the workers they hire. This can lead to the mistreatment of older people by their care team.

Multimedia



This video further discusses the types and risk factors for the abuse of older people.

[Elder Abuse: Risk Factors and Warning signs](#)

3.4.1 Role of Safeguarding Bodies

Safeguarding means taking action to protect the rights of older people. It means helping them feel safe through policies and practices that protect them. To protect older people from abuse, the government created several safeguarding bodies. These bodies follow legal and human rights standards to ensure the safety of older people.



Australian Human Rights Commission

This commission is responsible for investigating and conciliating discrimination and human rights complaints. It ensures that aged care rights are respected and protected.

You can review about the human rights relevant to aged care in Section 2.2.3 of this learning guide.

Royal Commission Into Aged Care Quality and Safety

The Commission was created to evaluate the safety and quality of the aged care system. They investigated the current system to find issues and give recommendations. They released a report of their findings on March 2021. On the topic of abuse, the Commission found the following:

- There were thousands of cases of reported abuse from 2019 to 2020. There were instances of physical or sexual abuse by aged care workers. There were also instances of aged care workers failing to protect older people from abuse from others.

- There may be thousands more cases of unreported abuse.
- There were cases where restrictive practices were misused. These cases resulted in serious harm or death.

As a result of these findings, the Commission recommended that a new act should be created. This act will list the rights of people in the aged care system. These can be found in Recommendation 2 of the report. Rights related to protection from abuse include:

Freedom from mistreatment

Freedom of movement

Right to autonomy

Right to non-discriminatory treatment

Right to file complaints

The Australian Government has released a response to these recommendations. They have accepted the recommendation to create a new act called the New Aged Care Act. Their target is to have it approved by 1 July 2023.

Based on Australian Government response to the final report of the Royal Commission into Aged Care Quality and Safety, used under CC BY 4.0. © Commonwealth of Australia as represented by the Department of Health 2021



Further Reading

You can read the summary of the Royal Commission's report, as well as their list of recommendations, below:

[Final Report - Executive summary](#)

National Plan

The Government has also created the *National Plan to Respond to the Abuse of Older Australians*. This is a plan that will be implemented from 2019 to 2023. It lays out the strategies that the Government will use to reduce and prevent the abuse of older people. Priority area 3 of the plan focuses on services that protect the safety of older people. This part states that the Government will invest money in support services. These are specifically for older people who have experienced abuse. These services include the following:

Specialist elder abuse units

- Combining different members of a care team to respond to a person's needs

Health-justice partnerships

- Training aged care workers to identify abuse and refer people for support

Case management and mediation services

- Finding solutions to individual causes of abuse

Further Reading



You can read the complete response plan below:

[National Plan to Respond to the Abuse of Older Australians \(Elder Abuse\) 2019-2023](#)

3.4.2 Mandatory Reporting

Mandatory reporting is the responsibility of reporting suspected instances of abuse. Professionals like teachers, medical workers and care workers all have this responsibility. When it comes to aged care, mandatory reporting enables older people to be protected from indicators and allegations of exploitation, abuse, harassment and neglect.

As an aged care worker, you should know the mandatory reporting laws that apply to aged care. Familiarise yourself with the reporting policies and procedures of your workplace. This will help you protect the rights of the older people in your care.

The Aged Care Act 1997 defines a *reportable incident* as the occurrence, or suspected occurrence, of abuse, including:

Unreasonable use of force

Unlawful sexual contact or inappropriate sexual conduct

Psychological or emotional abuse

Stealing done by an aged care worker

Unexpected death of the residential care recipient

Neglect

Unreasonable use of restrictive practices

Unexplained absence of the residential care recipient from the residential care services of the provider

Aged care workers must report these cases to the proper authorities. Aged care providers must respond to these reports quickly and efficiently. There must be a record of each report, including what was done to address it.

There are reportable incidents that can put the life of the older person in danger. These are incidents classified under Priority 1. If you have witnessed the following conditions, you must ensure to report the incident to the Commission within 24 hours:

- Have caused or could reasonably have been expected to cause an older person physical or psychological injury or discomfort that requires medical or psychological treatment to resolve
- If there are reasonable grounds to contact the police
- When there is the unexpected death of an older person or their unexplained absence from the service

Other reportable incidents that do not meet the conditions above are classified under Priority 2. These incidents must be reported to the Commission within 30 days upon discovering.

Duty of Care

Mandatory reporting is related to your duty of care as an aged care worker. You must ensure that any reasonable belief of abuse to the older person you are supporting is reported to the proper authorities.

If you have spotted any indicator of abuse or neglect in the older person, reach out immediately for help from authorities. Remember that mandatory reporting plays a vital role in preventing and stopping the harm that abuse, harassment and neglect can bring to older people.

Recognising Signs of Abuse

To fulfil your reporting duty, you must learn to recognise signs of abuse. Some signs are not as visible as others. Sure signs can be similar for different types of abuse. Here are some signs you should watch out for:

- Bruises, cuts, broken bones, or other injuries with no apparent causes
- Acting scared or flinching easily, especially around certain people
- Signs of stress, such as hair loss or sleeplessness
- Quick and significant weight loss
- Avoiding or looking afraid of certain family members or staff
- Signs of pain or limited movement
- Decreasing levels of confidence or self-esteem
- Soiled clothes or bedsheets



Observe how a person acts around their peers, family or friends. Notice if they act differently towards specific people. For example, they may act cheerful and then turn shy and quiet when a particular family member arrives. You should also take note of any changes in behaviour, such as eating or sleeping patterns. Some signs you notice might simply be symptoms associated with ageing. However, it is vital to take note of them anyway.

Reporting Signs of Abuse

You should be familiar with your organisation's policies and procedures regarding mandatory reporting. Observe them more closely if you notice possible signs of abuse to an older person. Try to figure out an explanation for these signs. Of course, you must still report these observations, even if it turns out that abuse is not the cause. The following are other instances when you should report an incident:

-  You personally witness abuse happening.
-  A staff member or visitor tells you that they have witnessed abuse happening.
-  An older person tells you that someone is abusing them.

You must follow the reporting policies and procedures whenever there is an incident. This ensures that your report is appropriately documented. It also ensures that the proper authorities receive the report. Each state and territory has a website for reporting abuse towards older people:

State or Territory	Links
Australian Capital Territory	Abuse of Older Persons
Queensland	Elder Abuse Prevention Unit
Victoria	Seniors Rights Victoria
New South Wales	Ageing and Disability Abuse Helpline
Northern Territory	Elder abuse
Tasmania	Advocacy Tasmania
Western Australia	Advocate
South Australia	Aged Rights Advocacy Service

Individual organisations will also have their own policy for reporting cases of abuse. These policies will include procedures for reporting, including:



Below is an example of steps you might follow after spotting a symptom of abuse. Your organisation may have different steps, but the idea would be generally similar.



Checkpoint! Let's Review



1. Older people in aged care can be vulnerable to abuse. It is important to recognise signs of abuse and report them.
2. The government has safeguards in place to protect older people from abuse. Each state and territory also have their own safeguards for older people.
3. Signs of abuse include physical injuries and changes in behaviour. Some signs are more subtle than others.
4. Incidences of abuse fall under mandatory reporting laws. You should learn your organisation's reporting policies and procedures.



3.5 Record, Maintain and Store Workplace Information

Workplace information includes client records and employee records. It is essential to keep good records of workplace information. This allows you to access the necessary information and share them when needed. Well-maintained records also ensure that you can provide evidence of care if needed. You should know how to record and maintain work information. You should also know how to store them in a way that will keep them secure and private.

Records Principles 2014

The Records Principles 2014 states the records that care providers must keep. It was created under the Aged Care Act 1997. Required records include the following:

Records	Included Details
Records about care recipients	<ul style="list-style-type: none"> ▪ Assessments results ▪ Individualised plan ▪ Medical records, including vaccination records ▪ Records of fees and insurance information ▪ Contact details of representatives ▪ Records of any progress reports or reports of abuse
Records about Charter of Aged Care Rights	Records of the copy of the charter given to older person depending on the kind of care they receive
Records about staff	<ul style="list-style-type: none"> ▪ Recent police certificate ▪ Recent and active NDIS worker screening clearance ▪ Updated vaccination records

Based on content from the Federal Register of Legislation at October 18, 2021. For the latest information on Australian Government law please go to <https://www.legislation.gov.au>. Records Principles 2014, used under CC BY 4.0



Recording Workplace Information

To record workplace information, you should know your organisation's record-keeping policy. You should make sure to complete any document relevant to your work. These documents may include the following:

- Employee information (i.e. information about you that you submit to the organisation)
- Records of older people in your care, including the records about care recipients mentioned previously
- Any reports of abuse or suspected abuse to older people in your care

You can record the information digitally, in writing, or both. As mentioned in Subchapter 2.4, you should know how to use your workplace's record-keeping system. Make sure to follow the format for keeping records. This will make it easier for other care team members to understand them.

Maintaining Workplace Information

You must help keep workplace records updated. This means recording changes to yourself or the older people in your care and adding them to the record. These updates must be added as soon as possible to keep records accurate. To maintain the information, you can do the following depending on your job role:

Updating your information

Updating information of older people

Checking if the information is updated

- **Updating your information**
 - Add new vaccination records or submit them to relevant personnel.
 - Keep your contact details updated and police checks as required by the organisation.
- **Updating information about older people**
 - Add new vaccination records for them.
 - Add any records of reports of abuse or suspected abuse.
 - Add any changes in their medication or schedules as soon as they apply.
 - Replace the contact information of family members or representatives once they change.
- **Checking if the information is updated**
 - Occasionally check the records of the person to ensure that they are updated.
 - Confirm with other care team members if they have recorded any updates.

Storing Workplace Information

Proper storage of workplace information ensures that the records are safe and secure. This means they are safe from unauthorised personnel damage, loss, or access. To safely store data, you can do the following:

- For physical files, store them where you can protect them from physical damage.
- Store them in the correct folders based on your organisation's system for digital files.
- Make sure you will remember where you put your files.
- Make sure you keep your files where they will remain confidential. Have them password-protected when necessary. This depends on your organisation's policy.

3.5.1 Completing Workplace Reports and Checklists

Part of your responsibilities is creating reports about the people in your care. These reports usually follow a format depending on your organisation. You will also complete checklists related to the services you provide. Examples of these reports and checklists include the following:

Workplace Reports	Workplace Checklists
<ul style="list-style-type: none"> • Reports of behaviour or care changes • Progress reports (health or behavioural) • Incident reports (accidents, falls, complaints, etc.) • Mandatory reports (suspicions or verified incidents of abuse) 	<ul style="list-style-type: none"> • Home or residential care safety checklist • Home visit checklist • Daily care checklist • Daily medication checklist • Behaviour checklist

Writing a Workplace Report

When completing any workplace report, make sure you include all essential details. As much as possible, include the following:

- Who was involved?
- What happened?
- Where did it happen?
- When did it happen?
- Why did it happen?
- How did it happen?

You should also include your name and your position. Along with that, indicate when you are submitting the report. Here are other tips for when you need to complete a report:

- **Keep it to salient details only.** Avoid including irrelevant information.
- **Keep the language formal.** Avoid using slang or figurative language.
- **Keep the report objective.** Focus on facts and not opinions.

Read this example of an incident report below:

Incident Report

Max and Greta got into a fight and went off on each other in the shared eating area. Max was eating some fruit snacks while Greta had oatmeal. They had snacks together at 3:00 PM. Max was being annoying, and Greta lost her patience. She started yelling at him and causing a scene. Greta's care worker tried to calm her down while I tried to separate Max from the situation. Greta threw her spoon at Max, which was unnecessary. Max retaliated by threatening to hit Greta in the face. We split the two and had them finish their meal at different tables.

This is an example of a bad incident report because:

- It contains irrelevant information about what the two people involved were eating
- It has opinions, such as 'Max was being annoying'
- It contains informal language, such as '...went off on each other'
- It does not provide a complete picture of the incident

Here is an example of how that report can be improved:

Incident Report

This afternoon at 3:00 PM, Max had an incident in the shared eating area. He was eating at a table with another resident named Greta. Max was teasing Greta throughout the meal. Greta expressed annoyance and asked him to stop. I also told Max to stop teasing as it was upsetting Greta.

Max continued to tease Greta until she began yelling at him and calling him rude. Greta's care worker interfered and spoke to Greta to calm her down. I told Max to get up and move to another table. Before separating them, Greta threw her spoon and hit Max in the face. Max then threatened to hit Greta back. We split the two and had them finish their meals on different tables.

I asked Max if he was hurt and checked him for injuries. The incident did not leave a mark on his face. He also expressed that he was not injured. When asked why he provoked Greta, Max responded that he was just having fun.

This is an example of a better incident report because:

- It answers who, what, where, when, why and how
- It uses more formal language
- It focuses on objective information
- It provides a clearer picture of the incident

Completing Workplace Checklists

Checklists are mainly based on observations. In a checklist, you will find conditions that must be met or tasks that must be done. When completing a checklist, you must state your name, position, and current date. You must also indicate the name of the person to whom the checklist applies.

Here are examples of the tasks you may find in a daily care checklist:

- **Morning activities**

- Temperature and blood pressure check
- Breakfast and lunch
- Hygiene activities (washing face, brushing teeth, showering, dressing, and recording bladder and bowel charts)
- Morning medication

- **Evening activities**

- Temperature and blood pressure check
- Snacks and dinner
- Hygiene activities (bathing and brushing teeth)
- Evening medication

- **Daily exercise**

These checklists ensure that all tasks or conditions for the person have been met. You can complete these checklists during or at the end of the day. Once completed, make sure to keep a record of each of them in your organisation's files. Some checklists may require your signature or the signature of a supervisor. These will ensure that the checklists have been verified. This record will help you if you need to prove that you have provided a particular service on a specific day.



3.5.2 Privacy and Confidentiality

Privacy is the right of people to keep their information to themselves. This means they have control over what information they share. Privacy of information enables older people to have control over how their personal information is collected, used and disclosed. As an aged care worker, you must respect an older person's preference regarding the handling of their personal information.

On the other hand, *confidentiality* is the responsibility of keeping a person's information private. This means that any information shared will be safe from unauthorised access. This includes any record about older people and their families in aged care. Confidentiality of information enables older people to have their sensitive information kept confidential until they permit to disclose it. The care provider must ensure to keep these records private. Outsiders must not gain access to these records without the person's consent. Upholding confidentiality builds the trust of older people to share personal details with their care workers.

Personal and Sensitive Information

Personal and sensitive information are collected and handled while observing relevant privacy and confidentiality laws. These details help the care provider to know the older person more. They also help in deciding for the best options in providing support services.

Personal information includes the following:

- An older person's name, signature, address, phone number or date of birth
- Photographs
- Employment details
- Voiceprint and facial recognition biometrics

Sensitive information includes the following:

- Racial or ethnic origin
- Political opinions or associations
- Religious or philosophical beliefs
- Trade union membership or associations
- Sexual orientation or practices
- Criminal record
- Health or genetic information
- Some aspects of biometric information



Privacy Act 1988

The *Privacy Act 1988* is legislation that protects people's private information. It applies to Australians of all ages. This act aims to achieve the following objectives:

- To promote the protection of the privacy of individuals
- To recognise that the protection of the privacy of individuals is balanced with the interests of entities in carrying out their functions or activities
- To provide the basis for nationally consistent regulation of privacy and the handling of personal information
- To promote responsible and transparent handling of personal information by entities
- To facilitate an efficient credit reporting system while ensuring that the privacy of individuals is respected
- To facilitate the free flow of information across national borders while ensuring that the privacy of individuals is respected
- To provide a means for individuals to complain about an alleged interference with their privacy
- To implement Australia's international obligation in relation to privacy

Sourced from the Federal Register of Legislation at 20 December 2022. For the latest information on Australian Government law please go to <https://www.legislation.gov.au/Home>

The Privacy Act 1988 also contains the 13 Australian Privacy Principles (APP). These are the principles that care providers must follow to ensure confidentiality, as seen in the table below:

APP	Name
1	Open and transparent management of personal information
2	Anonymity and pseudonymity
3	Collection of solicited personal information
4	Dealing with unsolicited personal information
5	Notification of the collection of personal information
6	Use or disclosure of personal information
7	Direct marketing

APP	Name
8	Cross-border disclosure of personal information
9	Adoption, use or disclosure of government related identifiers
10	Quality of personal information
11	Security of personal information
12	Access to personal information
13	Correction of personal information

Each principle contains a detailed purpose and guidelines on how it can be applied in the workplace. For example, under Australian Privacy Principle 11, if an APP entity holds personal information, the entity must take such steps as are reasonable in the circumstances. This is to protect the information from misuse, interference and loss from unauthorised access, modification or disclosure.

You can read the full content of the Australian Privacy Principles in the further reading link below.



Further Reading

You can read the 13 Australian Privacy Principles here:

[Read the Australian Privacy Principles](#)

The Privacy Act includes exceptions where disclosure of private information is acceptable. People receiving aged care are covered under exceptions for ‘health services’. According to Division 2, part 16B of the Act, exceptions include situations where:

- Information is necessary to provide medical care
- Information may affect public health and safety
- Information is necessary to keep the person safe
- A representative has given consent, if the person is unable

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States and territories also have their own versions of this Act:

State or Territory	Links
Australian Capital Territory	Information Privacy Act 2014
Queensland	Information Privacy Act 2009
Victoria	Privacy and Data Protection Act 2014
New South Wales	Privacy and Personal Information Protection Act 1998 No 133
Northern Territory	Information Act 2002
Tasmania	Personal Information Protection Act 2004
Western Australia	Freedom of Information Act 1992
South Australia	South Australia does not currently have specific legislation regarding the protection of privacy, although there is a Cabinet Administrative Instruction, the Information Privacy Principles Instruction (Premier and Cabinet Circular PC 012 – Information Privacy Principles (IPPS) Instruction).

You and your organisation must follow the Australian Privacy Principles. You must respect older people's right to privacy. To do this, your organisation must have measures in place that protect people's records. Aged care workers must go through a process of authorisation to access records. These records should not just be available for anyone to find online.

Your responsibilities to maintain privacy and confidentiality include the following:

Strictly following the organisation's records policy

Not keeping a personal copy of older people's records

Not sharing information about older people with anyone outside the organisation

Not uploading older people's records anywhere else online



Lotus Compassionate Care

Access and review the Lotus Compassionate Care Handbook for the policies and procedures on privacy and confidentiality through the link below:

[Lotus Compassionate Care Handbook](#)

(username: newusername password: new password)



Checkpoint! Let's Review

1. It is crucial to keep accurate and updated records for the people in your care. You must also take steps to store these records securely.
2. In your job, you will need to complete reports and checklists. Make sure to keep these reports and checklists accurate and objective.
3. Older people have a right to keep their information private and confidential. Privacy Act 1988 protects this right.



Learning Activity for Chapter 3

Well done completing this chapter. You may now proceed to your **Learning Activity Booklet** (provided along with this Learner Guide) and complete the learning activities associated with this chapter.

Please coordinate with your trainer/training organisation for additional instructions and guidance in completing these practical activities.

IV. Implement Self-Care Strategies



As an aged care worker, you will encounter a lot of stressors at work. These stressors may include the following:

- Being on the receiving end of aggression
- The death or deterioration of an older person in your care
- Complaints from an older person's family or carers
- Disagreements with other members of the care team
- General job-related fatigue

Aside from taking care of older people, you must also take care of yourself. This includes staying on top of your physical and mental health. It is important to take care of yourself because you need to be in good condition to best care for older people. Not taking care of yourself may lead to burnout. It may also lead to physical and mental health conditions. These may affect your work and personal life.

This chapter will discuss how you can manage your work-related stress. It will teach you how to recognise your stressors and what to do about them. It will also discuss the forms of help available to you.

In this chapter, you will learn how to:

- Monitor own stress levels when working with people
- Use self-care strategies and seek support if required

4.1 Monitor Own Stress Level When Working With People

Stress is a condition people experience whenever they face new or challenging situations. It affects your physical and mental well-being. Stress is not always a negative thing. It can help you develop your alertness and improve your performance at work. However, stress turns into a problem when it gets prolonged. When you feel overwhelmed by your work tasks, or struggle to cope with problems, you must learn how to manage your stress.

Monitoring your stress level helps you manage your stress. The *stress level* refers to the perceived extent of stress that you experience. Your stress level can be considered normal if you feel like you can still perform daily tasks without problems. However, a high stress level indicates that you struggle with carrying out everyday activities. It also means you are feeling the effect of stress on your physical, mental and emotional well-being.

When working with older people, you may experience stress for many reasons. Dealing with people's mood swings or possible aggression may cause emotional stress. Helping older people with their daily activities may also cause physical stress.

In this subchapter, you will learn techniques to monitor your stress levels at work. Keeping track of your stress levels allows you to take action to address it before it gets worse.

Monitoring Stress Levels

To keep track of your stress levels, you should first know the indicators of stress. The table below shows some physical and emotional indicators of stress:

Physical Indicators	Emotional Indicators
<ul style="list-style-type: none"> ▪ Chest pain or rapid heart rate ▪ Trouble sleeping ▪ Muscle tension ▪ Digestive issues ▪ Headaches and nausea 	<ul style="list-style-type: none"> ▪ Increased irritability and nervousness ▪ Low self-esteem ▪ Feeling like you are losing control ▪ Forgetfulness

You may recognise these indicators within yourself as you do your work tasks. Stress is a normal thing that everyone experiences at some point. It becomes a problem when too much stress starts affecting you negatively.

To monitor your stress levels, you can try the following steps:

1. Understand how you respond to stress.

As previously mentioned, everyone has a different reaction to stress. What can be considered stressful to other people can be normal for you. What you think is stressful can be normal to others. As such, it is important that you know how your body responds to stress. Check upon yourself if you start to notice some changes in your body that can be stress-related. You can use the following criteria to do this:



- **Attention**

Ask yourself if you struggle to maintain your focus at work.

- **Mood**

Ask yourself if you feel overwhelmed, pressured or anxious when doing your work tasks.

- **Stamina**

Ask yourself if you always feel exhausted after your work.

- **Body**

Check any irregular body response that you experience, like heartburn, palpitation, headache or dizziness.

- **Thoughts**

Check whether your thoughts are becoming too negative.

If you are experiencing most of the symptoms above, then you might be under a high level of stress. Once you recognise the effects of stress on your body, you can now plan ways to respond to them.

2. Assign a rating scale for your stress level.

Stress is subjective. This means only you can determine how much stress you are experiencing. Assigning a personal rating scale for your stress level can help you monitor it. You can refer to the suggestions below to do this:

- **Construct your own rating scale.** For example, you can rate your stress level on a scale of one to five, with one being no stress and five being too much stress.

- **Take a few minutes at the end of the day to write about how you felt that day.** Include what level of stress you think you felt based on your rating scale.
- **Make a mental note of any time you feel any of the previously mentioned physical and emotional indicators.** Try to reflect on what may be causing those symptoms.



3. Use a stress tracker.

In this modern age, you can also use the help of technology to monitor your stress level. Stress trackers are devices that can be worn on your wrist when you go to work. They monitor changes in your physical body, like heart rate and sweat level, which are associated with your emotional state. When your stress tracker detects a high rate for these two, then you may be experiencing a high stress level.



Checkpoint! Let's Review

1. Caring for older people may cause physical and emotional stress.
2. It is important to monitor your stress levels so you can take action before they get worse.
3. To monitor your stress levels, you must first understand how your body responds to stress. Then, you can assign a rating scale to your stress or use a stress tracker to monitor it.

4.2 Use Self-Care Strategies and Seek Support if Required



Once you have learnt how to determine your stress levels, you will need ways to manage your stress. There are many things you can do for yourself to deal with your work stress. There are also resources available that can help you manage stress. Taking care of yourself and seeking help keep you mentally healthy. Ignoring your stress can cause it to build up and cause you further harm. It may also affect your ability to do your job, which will affect the people in your care.

In this subchapter, you will learn different strategies you can use to deal with stress. You will also learn about resources you may access to help you.

4.2.1 Self-Care Strategies for Managing Stress

Self-care describes your ability to cope with stressors without professional help. It refers to taking care of yourself to remain physically, emotionally and psychologically healthy. When you are healthy, you can attend to your tasks and responsibilities. You can do your job well and do the things you need to do. Remember that taking care of yourself makes you capable of taking care of others.

Each person's way of coping is not the same. What works for others may or may not work for you. You must find effective self-care strategies to help you cope better with work-related stress.

Samples of self-care strategies that you can follow are provided below:

- **Share your feelings.**

Remember that you are not alone. Other staff in your workplace have also experienced dealing with stress. Talking to your colleagues and sharing your feelings can help you feel better. They can also give you tips on how they practise self-care.

In addition, you can talk to your family and friends. Depending on your spiritual or religious beliefs, you can also seek guidance from a higher being. Sharing your feelings with others can make you stronger in dealing with your emotions. This is because the people around you can provide emotional support during difficult times.

- **Take care of your health.**

Getting adequate sleep and eating on time is necessary to maintain energy in the workplace. Remember that clients in aged care require a lot of additional support. You must have the energy to assist them with their daily needs.

Exercises like taking long walks can also help relieve your physical stress. You can also seek massage treatments if you are feeling tired from work. Remember that your physical health is essential to your mental and emotional well-being.



- **Learn to pace yourself at work.**

Pacing yourself at work means acknowledging the limitations of your body. Remember that your body needs to rest after a tiring day. Refrain from handling multiple tasks at once, especially if doing so brings you severe stress.

In addition, remember to take regular holidays and spend time with your family. You can also do your favourite hobby or sports during your free days.



Further Reading

How can you take care of yourself? Read more on how to plan for self-care through the link below:

[Work-related stress](#)

Multimedia



The video below talks about the stresses of working in aged care, as well as the importance of self-care. It also introduces Self Care Matters, a resource to help you manage stress.

[Self-Care Matters Aged Care - The Challenges of Working in Aged Care](#)

4.2.2 Internal and External Services

While self-care is helpful, it can only go so far. Sometimes, you will need help from other sources as well. It is important that you are aware of the services and resources that you may access to help you deal with your work. There are services within and outside your organisation that may help you in dealing with stress, trauma or vicarious trauma.

Stress is the feeling of being unable to cope with the pressures of your job. *Trauma* is a response to an intense negative event that a person has experienced, such as an assault or a death. *Vicarious trauma* is trauma felt after hearing about another person's experiences. For example, a person with dementia may tell you about a traumatic event that happened to them. You may then experience vicarious trauma resulting from that.

Leaving these feelings unaddressed may cause emotional issues, such as PTSD and burnout. This is why there are services in place to help aged care workers cope with the pressures of their job.

Below are some services that can help you deal with work-related stress:

Internal Services	External Services
<ul style="list-style-type: none"> ▪ Seminars within the organisation that teach stress-management techniques ▪ Quiet rooms that aged care workers and staff may access if they need some time to calm down 	<ul style="list-style-type: none"> ▪ Seminars outside the organisation that teach stress management techniques ▪ Audiobooks on guided meditation that can help you de-stress

Below are some services that can help you deal with both work-related trauma and vicarious trauma:

Internal Services	External Services
<ul style="list-style-type: none"> ▪ On-site counsellors or psychologists who can help you or refer you to outside help ▪ Mental health programs that an organisation can put in place for its workers ▪ Team meetings with other aged care workers and staff, specifically about coping with trauma 	<ul style="list-style-type: none"> ▪ Counsellors or psychologists specialising in work-related trauma ▪ Organisations dedicated to supporting the mental health of carers, such as: <ul style="list-style-type: none"> ○ Carers Australia ○ Mental Health Carers Australia

States and territories also have their own support services for carers. *Carers* refer to anyone who is taking care of a person with special needs. As an aged care worker, you are part of this group.

You must be in tune with your mental health and know how to seek help when needed. The services mentioned are put in place to help you. The sooner you can ask for help, the better your chances of taking control of your mental health at work.

4.2.3 Seeking Support

How do you know when it is time to seek support for your work-related stress and trauma? To identify if you need to start seeking support, you can ask yourself the following:

- **Can I still handle it on my own?**

Experiencing stress at work is a normal occurrence. People have their own coping mechanisms for handling stress. However, if your self-care practices seem to have little to no impact on your stress level, it might be best to seek support.



- **Is my stress or trauma affecting my performance at work?**

Assess whether you can still deliver optimal performance in your work tasks. Feelings of continuous exhaustion or reduced energy when working can indicate accumulated stress.

- **Is my stress or trauma affecting the way I interact with others?**

Your work role requires you to interact with clients and colleagues regularly. You must be patient and attentive to your client's needs since they would need more support due to their age. However, stress can make you feel easily irritated or impatient. Seek support if you feel like your stress negatively affects how you interact with others.

- **Is my stress or trauma causing me to lose sleep?**

You need proper rest to have the strength to perform your work tasks. Note that difficulty in falling asleep on some days is normal. However, continuous loss of sleep can lead to insomnia and affect your health negatively.

- **Is my stress or trauma causing me to lose or gain weight?**

Monitoring your weight loss or gain can give you an idea if your workplace stress is becoming too much for you. This is because stress affects your body processes, like appetite and metabolism.

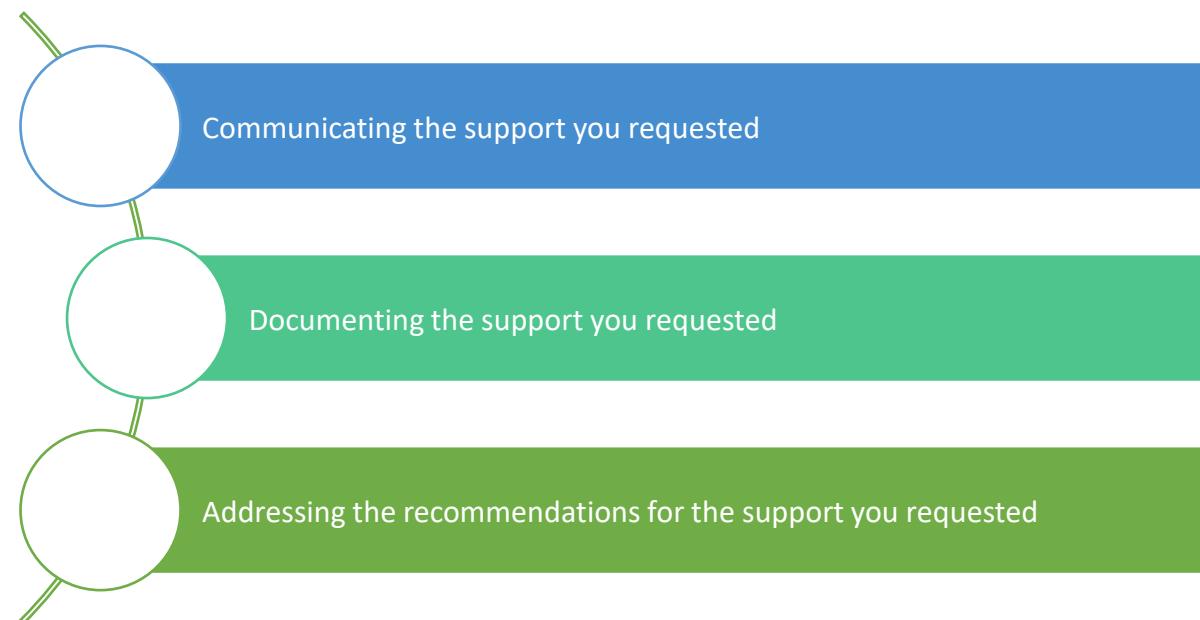
- **Am I dreading going to work or seeing the people in my care?**

People can still feel fulfilled at work even when they face challenging situations. However, if the thought of going to work gives you anxiety, this may be a sign that your stress is becoming too much for you to handle.



If you answered 'yes' to most of these questions, then it may be time for you to seek support services. Your workplace has policies and procedures on how you may seek support.

Policies for seeking support can include the following:



- **Communicating the support you requested**

Request for support is related to your organisation's policies on the health and well-being of its employees. Communicate your request to your supervisor so they can relay it to the department in charge of employee welfare. You may give either a verbal or written request, depending on the policy of your organisation.

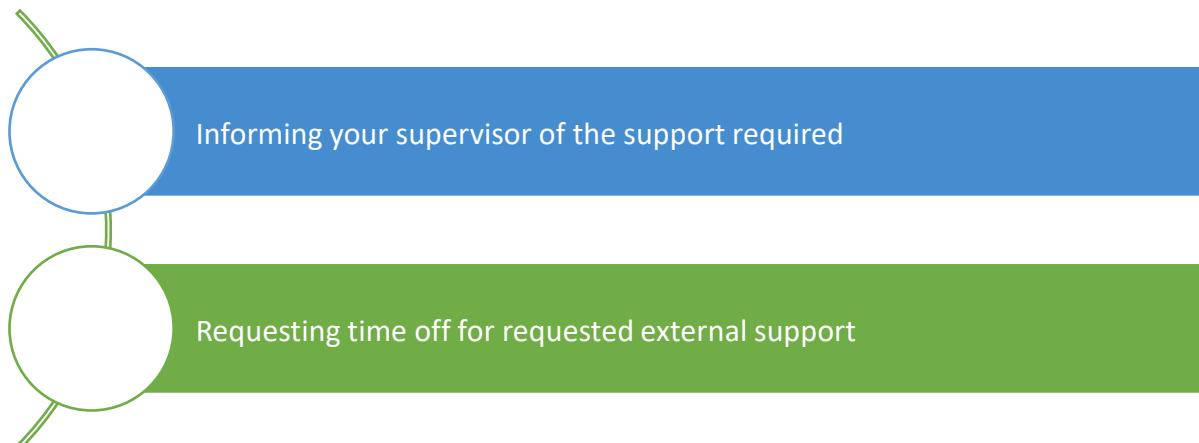
- **Documenting the support you requested**

In cases where you are required to file for a written form of request, know the policies in documentation by your organisation. Some may use electronic means where documentation is uploaded to an online portal. Others may require you to fill out printed forms as well.

- **Addressing the recommendations for the support you requested**

Your organisation will provide you with a support service from their available range of mental health assistance programs. They can also provide a referral to an external counsellor service. You must follow their terms, instructions and requirements relevant to accessing the support service.

In addition to the policies, you must be familiar with the organisational procedures for seeking support. This includes the following:



- **Informing your supervisor of the support required**

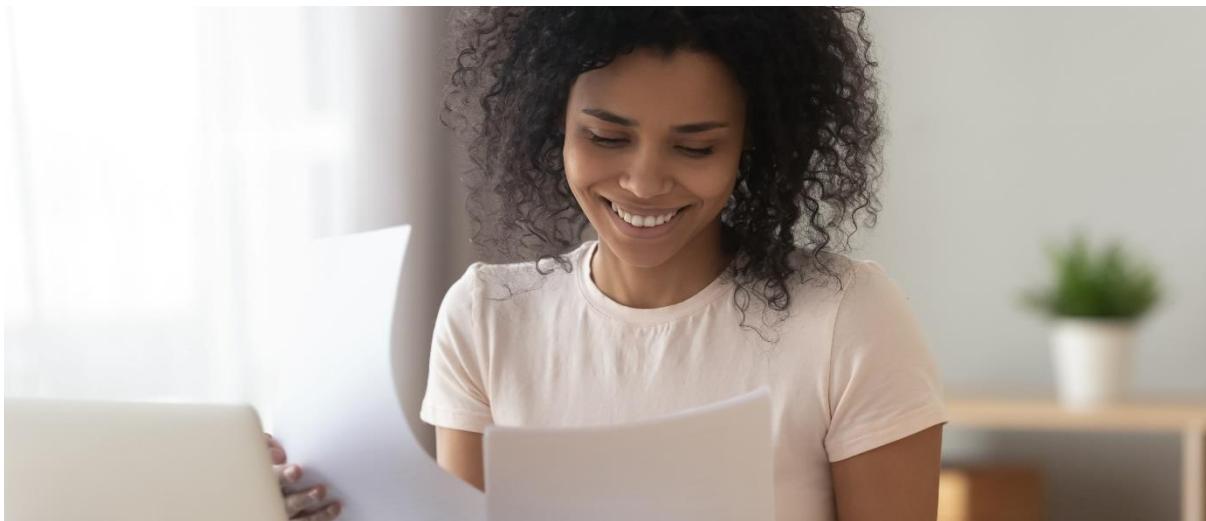
Know your organisation's procedures for informing your supervisor of the support you require. Once you have communicated your request for support, your supervisor will set a meeting to discuss your concern. During the meeting, you will both decide on an action plan. This refers to the schedule of how and when you can receive the support service recommended for you.

- **Requesting time off for requested external support**

Follow your organisation's procedures when asking for time off to receive external support. You must indicate the complete details of your request, which may include the following:

- Date of requested time off
- The purpose for requesting time off
- Additional evidence to support the request for time off

Remember to file your request according to the rules of your organisation. For example, if an organisation requires a leave of absence to be filed a week before the target date, then you must ensure to follow this. Your supervisor will oversee the review and approval of your request.



Checkpoint! Let's Review



1. Self-care strategies are things you can do on your own to deal with work-related stress.
2. When dealing with stress and trauma, you may access services within and outside your organisations. There are many services dedicated to helping aged care workers.
3. It is important to know when you need to ask for help in coping with job stressors. You should learn your organisation's policies and procedures for seeking help.

Learning Activity for Chapter 4



Well done completing this chapter. You may now proceed to your **Learning Activity Booklet** (provided along with this Learner Guide) and complete the learning activities associated with this chapter.

Please coordinate with your trainer/training organisation for additional instructions and guidance in completing these practical activities.

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