



UNIVERSITY of  
TASMANIA



Tasmanian  
Government

# SERVICE DRIVEN APPROACHES TO PREVENTING AND RESPONDING TO ELDER ABUSE IN TASMANIA (SAPEA)

## Summary of Factors and Responses from SAPEA\_South and SAPEA\_North Reports

This document is to be read in conjunction with the full research-reports - SAPEA\_South and SAPEA\_North - that provide the evidence supporting the factors and responses given by the services that participated in the research. The material in these reports has only come to light because of the time and goodwill of the research participants. Their responses are held in confidence and respect.

On completion of the workshops in the south and north of the State, the research has made it manifestly clear that service level response to elder abuse is under strain. There are currently no solutions to the problems participants are dealing with. Participants work very hard between themselves to resolve problems, but this is *ad hoc* and reliant on personal connections and interests. We are aware that the Department of Justice has researched and prepared a report for the Attorney General regarding adult safeguarding legislation and options for establishing an investigatory body for elder abuse in Tasmania.

It is our primary recommendation for the State to establish a complaints investigation body with power to:

- Investigate
- Adjudicate
- Make determinations, and
- Enforce those determinations.

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LAWRENCE, S.,BANKS, S., & HENNING, T. 2021. Service-driven Approaches to Preventing and Responding to Elder Abuse in Southern Tasmania. Preventing Elder Abuse Tasmania. Hobart: University of Tasmania

LAWRENCE, S.,BANKS, S., MOSENTHAL. M., & HENNING, T. 2021. Service-driven Approaches to Preventing and Responding to Elder Abuse in Northern Tasmania. Preventing Elder Abuse Tasmania. Hobart: University of Tasmania

LAWRENCE, S.,BANKS, S., & HENNING, T. 2021. Service-driven Approaches to Preventing and Responding to Elder Abuse in Tasmania, Summary Document. Preventing Elder Abuse Tasmania. Hobart: University of Tasmania

1. Recognising and responding to elder abuse		
Factor	Response	References
1.1 Improving recognition and response to elder abuse through education	1.1a Evaluate implementation of mandatory elder abuse prevention training across government and NGO service organisations to promote a consistent, state-wide approach to elder abuse recognition and response.	SAPEA_N: 1.1, 1.5, 3.6ii and 3.6v
	1.1b Service staff need to be trained to recognise and respond to an older-person's long-standing trauma. For some older persons, the violence and abuse has become 'normalised'.	
	1.1c Staff providing personal care should also be trained to recognise the effects historical abuse which may manifest as fear of being bathed for example.	SAPEA_S: 1.1, 1.2i, 3.3 and 3.4
	1.1d Build on the elder abuse awareness campaign to emphasise recognition by the 'perpetrator' and what other people think of what they are doing.	
	1.1e The language used toward the 'perpetrator' needs to focus on the rights of the older person. <i>"I probably wouldn't say, "You're abusing your mum." I would say, "It's her right to do something" (SAPEA North 2020).</i>	
	1.1f Recognise and value staff experience in being able to interview older Tasmanians through subsidised training and job description.	
1.2 Recognising and responding to the most reported form of elder abuse - financial abuse	1.2a Recognise and develop financial abuse prevention and education/awareness around four key points: <ul style="list-style-type: none"> <li>(i) Some people think it is "reparation or compensation for what they perceive as historical ills or faults" by the parent.</li> <li>(ii) Financial desperation in a climate of high debt and financial competition combined with an assumption that the older person's assets will be coming to them in future anyway.</li> <li>(iii) Anger that the 'boomer' generation are holding onto a lot of wealth gained during a period of growth in Australia that younger generations have missed out on.</li> <li>(iv) Regardless of the argument that the 'boomer' generation worked hard to create their wealth, younger generations have grown up with the experience and expectation of having discretionary spending. The majority of 'boomers' on the other hand were raised by parents who 'scrimped and saved' during the depression and war years. Hence, not only is the economic environment different between the generations, but also the experience of having money to spend, and with credit cards, whenever you want it.</li> </ul>	SAPEA_N: 1.3 and 1.4v
	1.2b Engage with NGO's, such as COTA and Combined Pensioners and Superannuants Association, to provide support and education to older Tasmanians about their financial rights and access to support.	SAPEA_S: 1.2iii
	1.2c Identify and evaluate existing financial safeguards in current use. Older Tasmanians with low IT literacy are, for example, particularly vulnerable to local bank and post office closures.	
	1.2d How to identify increasing isolation of an older person due to their finance decision making being taken from them? It's as though they are a drawing slowly being rubbed out. If someone cares enough to look, the imprint of their life remains.	
	1.2e Impose a duty on banks and other financial institutions (to include any incorporated or unincorporated person or body that has dealings with older persons' finances) to act on suspicions of financial elder abuse of their accounts. A public investigative and regulatory authority should be established by legislation for this purpose.	

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<b>1.3 Institutional abuse. Insidious and self-serving behaviour by government and NGO services for older Tasmanians</b>	<p>1.3a Provide support to Tasmanians considering entering contracts with ‘retirement’ village/independent living unit businesses through Consumer Affairs and Fair Trading, or Consumer, Building and Occupational Services, or Senior Assist. Are they good value for older Tasmanians? Would you let your Mum buy into one of these contracts?</p>	<p>SAPEA_N: 1.4i, 1.4ii, 1.4iii, 1.4v</p> <p>SAPEA_S: 2.1ii</p>
	<p>1.3b Tasmania has a state-wide network of Multipurpose Centres (MPC) (SAPEA_North, Table 3). This existing network can link to private providers to ensure older Tasmanians are protected through information sharing and provide continuity of care.</p>	
	<p>1.3c Identify and use the expertise of staff with long term experience in Tasmanian services. Their understanding of what works, and what programs have been a waste of time and money, is invaluable.</p>	
	<p>1.3d Review the requirement for extra time to manage the care of an older Tasmanian—living in the community or RAC—and remunerate the practitioner/service for their time and expertise. This would encourage provision of care in areas, and populations, already underserved by services.</p>	
	<p>1.3e Tasmanian government to lobby the Commonwealth to improve access and reduce the well-documented waiting list for home care packages for older Tasmanians. Evaluate equitable access to aged-care services across regions.</p>	
	<p>1.3f Request Commonwealth to evaluate ‘MyAgedCare’ on-line portal for consumer (service and older client) satisfaction; what population groups are being adversely affected by lack of access to this on-line service; assess growth in ‘consultants’ to help older clients access/understand MyAgedCare.</p>	
	<p>1.3g Tasmania conduct its own review into the impact of bank branch and Post Office closures on communities.</p>	
	<p>1.3h Review costs and charges of government entities such as the Public Guardian.</p>	
<b>1.4 Elder abuse prevention policies are not well articulated. Tasmania needs a consistent, statewide policy to ensure equitable recognition, response and elder abuse prevention.</b>	<p>1.4a Support Tasmanian services to develop/refine their elder abuse strategy/policy. ‘Elder abuse is everyone’s business’. Participants were not aware of the example policy available on the Tasmanian Government Elder Abuse Prevention website (or the website in general).</p>	<p>SAPEA_N: 1.1 and 1.4iv</p> <p>SAPEA_S: 1.1, 1.2, 2.2, 3.4ii</p>
	<p>1.4b Recognise the range of skills, experience and turnover of staff of Tasmanian services when developing policy and training. SEAPAC, for example, are already experienced in the issues around prevention of elder-abuse in Tasmania. One approach would be to foster elder abuse prevention ‘champions’ across a range of service types. For example, The District Nurses (TDN) are widely known to be experienced in managing government sponsored programs, provide a state-wide service and have a high-level staff skill set with embedded staff development programs. A service like TDN is different to Senior Assist, for example, because of the nature of their personal-care work, they have access to people’s homes.</p>	
	<p>1.4c Existing government policy limits the response of the service to a particular set of parameters that may be defined, for example, by funding from one government department vs a whole of government approach. By writing such parameters into a policy means some people will be excluded from the service. A more wholistic ‘no door is the wrong door’ approach to government policy enables any service to ‘triage’ the person who has come to their door desperate for help, to the service that will help them best. Build on the success of the “No wrong door/The Right Place ” program<sup>2</sup> to identify and strengthen current formal and informal connections between services and improve access to services for older Tasmanians.</p>	

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	<p>1.4d When reviewing policy it is important to consider: would the uncertainty of the response within a service be resolved by a prescriptive policy? This would be similar to mandatory reporting which has been shown to create different problems for the older person .</p>	
	<p>1.4e Institute Tasmanian-wide monitoring of the use of ageist language in formal documentation, government communications and policy. Furthermore, resist ‘softening’ the language around elder abuse as a way of avoiding agency and personal responsibility for these acts that are violent, psychological, emotional, financial, neglectful towards older Tasmanians.</p>	
	<p>1.4f Promote expertise across government and NGO services in interviewing older older people. As an example, Tasmania Police have a ‘Specialist Interviewing’ unit trains police who regularly conduct interviews with children, people with cognitive impairment or those who have complex communication needs. This can include the elderly victims of crime and whenever possible, police who have undergone this training conduct interviews with these victims/witnesses.</p>	
<h2>2. Strengthening existing Tasmanian services that have known response pathways for elder abuse</h2>		
<p><b>2.1 The Elder Abuse Helpline (EAH) is the most widely recognised and used Tasmanian referral service</b></p>	<p>2.1a An alternative name to the Elder Abuse helpline, for example the national phone line is called “1800ELDERHelp” (automatically redirects callers seeking information or advice on elder abuse to their state or territory phone line service). Changing the name of the EAH will be difficult due to the existing links and the recent awareness campaign.</p>	<p>SAPEA_N: 2.1i and 3.5iii</p>
	<p>2.1b DoJ address ‘privacy’ issues (real or otherwise) that restrict information sharing between agencies. Set up a central code that deidentifies. E.g. At point of first contact (often EAH), the caller is given an easy to remember/recall code such as Firstname initial, Lastname initial, year of birth, gender (F,M,U). (eg. SL1959F). Usually sufficient in Tasmania.</p>	<p>SAPEA_S: 2.1</p>
	<p>2.1c Elder Abuse Helpline (EAH) to consider how to encourage ‘stand-alone’ professions to refer clients to the Helpline. The pathway for information for stand-alone, private consultancies is often via their professional bodies such as the Tasmanian Law Society, Australian Banking Association, CPA Australia, the College of General Practitioners, Pharmacy Guild etc.</p>	
<p><b>2.2 Senior Assist</b></p>	<p>2.2a In both the North and South of Tasmania, Senior Assist has made a ‘name’ for itself with services already. It has set the right ‘tone’ across professional groups and as such been welcomed by health as well as non-health services. This is currently a time-limited project and should be reviewed for permanent funding.</p>	<p>SAPEA_N: 1.2ii, 2.1ii and 2.1iii</p> <p>SAPEA_S: 1.1, 1.5 and 3.5ii</p>
<p><b>2.3 Tasmanian Police</b></p>	<p>2.3a Tasmanian Police review their responses to cases of elder abuse for state-wide consistency. Integrating with data collection across agencies (eg THS and Tasmanian Police) would increase service response efficiency and reduce the burden on the older person repeating their story to multiple service personnel. As an example, to extend across Tasmanian agencies databases, efficiencies could be made in how TasPolice manage elder abuse/welfare calls.</p>	<p>SAPEA_N: 2.1vi and 3.4</p> <p>SAPEA_S:</p>

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	<p>2.3b Tasmania Police instigate a ‘single desk’ older Tasmanian reference point to:</p> <p>2.3bi Collate all welfare calls regarding any older Tasmanian.</p> <p>2.3bii Apply the same ‘intelligence’ standard (data capture) as used in criminal cases.</p> <p>2.3biii Review Tasmanian Police policy and practice to standardise welfare visits and reporting across the State.</p> <p>2.3biv Promote the ‘non-urgent’ assistance phone line - and ensure calls are recorded, or at least coded if the calls are in reference to older Tasmanians</p> <p>2.3c Evaluate existing non-police ‘welfare’ checks and how they can be integrated into a state-wide database/response network:</p> <ul style="list-style-type: none"> <li>• OPAN (Advocacy Tasmania) be supported to continue (implemented during pandemic) welfare checks for older Tasmanians who suspend/end their aged care services</li> <li>• Lifeline</li> <li>• ‘Telecross’ and ‘COVID Connect’ from Australian Red Cross</li> <li>• ‘Silver Cord’ St Johns Ambulance (Qld)</li> </ul> <p>2.3d Tasmanian Police to review their elder abuse policies to ensure staff give a consistent response to elders at risk.</p>	2.3
<p><b>2.4 Review powers of the Public Guardian</b></p>	<p>2.4a Expansion of powers to the ombudsman to investigate elder abuse.</p> <p>2.4b Make the Public Guardians a public advocate (other States) to have strong powers of investigation and intervention.</p> <p>2.4c Need a Minister for Ageing (e.g. Victoria) or, establish a Commission (similar to NSW) to achieve a focus of attention and endeavour in building responses not otherwise achievable.</p> <p>2.4d Establish a complaints investigation body with power to investigate; adjudicate; make a determination; and enforce the determination.</p> <p>2.4e Identify and develop a consistent approach service wide to address ‘undue influence’ to ensure the older person’s wishes are primary in the service response.</p> <p>2.4f Review Guardianship process to (1) identify check-points in the application process that can be documented – preferably into a secure, on-line database; (2) train and register practitioners able to process Guardianship documents.</p> <p>2.4g Official Visitors provide a crucial link between clients living in facilities and external services.</p>	<p>SAPEA_N: 3.4i</p> <p>SAPEA_S: 2.2, 3.4,3.4i, 3.5, 3.5i and 3.5iii</p>
<p><b>3. Current barriers and enablers in recognising and responding to elder abuse in Tasmania</b></p>		
<p><b>3.1 Review existing Tasmanian Family Violence legislation</b></p>	<p style="text-align: center;"><b>The most significant barrier, and enabler, of elder abuse in Tasmania is the lack of legislation specific to elder abuse.</b></p> <p>3.1a There is a clear need for Adult Safeguarding or redefinition of ‘family’ violence so older Tasmanians can access the same level of service as is now available under Family Violence legislation. Start by redefining in the Family Violence Act, the definition which is currently limited to intimate partners to extend to other forms of family violence.</p>	<p>SAPEA_N: 1.2i, 2.1v, 3.4i, 3.4ii and 3.5</p> <p>SAPEA_S:</p>

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	<p>3.1b A DoJ evaluation of current processes under Family Violence Legislation, to consider:</p> <ul style="list-style-type: none"> <li>3.1bi Past five-year review of clients with breakdown of services used by age group.</li> <li>3.1bii Cases where definition of ‘family’ has restricted access to services/protections by older Tasmanians.</li> <li>3.1biii External review of equivalent State and Territory legislation with focus on older Australians and definition/s of ‘family’.</li> </ul> <p>3.1c Use the already functioning and known Safe at Home service and reporting structure as a template for a Tasmanian framework for elder abuse and extend their application to elder abuse.</p> <p>3.1d State Government to develop legislation, similar to ‘Safe at Home’, whereby any referral can be investigated while ensuring the older person is supported and protected by knowledgeable services.</p>	3.4, 3.4iii and 3.5
<p><b>3.2 Assessment of capacity, along with legislation, emerged as a significant barrier throughout the discussions. So much so it became clear that services have two distinct response pathways based on whether the client had capacity, or not. There are also two distinct assessment processes – both reliant on the good graces of medical practitioners – the Office of the Public Guardian (OPG) and the health system (THS).</b></p>	<p>3.2a DoJ review current assessment capacity of capacity across agencies to determine commonalities and potential for streamlining:</p> <ul style="list-style-type: none"> <li>3.2ai Review national progress for assessment</li> <li>3.2aii Can the process (documentation) be digitalised?</li> <li>3.2aiii Who else can determine capacity? Eg. Lawyers, nurse practitioners or police to improve the process while preventing perverse judgements.</li> </ul> <p>3.2b All such assessment must take into account the day to day variation in the health and capacity of the person. Educate services that having a diagnosis of dementia, for example, does not immediately mean the person is incapable of making decisions on their own behalf.</p> <p>3.2c Access to specialists. This includes the number of specialists (have numbers increased in line with increasing age of Tasmania’s population?); access via telehealth or mobile clinics; use of alternative professionals, e.g. nurse practitioners, to undertake assessments</p> <p>3.2d Evaluate the understanding of ‘guardianship’ amongst service providers.</p> <p>3.2e Develop a Tasmanian Health Pathway for elder abuse.</p> <p>3.2f Government needs to take this seriously with a ‘whole of government’ response to prioritise older person rights and protections. There will be another Janet Macozdi.</p> <p>3.2g Review service understanding of human rights. Why do health professionals struggle with, or see conflict, with client autonomy particularly in the acute health service sector?</p> <p>3.2h Research with older Tasmanians what they need to safe and supported in their own home.</p>	<p>SAPEA_N: 3.2, 3.2i, 3.2ii and 3.2iii</p> <p>SAPEA_S: 3.2</p>
<p><b>3.3 Every service working with older</b></p>	<p>3.3a Support service networking within Tasmania and nationally through policy and resourcing (e.g., staff hours). Recognise the extra time it takes to develop, sustain and use networks by writing networking into service-work and individual job descriptions.</p>	SAPEA_N:

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<b>Tasmanians should be required to network within Tasmania and nationally where-ever possible.</b>	3.3b Encourage services to develop communication teams at a local level. Assist services develop their own referral flow-chart that should indicate to staff that there are two referral pathways. Intra-service referrals to show how staff network within the service to address elder abuse; and how to interact with inter-service referral pathways (e.g., the EAH, TasPol, MPC or Senior Assist. These networks are also embedded in the external networking context (there may be more than one) specific to the service. E.g. the National Elder Abuse Policing Network, SEAPAC, professional networks etc.	3.5, 3.5ii,3.5iii 3.6i  SAPEA_S:
	3.3c Networking could be extended to include a centralised case-management model to ensure clients are directed to one service at a time. It becomes the responsibility of the service to refer the client as well as informing the central case-management of changes. Centralised case management to ensure clients are either not ‘falling through the gaps’; or being seen across multiple services.	3.5, 3.5i, 3.5ii, 3.5iii, 3.6
	3.3d A case-manager could carefully maintain an ongoing relationship with the older person independent to the service provider, keep their confidence, and be available to address any concerns the older person may raise with them. A ‘walk beside’ the person to support what they want rather than just reporting the situation. Services are currently using whatever ways and means they have at their disposal to help the older person in difficult circumstances. As emerged from the workshops, each case discussed had a different response. Sharing these case experiences across services would not only bring different perspectives and ideas, but also more clearly identify specific gaps in service provision.	
	3.3e-Encourage services to develop communication teams within local communities.	
<b>3.4 Confusion about privacy has led to a barrier in information sharing as a pathway to preventing elder abuse in Tasmania</b>	3.4a What would a ‘common-sense’ approach to information sharing look like? Evaluate examples in Tasmanian practice to demonstrate how information sharing meets legislative and community standards. Determine the progress of any current developments in Tasmania with respect to the establishment of inter-agency data integration systems and programs.	SAPEA_N: 3.5iii
	3.4b DoJ to evaluate recommendations of ALRC Report 10822 and current review. Conduct forums with service providers—government and nongovernment—to determine best practice and develop service level education that promotes interservice communication that is in the best interests of clients.	SAPEA_S: 2.1 and 3.5
	3.4c DPAC to report on progress with the national Data Integration Partnership and how it can be used to prevent elder abuse in Tasmania.	
<b>3.5 There is a lack of clarity around the role, fees and costs, of the Public Trustee and other financial institutions</b>	3.5a All the discussion leads back to the overarching, primary recommendation of this research, to establish an investigative and regulatory body with power to investigate, adjudicate, make a determination, and enforce the determination.	SAPEA_N: 1.2ii, 1.4v and 3.3
	3.5b In the event they don’t have any family or trusted support, then the Public Trustee becomes a very important option. But only if the person has money for the Public Trustee to manage. Evaluate the role of the Public Trustee in cases of elder abuse in Tasmania with a view to learning how the organisation can be strengthened to investigate and manage existing clients and develop understandable pathways for Tasmanians to access services. In the event they don’t have any family or trusted support, then the Public Trustee becomes a very important option. But only if the person has money for the Public Trustee to manage.	SAPEA_S: 1.2i, 1.2iii, 3.1 and 3.4

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	<p>3.5c Impose a duty on financial institutions to have a responsibility to act on their suspicions of inappropriate access to accounts. A public investigatory and regulatory authority should be established by legislation for this purpose. Define financial institutions to include any body, whether incorporated or unincorporated, that has dealings with an elder person's finances.</p> <p>3.5d Evaluate impact of fees and lodgement process on uptake of Guardianship etc.</p> <p>3.5e Evaluate access to documents once lodged, by services assisting an older Tasmanian client.</p> <p>3.5f Estate planning for people without the resources to pay a private advisor is an unmet need. Being able to refer people to Legal Aid or the EAH would be a start. "Having a resource other than family, effectively, an independent third-party scenario to go and get some advice from (SAPEA North 2020)." Also, elderly people may need help with using technology to manage financial affairs.</p> <p>3.5g Institute an awareness campaign to encourage older Tasmanians to engage and discuss long term personal protection regardless of their ability to pay for the advice and submission/registration of documents. For example, community education sessions might be instituted with Senior Assist.</p> <p>3.5h Review what information is given when Tasmanians apply for Carer or aged pension, and Seniors Card, to ensure Tasmanians are given information on how to access services that they may need as they get older, and also offered the opportunity to meet with a community legal person to help with, for example, estate planning and guardianship.</p> <p>3.5i Identify places that are easily accessible, or routinely accessed by older Tasmanians that can provide free financial and legal advice in a safe environment. Service Tasmania may be an example, or at local government offices and multipurpose centres. What 'outreach' shopfronts are there in Tasmania? A traveling bus?</p>	
<p><b>3.6 COVID-19 disrupted service responses to older person care and exposed flaws in the human right of older Tasmanians</b></p>	<p>3.6a COVID has increased and changed the workload of some services who are then too busy adapting to changes, to have time to call for help.</p> <p>3.6b Further research on the 'lock down' of RAC in particular, but also disabled Tasmanians 'locked' in their own homes during the pandemic, has started to emerge nationally. However, Tasmania has had its own policy and requires a local approach to reviewing the unintended effects of these policies on the human rights of its own citizens. While the result of such research may emerge as being critical of Tasmanian Government policies during the pandemic, it will also demonstrate ways to improve the rights of older Tasmanians – for example how Wills are witnessed.</p>	<p>SAPEA_N: 3.3 and 3.6ii</p> <p>SAPEA_S: 3.3, 3.4 and 3.6i</p>
<p><b>4. Resourcing services that are at the forefront of preventing elder abuse in Tasmania</b></p>		
<p><b>4.1 Tasmanian services that are in a direct position to prevent elder abuse are limited by funding</b></p>	<p>4.1a If community services can't act on referrals, then risk for the older person escalates. To interrupt the cycle of abuse, establish a complaints investigation body with power to investigate; adjudicate; make determinations; and enforce those determinations.</p> <p>4.1b Concurrent with any increases to staff, for example, efficiencies can be made if a cross-service, case-management model is adopted.</p>	<p>SAPEA_N: 3.4i, 3.6ii and 3.6iv</p>

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<p><b>restrictions and communication with government</b></p>	<p>4.1c Government and NGO funding to services with older Tasmanians as clients needs routine evaluation with ‘markers’ of stress. E.g., COVID has increased and changed the workload of some services who are then too busy adapting to changes, to have time to call for help.</p> <p>4.1d Support community services to promote awareness of service availability to older Tasmanians and other services.</p> <p>4.1e Build on the success of the “No wrong door/The Right Place” program to identify and strengthen current formal and informal connections between services and improve access to services for older Tasmanians. In this program the hairdresser, for example, can refer the person to a service that might help them more directly.</p> <p>4.1f The extra time it takes to provide a service for older people living in the community requires formal recognition in community sector business cases/budget. The ACOSS (2019) report identifies a widening gap in increasing demand with static or decreasing service budget allocation. Governments have competing, and complex, priorities. The frustration expressed by participants was largely the result of a lack of communication eg. no replies to formal correspondence.</p> <p>4.1g One solution discussed was to appoint a Tasmanian ‘Minister for Ageing’. However, there is a Federal Government ‘Minister for Ageing’ and this has not been an ideal response either.</p> <p>4.1h Continue to promote and support services to review and update their elder abuse prevention policies. Participants were not aware of the example policy available on the Tasmanian Government Elder Abuse Prevention website (or the website in general).</p>	<p>SAPEA_S: 1.4iv, 2.4, 3.5, 3.5iii, 3.6i</p>
<p><b>4.2 Is there regional variance in how services respond to elder abuse across Tasmania?</b></p>	<p>4.2a Services are stretched to meet client needs. As awareness of elder abuse increases, demands on services will also increase. Participants in both north and south of Tasmania did not think there were significant differences between the regions. Differences do arise, not because of the ‘Boag’s Border’ but in regard to:</p> <ul style="list-style-type: none"> <li>• Distance from major population centres and services</li> <li>• Access to a MPC/Primary Health Care with allied health services on-site</li> <li>• Transport</li> <li>• Social and rural isolation</li> </ul> <p>4.2b Government and NGO funding to services with older Tasmanians as clients needs routine evaluation with ‘markers’ of stress. E.g. COVID has increased and changed the workload of some services who are then too busy adapting to changes, to have time to call for help.</p> <p>4.2c Communication? On the one hand government is pilloried for not funding programs or pulling funding for no apparent reason; then criticised for being too intrusive. Make use of ‘elder-abuse champions’ for peer communication.</p> <p>4.2d Work with Tas.Ambulance and Tas.Police to identify IT ‘blackspots’ to ensure communication with older Tasmanians in rural areas and for service staff working off-site.</p> <p>4.2e Encourage service providers to budget for outreach costs in submissions (e.g. cost of travel and staff replacement when staff are off-site).</p>	<p>SAPEA_N: 1.4ii, 2.1iv, 3.1, 3.6ii, 3.6iii, 3.6iv and 3.7</p> <p>SAPEA_S: 3.6i and 3.6ii</p>

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	4.2f Review existing, state-wide transport services but there is already a need increase community transport for elderly.	
	4.2g Review and evaluate community awareness of MPC (multi-purpose health centre) in particular, and other services available to communities—physical and cultural.	
	4.2h It is not clear whether all MPC (or equivalent) have social workers. Should be reviewed particularly in areas of the State with proportionally older populations.	
<b>4.3 Without monitoring, government and services will not be able to efficiently respond to changes in demand</b>	4.3a Establish a state-wide complaints investigation body with power to investigate; adjudicate; make a determination; and enforce the determination.	SAPEA_N: 1.4ii, 3.4i, 3.6i,3.6ii, 3.6iv, 3.6v and 3.7
	4.3b Consider implementation of a ‘quality standard’ for elder abuse prevention state-wide to alert government to increasing demand on services. For example, monitor the number and type of calls to the Elder Abuse Helpline.	
	4.3c Evaluate national prevalence reporting for adaption to Tasmanian context.	
	4.3d State Government to liaise with Commonwealth aged care services for routine reporting of elder abuse against Tasmanians using aged care (residential and community) services.	SAPEA_S: 1.1, 3.4 and 3.6
	4.3e Networking and communication, for example via the elder abuse prevention ‘champions’, to improve service level understanding of the role of government in elder abuse prevention.	
	4.3f With input from key services, develop a monitoring system to alert government to increasing demand on services. For example, monitor the number and type of calls to the Elder Abuse Helpline.	
	4.3g State ministers take up with the federal Government remuneration for GPs so they are able to provide care for Tasmania’s ageing population.	

Numbering used in this Summary Document does not correlate to the numbering used in in the SAPEA Reports. Use the numbering from the ‘References’ column to find supporting evidence and context in the Reports.