

Our Silent shame, by author an Individual account of Our silent shame with an invisible accountability by way of legered error after legered error?

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Our silent shame?

The inability for everyday or ordinary Australians most importantly Australians in employed positions to comprehend complex issues is astounding. They are uninformed and frankly do not seem to possess the skills to problem seek and problem solve. Our story begins with my Uncle who an honest was hard working Australian, who made a very costly mistake when he sought a professional medical opinion after some of his immediate family pressured him to do so.

From that day forward his life has changed dramatically he has experienced what can only be described as a living Hell. And I want to share his story with you as I believe he deserves a second chance and most of all to show that there needs to be accountability regarding unregulated protocols.

The clock needs to be turned back to that day so he can start again, I have become very familiar with the system which has failed my Uncle, and have become aware through investigation that there is obvious and conclusive evidence that his Human Rights have been abused.

He has been Physically and Mentally harmed and his future Health has been impacted through a mostly unregulated Aged Care system. At this present time, he is held captive in a Lock Down Facility in a quiet and unassuming superb in the North side of Brisbane. And forced to take mind altering drugs, he is now at the stage of becoming what is called Institutionalised. He has been battered and bruised from resisting his predicament over past weeks and it seems through all of his Human trauma that his fate remains secured to a non-productive silent end.

I feel my role has now become his silent witness as I have been restricted from visiting him by the EPOA Health Care Professionals and the Public Guardian Trust has also made me aware that I have no legal rights to visit my Uncle.

Our story,

Older Australians are being Sedated Secluded and Restricted from living a normal active life through the use of Chemical and Physical Restraint known as Restrictive Practices. Common practices in what are termed Lock Down Facilities Respite Care or Aged Care Facilities. Seclusion rooms are used as a common treatments or techniques for pacifying Aged Australians.

Elderly Australians are physically restrained into Isolation rooms cold and alone as punishment for what is considered bad behaviour or more commonly out of routine behaviour. For instance, if an Adult is new to a facility it is common practice to achieve a good outcome through this kind of pacifying technique which is considered best practice for the safety of staff and other residents. For example, if a new patient creates too much of a demand on staff resources they have a sedation and isolation quick acting strategy designed in conjunction with fast acting oral sedative instruments.

These Ageing Australians are vulnerable have frail health from constant exposure to all kinds of bacteria viruses and disease including inadequate ventilation systems and poor hygiene standards in Care. Most adults are showered every second day if they are lucky a fairly normal statistic in Aged Care and Respite Facilities, this kind of breaking in technique is not acceptable and I am sure many other Australians would agree. Within the Australian Therapeutic Guidelines contains a very clear reference regarding the effects of antipsychotic medications on the Aged and Frail and warnings are also clearly listed in Material Safety Data Sheets regarding side effects and behavioural changes.

If Aged Australians have not received adequate Medical Management and treatment to stabilise their wellbeing and are abandoned into facilities such as Aged Care Homes Respite care and Lock Down Facilities. They should not become victims of aggressive dangerous protocols which also have long term Psychological effects on them regarding the ability to trust and feel safe in the setting they have been introduced into. I would go as far as to say that this strategy designed to break people into the environment to manage Staff routine,

untrained and clueless in any kind of pacifying techniques other than as mentioned above, seclusion and sedation.

If patients become aggressive from the inappropriate use of psychotics and are behaving in an aggressive or intrusive way towards staff and other residents the proper and correct solution should be to admit them into a Hospital where they have access to adequately trained staff with specialised equipment on hand. So, information can be gathered and behaviour patterns and medication can be reviewed by appropriately trained Health Professionals who have access and engage with guidelines such as The Australian Therapeutic Guideline pages.

These guidelines do not apply in Privately owned and funded and most importantly Accredited or self-auditing Aged Care Facilities, Respite Centres or Lock Down Facilities. Sedatives and other mind-altering drugs commonly used on Ageing Australians or Adults in Aged Care and Respite Care Facilities in Australia are also routinely used on Forensic Patients in Mental Health settings or Correctional Facilities under what is termed a Treatment order through the Mental Health Register.

For Elderly Australians in Aged Care or Respite Care the speediest option to seek a Restrictive Practices Order is to Register via the Public Guardian's Office, a Fast tracked no Fuss Register made available through the Disability and Respite services Scheme. The application for Restrictive Practices is available under Forms on the Public Guardian website. Form V1 Restrictive Practices Short Term Approval Form.

Any Certified Health Care or Aged Care provider or Practitioner can download the Form via the Public Guardian website. Most importantly any EPOA or group can also access this service for the use of Restrictive Practices to be administered to an Adult with the support of these types of Agents or Health Care Professionals.

The most valuable point relating to the use of Restrictive Practices are the types of psychotic medications that are routinely applied or prescribed to Ageing Australians. They have been found to have life threatening side effects which have been well documented by Drug makers. This information is found within the

MSDS or Product Information Sheets that are available with purchase of the product.

These types of psychotics are designed for the severest kinds of neurological conditions, it is repeatedly recorded within the recommendations or guidelines the severity of the medication and the risks and side effects, so one can imagine what kind of effect they are having on the Ageing and Frail. In most cases they are responsible for rapid degeneration in the Health of Ageing Australians and the Immature deaths of Adult Australians. They also have been found to contribute further complications to already existing health conditions.

They have also been known to be responsible for creating adverse and lasting Health complications, creating new conditions for Ageing Australians to manage on top of their original Health complaints. For example, Neuroleptic Malignant Syndrome, a life-threatening reaction from the overuse of Sedatives. Immune response degeneration and rapid weight loss is also leaving Older Australians susceptible to many other Viruses' Diseases and Bacteria along with associated infections such as GAS and TSS Health issues which can be fatal.

Ageing Australians inevitably also lose their independence and dignity they lose the ability to Feed themselves Walk independently Talk and share Meaningful Conversations. They lose the ability to control bodily Functions which can also lead to further effects on their Health. For example, laying soaked through in bed with their own urine and faeces leaving them at risk of developing infections. All of the above issues mentioned have been published and republished within respected Australian Medical Journals and Academic works along with recommendations for discontinuation of Psychotics in Aged Care.

It is seeming unfortunate that some Medical Professionals who are missing the Big picture are continually prescribing these kinds of medications instead of Treating their Patients real or underlying Health issues. A Proper Diagnostic consultation processes and screening for appropriate treatments for each individual patient seems to be a skill that is lacking by some Health Professionals. Consequently, leading to unnecessary risks for their patients and Ageing Australians.

Most Health Professionals would be offended by my Account but I can speak with Accuracy after having had firsthand experience with this very issue. I Insist that the system is letting Ageing Australians down and can confirm that Ageing Australians lives have been turned upside down and compromised by Unregulated Care Agencies and Health Professionals by way of a Self-Auditing criteria through the introduction of Accreditation schemes for Aged Care Facilities.

Until there is Reform surrounding networking between Healthcare Professionals acting as Agents for Private Aged Care providers that conveniently have a Self-Regulating business model. It will remain almost impossible for Ageing Australians to stand up for their basic Human Rights. The current system just does not work with people falling through the system and becoming trapped into what you could only describe as an Incarcerated Dictated Non-productive living environment, consequently losing their Freedom of lifestyle choices and Wellbeing.

Any kind of future or choice in how they live out the Entirety of their Natural lives is completely compromised by the financial interests of Investors using the current Systematic failures surrounding Ageing Australians Health care Regulation. Regrettably as a consequence using some wealthy or self-funded retirees to prop up their Investments.

There will continue to be a gross Misappropriation surrounding the Welfare of Ageing Australians because there is no Regulation to stop Health Professionals acting as Agents for the Aged Care sector and participating in the Misappropriation of these kinds of Treatment solutions and Criteria involving Restrictive Practices.

With no repercussions for Medical Professionals who take a stereotypical course of consultation and choose to categorise their patients by a Group or how they frequently refer to their Patients as for Your type of Diagnosis. Aged Australians will continue to be victims because of their Individual Personnel Circumstantial Vulnerabilities at a time when they need support.