

Can you hear me, can you respect me?

V 1.0.1

Are older people heard in our hospital system



AdvocateNT.AU

Stand up, speak out - silence is never a solution

Introduction

There is nothing worse when attending a hospital and facing:

- Ageist language (exclusion);
- A medical professional cutting you short, listening issues;
- Suggestions that you are too old for medical treatment, Ageist assumptions;
- Medical person talking exclusively with a carer, partner rather than the patient.

Ageist Language - what is it?

- Ageist language can or does invoke harmful stereo types of older people.
- It can play negative impacts on policy, attitudes, employment, healthcare and other opportunities for older people.
- Using Ageist terminology in healthcare and hospitals often results in the older person feeling hopeless and excluded from services and care that healthcare rights should include to all persons.

Ageist Language - what is it?

- Ageist language excludes older people from the rest of the population.
- Ageist Language includes but not limited to words such as “elderly”, “seniors” or “the aged”, and we are all guilty of using such language.
- We must transition away from ageist language and put the person first, included and positive to ensure the best use of resources and best outcomes for all persons.

Ageism in our hospitals

- Hospital management taking authoritative lead over a patient's health.
- Ignoring patient complaints regarding pain, discomfort, life impact as a result of a procedure or treatment.
- Hospital management refusing to answer questions from older patient (driven by ageism) or providing obviously incorrect facts or answer to obfuscate responsibility.

Ageism in our hospitals

- Medical professionals must take the time to listen to the patient, health impacts are important to the older person, clinical symptoms are only part of the diagnosis and treatment.
- Health services that are time based and not outcome based will cause harmful results for the older person, can cause hopelessness and serious wellbeing life impacts.
- Detailed reporting (that's truthful) by Allied Health services must be transferred to the older persons referring medical professional.



Ageism in our hospitals

- If any patient reports that they are in pain, then they are in pain. It is not acceptable for example in physiotherapy, to ignore this complaint without investigation and modification.
- Hospital personnel and management (including executive) must never blame the patient of any age for reporting mistreatment, pain, discomfort or feeling threatened.
- Hospital personnel should listen and acknowledge what the patient is saying without dismissing their concerns.

Honour the Australian charter of healthcare rights

- 1. ACCESS - Healthcare services and treatment that meets my needs
- 2. SAFETY - Receive safe and high quality health care that meets the national standards. Be cared for in an environment that is safe and makes me feel safe.
- 3. RESPECT - Be treated as an individual, and with dignity and respect. Have my culture, identity, beliefs and choices recognised and respected.

Honour the Australian charter of healthcare rights

- 4. PARTNERSHIP - Ask questions and be involved in open and honest communication. Make decisions with my healthcare provide, to the extent that I choose and I am able to.
- 5. INFORMATION - Clear information about my condition, the possible benefits and risks of different tests and treatments, so I can give my informed consent. Receive information about services, waiting times and costs. Be given assistance, when I need it, to help me to understand and use health information. Access my health information. Be told if something has gone wrong during my heathcare, how it happened, how it may affect me and what is being done to make care safe.

Honour the Australian charter of healthcare rights

- 6. PRIVACY - Have my personal privacy respected. Have information about me and my health kept secure and confidential.
- 7. GIVE FEEDBACK - Provide feedback or make a complaint without it affecting the way that I am treated. Have my concerns addressed in a transparent and timely way. Share my experience and participate to improve the quality of care and health services.

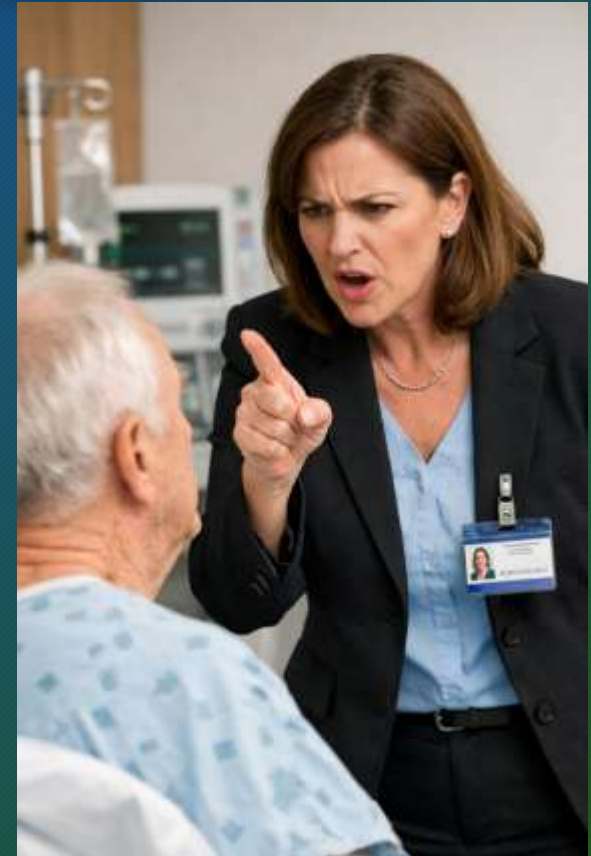
Case Study - Public Hospital & Allied Health

- Open discussion from lived experience
- The patient experience
- Surgery experience
- Post surgery and reports of pain
- Allied health communication and delays
- Complaints process and response



Case Study - Public Hospital & Allied Health

- Allied health response
- Hospital General Manager retaliatory response
- Still not addressing patients pain
- Group discussion



Speaking engagements

Craig Hubbard is available for speaking engagements.

Contact us at <https://advocateNT.au>

- ✓ Older person abuse
- ✓ Workplace Abuse
- ✓ Lived experiences

