



# Reportable incidents: psychological or emotional abuse

## Serious Incident Response Scheme

A fact sheet for providers of residential care and flexible care in a residential aged care setting

### **The Serious Incident Response Scheme (SIRS) helps prevent and reduce the risk of incidents of abuse and neglect in residential aged care services subsidised by the Australian Government.**

Under the SIRS, all incidents and near misses should be recorded in a provider's incident management system (IMS) to ensure a timely and appropriate response that minimises impact, supports those affected and reduces the risk of recurrence.

There are eight types of reportable incidents that must be recorded in a provider's IMS and reported to the Aged Care Quality and Safety Commission (the Commission).

This fact sheet covers reporting of incidents relating to psychological or emotional abuse.

### **What is psychological or emotional abuse?**

Psychological or emotional abuse of a consumer includes conduct by any person, including staff, volunteers or other consumers that has caused, or that could reasonably have been expected to have caused, the consumer psychological or emotional distress. Examples include:

- taunting, bullying, harassment or intimidation
- threats of maltreatment

- humiliation
- unreasonable refusal to interact with the consumer or acknowledge the consumer's presence
- unreasonable restrictions on the consumer's ability to engage socially or otherwise interact with people
- repetitive conduct or contact which does not constitute unreasonable use of force, but the repetition of which has caused, or could reasonably have caused, the consumer psychological or emotional distress.

In addition to single event incidents, such as someone yelling at a consumer, this category includes incidents that are part of a pattern of abuse. In these cases, while the behaviour may not cause significant harm or suffering to the consumer in each instance, the repetitive nature of the behaviour has a cumulative effect which intensifies the level of harm to the consumer or consumers.

Some examples of what does and does not constitute psychological or emotional abuse can be found in the table on [page 3](#). These examples are a guide only. If an incident occurs, you should carefully consider all the information and circumstances when deciding whether psychological or emotional abuse has occurred, particularly the impact on the consumer.

## What are some of the possible signs of psychological or emotional abuse?

There may be warning signs that may indicate that a consumer has experienced psychological or emotional abuse even if the event is not witnessed. These include:

- depression, withdrawal, crying or emotional behaviour
- being secretive
- trying to hide information and personal belongings
- speech disorders
- weight gain or loss
- feelings of worthlessness about life and themselves, low self-esteem
- self-abuse, self-destructive behaviour, suicidal ideation
- attention-seeking behaviour, disruptiveness, aggressiveness
- being overly compliant with staff.

## How to respond to psychological or emotional abuse

If there is an occurrence, allegation or suspicion of a consumer experiencing psychological or emotional abuse, you must immediately ensure their safety and wellbeing. This may include arranging medical or psychological assistance. Depending on the nature of the incident, you may also need to contact the police.

All details of the incident must be recorded in your IMS. The IMS must be able to record incidents in a way that allows for repeated minor instances of these types of behaviour to be identified easily so that any pattern of abuse can be recognised and notified as a single reportable incident.

## Reporting psychological and emotional abuse to the Commission

All incidents involving psychological and emotional abuse must be reported to the Commission; the timeframe for this report depends on the impact on the consumer. You must determine whether the incident is a Priority 1 or Priority 2 reportable incident.

[agedcarequality.gov.au](http://agedcarequality.gov.au)

### A Priority 1 reportable incident is a reportable incident:

- that caused, or could reasonably have been expected to have caused, a consumer physical or psychological injury or discomfort that requires medical or psychological treatment to resolve
- where there are reasonable grounds to report the incident to the police
- that involves unlawful sexual contact or inappropriate sexual conduct, the unexpected death of a consumer or a consumer's unexplained absence from the service.

You must notify the Commission of a Priority 1 reportable incident within 24 hours of becoming aware of the incident.

### A Priority 2 reportable incident is a reportable incident:

- that does not meet the criteria for a Priority 1 reportable incident.

You must notify the Commission of a Priority 2 reportable incident within 30 days of becoming aware of the incident.

The Commission considers medical or psychological treatment to include *the application of medical treatment or psychological treatment to cure a disease or condition or, to treat and resolve physical or psychological injury or discomfort.*

In all cases, you should continue to give the consumer support and practise 'open disclosure' by explaining what happened and what actions you are taking to respond to the incident.

## How can I find out more?

The Commission has published a suite of fact sheets about each type of reportable incident. To access these fact sheets and detailed guidance relating to the SIRS and incident management systems, visit [agedcarequality.gov.au/sirs](http://agedcarequality.gov.au/sirs).



## Examples

What is psychological or emotional abuse?	What is not psychological or emotional abuse?
<ul style="list-style-type: none"> <li>• Yelling, name calling, bullying or harassing a consumer</li> <li>• Humiliating or intimidating a consumer</li> <li>• Making threatening or aggressive gestures towards a consumer or feigning violence</li> <li>• Unreasonably ignoring a consumer, threatening to withhold care or services from a consumer or threatening to mistreat a consumer</li> <li>• Unreasonably refusing a consumer access to care or services (including as a punishment)</li> <li>• Taunting, making disparaging comments about a consumer’s gender, sexual orientation, sexual identity, cultural identity or religious identity or constantly criticising a consumer</li> <li>• Repeatedly flicking, tapping or bumping a consumer (which of itself does not constitute physical assault but the repetitive nature causes psychological or emotional anguish, pain or distress)</li> <li>• Any action inflicted on a consumer where the individual is knowingly causing anguish or distress to a consumer (for example calling a consumer by the wrong name or ignoring a consumer’s expressed [and reasonable] preferences)</li> </ul>	<ul style="list-style-type: none"> <li>• A person raising their voice to attract attention or speak with a consumer who has hearing difficulties</li> <li>• Minor disagreements between consumers.</li> <li>• Making reasonable requests of a consumer to enable the safe and effective delivery of care and services for example, asking a consumer to cooperate or encouraging a consumer to eat their dinner</li> </ul>

The above table is not an exhaustive list of examples – it is a guide only. You should assess each incident on an individual basis.

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