

# Kerosene baths reveal systemic aged care crisis in Australia

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10 March 2000

Every day this week has brought new and harrowing reports of elderly residents in Australian nursing homes being seriously maltreated.

The revelations began when news leaked out that a nursing home in an outer Melbourne working class suburb had subjected its 57 patients to kerosene baths. Several suffered second-degree burns and blisters. One woman, aged 84, died two days later. The bathing had been ordered to control an outbreak of scabies, a skin disease.

The news provoked widespread outrage from the families of people in care. Reports of similar horrors across the country followed as health workers, relatives and pensioner groups seized on the rare media attention to speak out.

On January 17 the federal Department of Health and Aged Care had received complaints from nursing staff at the care-for-profit Riverside Nursing Home about the kerosene baths and other ill-treatment of residents. It was not until the complaints received media coverage three weeks later, however, that the department referred the matter to the Aged Care Standards and Accreditation Agency, and inspectors were dispatched to investigate. Aged Care Minister Bronwyn Bishop claimed not to know of the facts until mid-February.

It soon emerged that last year nursing staff at Riverside had lodged complaints about shortages of bed linen and medical supplies, and weevil-infested food, among other things. Despite Riverside failing on 26 out of 29 case standards, the government excused the breaches, closing its file four months later. That decision was consistent with the government's record of never having withdrawn a nursing home licence.

On February 22, facing mounting public outcry and media attention, Bishop and the government initially sought to bury the issue by quietly withdrawing federal subsidies from the home without any public announcement.

As more details continued to emerge, the government suddenly ordered the closure of Riverside last Monday. It did not consult the 57 residents or their families, nor did it give them notice of the decision. Most of the patients were left with no choice but to transfer to a hospital 40 kilometres away in the centre of Melbourne.

Anguished patients, relatives and staff bitterly accused the government of further endangering the lives and welfare of the residents. Many of the residents' loved ones, often elderly themselves, will have no means of travelling to the hospital to make visits.

In a bid to justify its sudden reversal, the government released the Aged Care Accreditation Agency's report on Riverside. That report, however, showed a protracted pattern of mistreatment to which the government had clearly turned a blind eye for years.

Bandages for wounds were so scarce that "dressings that are leaking

fluids or falling off are patched up". There was "ongoing risk that residents' open wounds can become flyblown and infested with maggots". Soiled dressings were left in bathrooms; soiled bandages and towels were washed with the residents' laundry; urine-stained foam mattress overlays were stored with clean linen; and fly-screens were missing. Cornflour was applied to residents' skin to treat itchiness.

Of the 46 residents reviewed, "six have confirmed dehydration, nine others have possible dehydration, 15 have recorded increasing episodes of aggression, confusion, depression, fainting or loss of consciousness, 13 have recorded infections such as conjunctivitis, cellulitis, diarrhoea, urinary tract infections and infected wounds (and two residents have chest infections."

In the single worst case, a woman's broken arm had been undetected for a week, misdiagnosed as simply a reaction to an influenza injection.

Only the determination of the nurses forced the conditions at Riverside into the open. One nurse told the media that nursing staff had "fought against" the kerosene baths, which had been ordered by the supervising nurse. Nurses were now afraid that they would be viewed as "monsters".

Adelaide Ericksen, a registered nurse who formerly worked at Riverside, told the *Australian* that nurses worked there in a climate of fear. There was also a sense of panic among patients that they might not receive their medication. She had left after a senior nurse forbade her to administer oxygen to a woman whom she had revived after choking. Describing her experience, she said: "It was dreadful, disgusting. I felt sorry for the patients but I just won't go back. I'll never go back to any nursing home again."

Prime Minister John Howard has adamantly defended his minister, Bishop, and denied the existence of any nursing homes crisis. "I don't accept it's a crisis," he said on the Australian Broadcasting Corporation (ABC) *Lateline* TV program. "I mean that is just a ridiculous exaggeration. It is a very sad and regrettable incident concerning one nursing home."

Yet a litany of reports has surfaced in the media about conditions in other nursing homes, indicating that the problem is systemic. Bishop acknowledged that her department had received over 4,000 complaints in the last two-and-a-half years.

The day after the government shut down Riverside, it admitted to allowing a nursing home to keep operating in Gladstone, central Queensland last November, despite complaints from relatives and nurses. Three residents died soon after from gangrene and dehydration.

In a letter tabled in parliament, a Gladstone Hospital nurse said

hospital staff had been appalled and moved to tears at the state of one of the patients, who arrived from the Alchera Park Nursing Home with numerous pressure sores, dehydrated, barely conscious, anemic and with a bowel obstruction and pneumonia. His dressings had been “pitiful” and he died the next day.

In another example, a woman told the Melbourne *Age* that her elderly father, a resident at the Bellevue nursing home in suburban Oakleigh, was just “waiting to die” as the home no longer organised any activities for the residents. She had seen people at the home left lying in beds soiled with faeces and vomit, a patient whose wounds had become infested with maggots and others who had developed mouth infections due to poor denture hygiene.

Ted Quinlan, a spokesman for the Pensioners and Superannuants Action Group, told the ABC: “If you go to some of these nursing homes the stench where they’re lying in their own body waste is appalling. Some of the people are just left there without drinking fluids, their food is put in front of them. They wouldn’t know what day it was.” The group had lodged a complaint with the UN Human Rights Commissioner, citing cases of neglect and overcharging.

According to the government, 135,000 people live in residential care in 3,000 homes and hostels throughout Australia. Two-thirds of the institutions are corporate-controlled businesses, with most of the rest operated by churches and charities. The government spends \$3.5 billion each year on subsidies.

In 1997, when the Howard government introduced its Aged Care Act, it claimed that higher fees and bonds would provide the incentive for investors to expand and improve the industry. Instead, conditions in nursing homes have deteriorated while the average waiting time has lengthened from two weeks to six, with much longer queues in some areas.

Under the Act, nursing home operators no longer have to allocate a set proportion of government subsidies to patient care. Links between the level of funding received and the number of qualified staff employed were removed. In 1998 the previous requirement for a registered nurse to be on duty was scrapped.

Homes and hostels were to be licensed for three years, with standards monitored through spot checks. Yet no such checks were ever conducted, Bishop admitted this week. According to Tim Burns, the general manager of the Aged Care Standards and Accreditation Agency, its ability to carry out monitoring was severely compromised due to insufficient funding. He stated during Senate estimates hearings that the agency was 60 to 65 external assessors short in New South Wales and Victoria alone.

The Aged Care Act specifies that audit reviews of nursing homes be made public on a regular basis. However, late last year a list rating nursing homes was removed from the Aged Care Standards and Accreditation Agency’s web site. A list of the 18 “worst” homes has reappeared on Nancy’s Aged Care site, denounced by Bishop as a “rogue” site. She claimed the material had been removed from the “official” site in order “not to put undue pressure on homes, which may be rapidly moving to improve their situations”.

The government’s changes have made the industry a more lucrative target for corporate takeovers. Under the headline, “Golden Oldies,” the *Sydney Morning Herald* reported on March 2 that “Nursing homes are big business, with handsome profits, for some”. American-based corporations are “moving into Australia to capitalise on a growth industry protected by an assured flow of government funds”.

A US-based real estate investment trust, Omega Health Care Investors, in connection with AMP Life Limited is seeking to buy

nursing homes in order to lease them back to operators. It has already bought 40 properties since 1998, including 30 formerly owned by Australia’s largest operator, Doug Moran. Managing director Kevin Moss said: “Once you are in the business you have a guaranteed government income. It’s a very good business. It’s been a cottage industry in Australia ... and some have milked the cow. But we are trying to get it more corporatised and professional.”

Commenting on the corporate interest in the aged care market, Francis Sullivan, executive director of Catholic Health Australia, a major charitable nursing home proprietor, said: “This shows the money is in renting out facilities; you can’t make it from providing care. This is the sadness of the whole show.” He said government funding was inadequate and had failed to keep up with rising costs.

Having been given cash to spend as they see fit for the past three years, business operators are now free to exit the industry before January 1, 2001, the next accreditation deadline, without having invested a cent in improvements. They will be able to continue to operate until January 1 and then sell their bed licenses for up to \$35,000 each, the going price on the Sydney market.

The doctors’ organisation, the Australian Medical Association, and the nurses’ union, the Australian Nursing Federation, have warned that between 600 and 2,500 beds will close on January 1 in the state of Victoria alone, intensifying the crisis.

In condemning the government and calling for Bishop’s resignation, the Labor Party opposition has avoided any reference to its own record.

The last Labor government, headed by Paul Keating, cut \$250 million from aged care in the 1994-95 budget. Led by former minister Carmen Lawrence, it also pioneered the application of the “user pays” regime to aged care by imposing higher fees and introducing entry bonds on residents in aged hostels. The Howard government simply deepened the cuts by slashing \$1 billion in the 1996-97 budget and lifting nursing homes fees and entry bonds.

Professor Bob Gregory compiled a report for the Keating government detailing filthy, sub-standard and over-crowded conditions throughout the country, with many poorer residents crammed into rooms with four beds or more. His report estimated that \$1 billion was needed to provide adequate standards.

Like every other aspect of life, aged care has become an increasingly two-class system. High quality homes with modern facilities, strict medical and hygiene standards, fresh and nourishing food and tranquil surroundings exist—but they are reserved for the wealthy who can afford fees in the order of \$900 a week and entry bonds around \$250,000. For lower middle class and working class retirees, the conditions have become Dickensian.

Increasingly stripped of all protective and regulatory remnants of the post-war welfare state, the unleashing of the “free market” is producing conditions where the majority of elderly people are treated as so much unwanted refuse. Medical science has significantly increased life expectancy, but, under the imperatives of the profit system, those who suffer the misfortune of being poor are simply being disposed of as cheaply and quickly as possible.



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