Elder Abuse Staff Training Record

Section 1 – Staff member’s certification

I the undersigned confirm having viewed the video presentation and read the “Elder Abuse FACT sheet” that I understand my obligations in relation to Elder Abuse and can confidently answer the following questions:

- **What is the time frame for reporting Elder Abuse?**
  Circle the correct response.
  
  I. 24 Hours  
  II. 48 Hours  
  III. 72 Hours

- **What is the name of the legislated Act for Elder Abuse?**
  Circle the correct response.
  
  I. Elder Abuse Act 1997 (Amended 2007)  
  II. Aged Care Act 1997 (amended 2007)  
  III. Aged Care Act 2010

- **What are the types of elder abuse?**
  Circle all that apply.
  
  I. Financial  
  II. Communal  
  III. Physical  
  IV. Social  
  V. Emotional  
  VI. Familial  
  VII. Sexual

- **Select True or False for the following statement.**
  “Elder abuse is more common in the community/home setting”

  True [ ]
  False [ ]

Complete the declaration on the following page.
**Elder Abuse Staff Training Record**

I understand my responsibilities in relation to Elder Abuse?
As a Queensland Health employee, I am able to apply these principals in the workplace?

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Department</th>
<th>Facility</th>
<th>Payroll Number</th>
<th>Stream (eg Admin)</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

**Section 2 – Line manager certification**

I confirm the above named staff member has viewed the video presentation and read the “Elder Abuse FACT sheet” and has adequately answered the above questions in relation to Elder Abuse.

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Position</th>
<th>Title</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

Please forward this form to your designated data entry person for addition of training records to the Mandatory Training Register. This record must be kept with Department/Service Line of origin, in the building in a locked metal filing cabinet or in electronic form.