



27 October 2021

Inquiry into vaccine related fraud and security risks
Parliamentary Joint Committee on Law Enforcement
le.committee@aph.gov.au

Dear Sir/Madam

Inquiry into vaccine related fraud and security risks

Thank you for the opportunity to provide comment to the inquiry into vaccine related fraud and security risks.

ACSA is the leading national peak body supporting not for profit church, charitable and for purpose providers of retirement living, community, home and residential care for more than 450,000 older Australians.

ACSA is responding to section (b) of the Terms of Reference of the Inquiry.

Of particular relevance to the aged care sector is the use of fake vaccine certificates. This follows from the requirement that residential aged care workers be vaccinated against COVID-19 from 17 September 2021. As at 27 October 2021, the Victorian, Northern Territory, New South Wales and Australian Capital Territory state governments have also announced that COVID-19 vaccination will be mandatory for in-home and community aged care workers.

ACSA is concerned that there may be adverse implications for the aged care sector from the use of fake vaccine certificates. Of particular concern is the employment of potentially unvaccinated aged care workers, which would create increased vulnerability for older persons who are consumers of aged care as well as creating risk for providers not meeting Public Health Orders requiring workers to be vaccinated. Aged care providers need to be confident in the integrity of vaccine certificates supplied by aged care workers.

To maximise the protection of aged care consumers from COVID-19, the Australian Government should introduce penalties for use of fraudulent certificates as a deterrence. Furthermore, the Australian Government can continue to ensure that robust technology is in place as a safeguard. For example, enabling aged care workers to readily access clear evidence of their vaccinations, such as through direct access to the National Immunisation Register. In addition, informational materials should be developed and published to assist providers in recognising fake certificates and processes implemented to allow providers to report concerns.



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In conclusion, ACSA expresses concern over the potential adverse impacts that may arise in the aged care sector from the emergence of fake vaccine certificates and encourages action to deter their use. Ensuring the authenticity of vaccine certificates is needed to maintain and protect the health and safety of the ageing population as consumers of aged care.

Thank you for your consideration.

Yours sincerely



Paul Sadler

CEO

Aged & Community Services Australia