



Partners in Quality Care

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Learning Objectives:

Statistics on abuse and neglect

Define abuse and neglect

Recognizing and reporting signs of abuse and neglect

"It was once said that the moral test of government is how that government treats those who are in the dawn of life, the children; those who are in the twilight of life, the elderly; and those who are in the shadows of life, the sick, the needy, and the handicapped."

— **Hubert H. Humphrey**

Recognizing and Reporting Signs of Abuse and Neglect

It is hard to think about an elderly person, a disabled person or a child being abused or neglected, but unfortunately this type of abuse happens. There are individuals who are considered vulnerable to abuse and neglect. Frailty, or dementia, or an age or condition that requires dependence on another person, means that someone is vulnerable and puts them at risk for abuse or neglect at the hands of another individual. While abuse can happen to anyone, this newsletter will focus on elder abuse and/ or abuse of a disabled person.

The abuse and neglect could be at the hands of family, personal caregivers, paid caregivers, unscrupulous business people, financial scammers, and others who may prey on vulnerable individuals. A person who is lonely may also be a victim of abuse and neglect at the hands of someone who may take advantage of the person's emotional state.

Abuse Statistics from the US Department of Justice



ELDER ABUSE

Abuse can happen to anyone, no matter the person's age, sex, race, religion, or ethnic or cultural background. Each year, hundreds of thousands of adults over the age of 60 are abused, neglected, or financially exploited. This is called elder abuse.

Abuse can happen in many places, including the older person's home, a family member's house, an assisted living facility, or a nursing home. Elder abuse can be defined as "a single, or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person". *Elder abuse can take various forms such as financial, physical, psychological and sexual.* It can also be the result of intentional or unintentional neglect.

Most victims of abuse are women, but some are men. Likely targets are older people who have no family or friends nearby and people with disabilities, memory problems, or dementia. Abuse can happen to any older person, but often affects those who depend on others for help with activities of everyday life, including bathing, dressing, and taking medicine. People who are frail may appear to be easy victims.

TYPES OF ABUSE

Physical abuse happens when someone causes bodily harm by hitting, pushing, or slapping. This also could include confining an adult against his/her will, such as locking someone in a room or tying him/her to furniture.

Emotional abuse, sometimes called **psychological abuse**, can include a caregiver saying hurtful words, yelling, threatening, or repeatedly ignoring the older person. Keeping that person from seeing close friends and relatives is another form of emotional abuse. This includes insults, yelling or threats of harm and/or isolation, or non-verbal actions such as throwing objects or glaring to project fear and/or intimidation.

Neglect occurs when the caregiver does not try to respond to the older person's needs. Neglect can take the form of withholding food, medications or access to health care professionals.

Abandonment is leaving a senior alone without planning for his or her care, involves desertion by anyone who assumed caregiving responsibilities for an adult.

Sexual abuse involves a caregiver forcing an older adult to watch or be part of sexual acts, includes physical force, threats or coercion to facilitate non-consensual touching, fondling, intercourse or other sexual activities. This is particularly true with vulnerable adults who are unable to give consent or comprehend the nature of these actions.

Financial Abuse happens when money or belongings are stolen. It can include forging checks, taking someone else's retirement and Social Security benefits, or using another person's credit cards and bank accounts. It also includes changing names on a will, bank account, life insurance policy, or title to a house without permission from the older person.

SIGNS OF ABUSE AND NEGLECT

Anytime you suspect a person is being abused or neglected, you should report your observations to your appropriate supervisor per your agency/facility policies. Some signs to observe are below. Reports can also be made to Adult Protective Services in your state. If you witness a life-threatening situation involving a senior or adult with disabilities, immediately call 911.

- ▶ *Has trouble sleeping*
- ▶ **Seems depressed or confused**
- ▶ *Loses weight for no reason*
- ▶ **Displays signs of trauma, like rocking back and forth**
- ▶ *Acts agitated or violent*
- ▶ **Becomes withdrawn**
- ▶ *Stops taking part in activities he or she enjoys*
- ▶ **Has unexplained bruises, burns, or scars**
- ▶ *Looks messy, with unwashed hair or dirty clothes*
- ▶ **Untreated pressure ulcers (bed sores)**
- ▶ *Having to lie in feces or urine*

Involuntary Isolation- A terrible form of abuse that **fits under more than one category** is **involuntary** isolation. This is when the family keeps the elderly client at home, under the appearance of wanting to care for the client and keep him or her out of a nursing home. The client often is kept alone in a room with very little contact and no means of contacting the outside world. The family may change a soiled diaper now and then, but the elderly client is not treated as part of the family. They are seen as a burden, and perhaps a paycheck. Their money is taken and they have no access to other people, their funds, friends, services, etc.

- ➔ Adult Protective Services and other agencies have trained professionals to investigate suspected abuse and neglect. When someone makes a report, you do not need to prove that abuse is occurring; it is up to the professionals to investigate the suspicions.

ELDER SELF-NEGLECT

- ▶ Self-neglect is characterized by poor hygiene, unsanitary living conditions, and inattention to basic and healthcare needs.

ELDER SELF-NEGLECT WARNING SIGNS

- ▶ Poor personal hygiene
- ▶ Poor medication management
- ▶ Signs of dehydration, malnutrition, or other unattended health conditions
- ▶ Unsanitary or very unclean living quarters
- ▶ Signs of unpaid bills, bounced checks, or utility shut offs
- ▶ Lack of adequate food in house or signs of weight loss
- ▶ Persistent inattention to personal hygiene and/or environment
- ▶ Repeated refusal of some/all indicated services that can reasonably be expected to improve quality of life
- ▶ Self-endangerment through the manifestation of unsafe behaviors (e.g., persistent refusal to care for a wound, creating fire hazards in the home)

WHO IS AT RISK?

Elder abuse can occur anywhere – in the home, in nursing homes, or other institutions. It affects seniors across all socio-economic groups, cultures, and races. Based on available information, women and “older” elders are more likely to be victimized.

Dementia is a significant risk factor. Mental health and substance abuse issues – of both abusers and victims – are risk factors.

Isolation can also contribute to risk.

The Abusers

Most older victims are abused by someone they know and trust or would expect to trust:

- Family members
- Spouses or partners
- Caregivers (family, paid staff or volunteers)
- Persons in positions of trust/authority

Some target older adults for their age and perceived or real frailty:

- Strangers

Victims Living in Facilities are Abused By:

- Caregivers and other facility staff and volunteers
- Other residents
- Spouses and partners
- Family members
- Strangers

Most nurse aides are caring compassionate workers with good intentions. However, there are times when the aide becomes the abuser. Reach out to your supervisor if you are feeling overwhelmed with a client. Reach out before you burn out!

All long-term care residents have the right:

- To receive quality, individualized care
- To be protected from mistreatment, including abuse, neglect, and exploitation.

Quality care promotes resident dignity, choice, and self-determination in all aspects of life and care.

Individuals living in nursing homes and assisted living facilities maintain the same rights as individuals in the larger community and have additional rights and protections in federal and state law. Nursing homes must meet federal requirements if they participate in Medicare and Medicaid.

There are no federal regulations for assisted living facilities so requirements are different in each state.

All residents have the right to live in a safe environment that supports each resident’s individuality and ensures they are treated with respect and dignity.

Invasion of a resident’s personal space is an example of mistreatment.

Fact sheets and information regarding residents’ rights, abuse, and advocating for quality care are available on the Consumer Voice website:

www.theconsumervoic.org

- *Be mindful of the signs in recognizing client/resident abuse and neglect*
- *Report your observations*
- *Know your agency/facility policies and procedures for recognizing and reporting client/resident abuse and neglect*

REPORTING:

- ▶ Know also that in many states, medical workers are mandated to report any suspected abuse
- ▶ When meeting with your supervisor to discuss a suspected issue, try to have as much information as possible – e.g. names of anyone involved, type and extent of suspected injury or issue, etc.
- ▶ Your supervisor may have to call a reporting agency, or Adult Protective Services (APS) to have them determine allegation(s). One of those agencies will then determine if they will investigate the suspected abuse
- ▶ *NC requires mandatory reporting- your state laws may be the same*
- ▶ Sometimes it could be the aide who is causing harm to the patient such as abuse, neglect, financial exploitation.
- It is important to know the specific laws in your state to ensure you understand your employer responsibilities related to personnel hiring and protection of the public**
- ▶ **Your agency/facility has responsibilities to report staff that is accused of abusing or neglecting client’s/resident’s or other offenses such as stealing the client’s/resident’s money, medications, and other reportable offenses**

References- National Adult Protective Services Association -<http://www.napsa-now.org/get-informed/what-is-abuse/> (accessed 2/19/18).

Put a stop to poor care brochure at <https://ncea.acl.gov/resources/docs/STOP-Poor-Care-Brochure-Print.pdf> (accessed 2/26/18);

AHHC webinar- *The Aide’s Role in Recognizing & Reporting Patient Abuse*, Kathie Smith, RN, VP of State Relations, Home & Community Based Care Association for Home & Hospice Care of NC - January 11, 2018;

The National Consumer Voice for Quality Long Term Care-<https://ncea.acl.gov/resources/docs/RRM-Brochure-2014.pdf> (accessed 2/26/18);

National Center on Elder Abuse (NCEA) Elder Abuse Overview 2013 ppt. presentation-An Introduction to Elder Abuse for Professionals: Overview.