

An Introduction to Elder Abuse for Nursing Students



CENTER OF EXCELLENCE
ON ELDER ABUSE AND NEGLECT
UNIVERSITY of CALIFORNIA, IRVINE

UCIRVINE | NURSING
SCIENCE
The heart and science of healthy communities

Created by: Faculty at the University of California, Irvine Program in Nursing Science and staff at the Center of Excellence of Elder Abuse and Neglect in the Program in Geriatrics, University of California, Irvine with funding from UniHealth Foundation

Voices of Survivors: A Mother in NY

- “I never thought it would happen to me. For me to come forward, I was ashamed. I was feeling like it was my fault because I raised him.”



ElderJusticeNow.org by the **WITNESS Project**

Voices of Survivors: A Patient in TX



- “You lose your trust in people when they do you this way. And you don’t want to get close to another person and call them a friend. You’re afraid of it.”

—*Carolyn , age 90, from Houston TX*

Learning Objectives



By the end of this presentation, participants will:

- Recognize signs and symptoms of elder and dependent adult abuse and neglect**
- Be able to identify resources for reporting suspected abuse and neglect**
- Understand how to talk with possible victims**
- Develop an awareness of the potential that your patient might be experiencing abuse or neglect**

Caution

- ❑ **Content and examples may be hard or painful to talk about**
- ❑ **Graphic images and descriptions**
- ❑ **Please practice self-care**



Pre-test Questions

1. Which population group is the fastest growing in the U.S.?
A. Children B. Teens C. Elders D. Women

2. Elder abuse most commonly occurs in nursing home and residential care facilities? True or False

3. Nurses do not need to report elder abuse unless they are *sure* that abuse has occurred. True or False

4. Suspected elder abuse *in the community* should be reported to _____.

5. Three types of elder abuse are (list at least three):
_____ and _____

Questions continued

6. Which of these is NOT an example of possible elder abuse?

- A) Although patient complains of pain, the caregiver rarely provides pain meds (prescribed PRN) to patient
- B) Family member responsible for providing care leaves bedbound person unattended all day
- C) Patient with severe dementia is left alone for long periods of time without supervision.
- D) Adult child refuses to have a baby in order to provide parents with the grandchild that they deserve

Why talk about Elder Abuse?



Nurses are frontline staff who will see signs of abuse/neglect

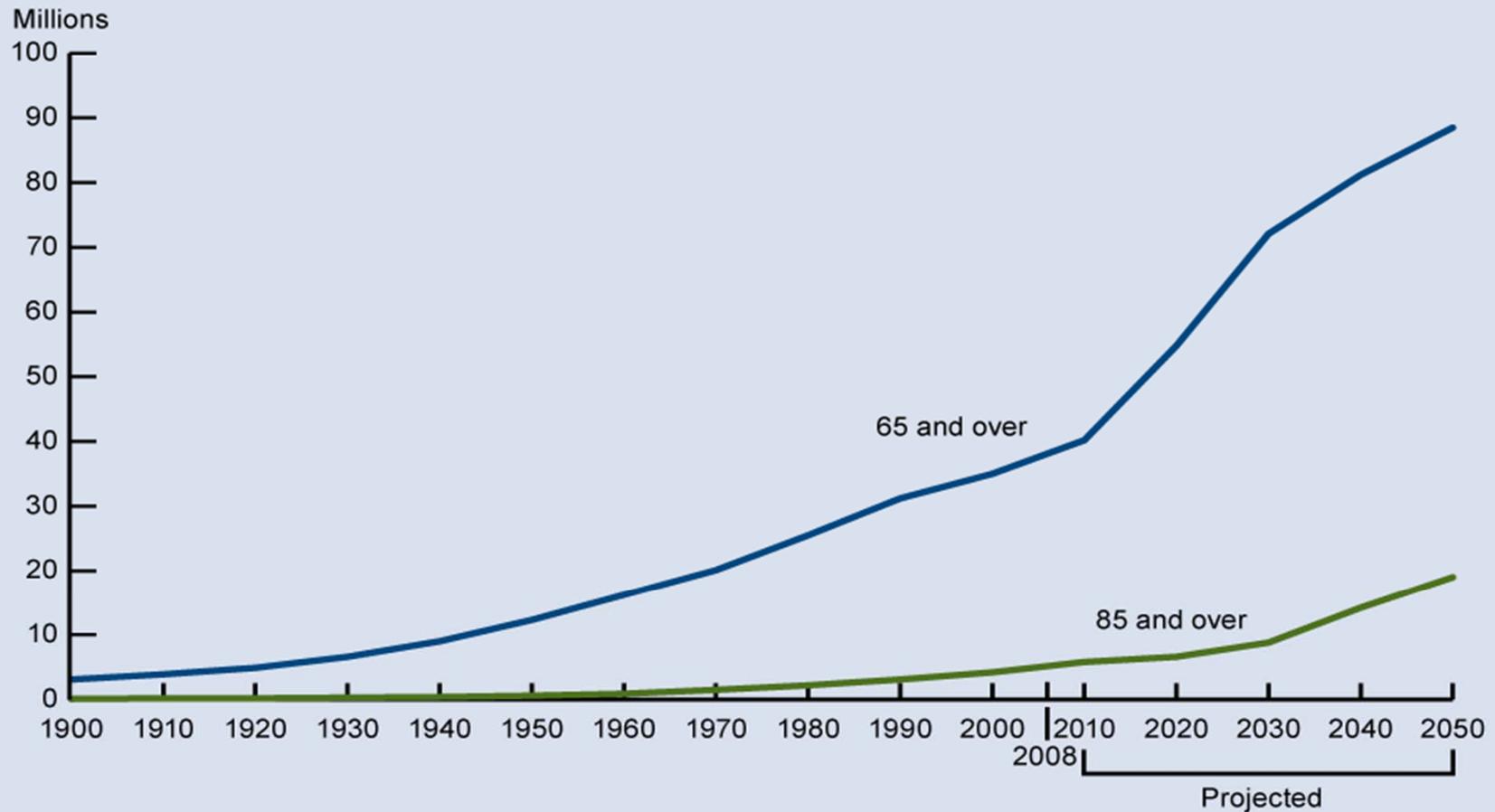
Nurses are mandated to report to Adult Protective Services

Nurses can help to PREVENT elder abuse from happening

Reports of elder abuse are on the rise

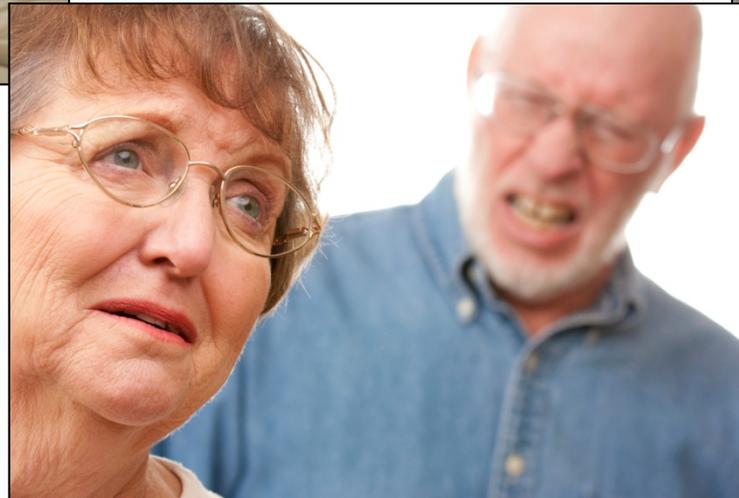
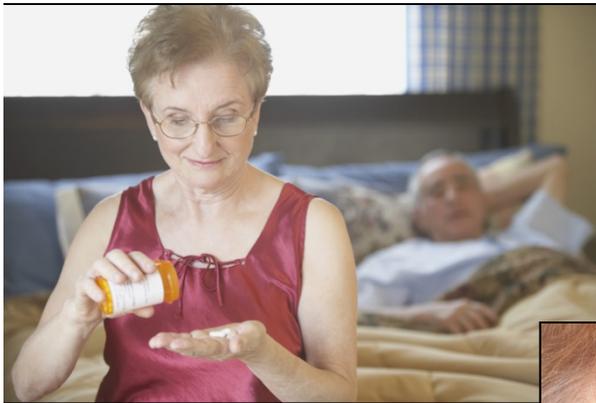
Aging Demographics in U.S.

Population age 65 and over and age 85 and over, selected years 1900–2008 and projected 2010–2050



NOTE: Data for 2010–2050 are projections of the population.
Reference population: These data refer to the resident population.
SOURCE: U.S. Census Bureau, Decennial Census, Population Estimates and Projections.

What is “elder abuse”?



Elder Abuse is...



“Any knowing, intentional, or negligent act by a caregiver or any other person that causes harm or a serious risk of harm to a vulnerable adult.”

National Center on Elder Abuse

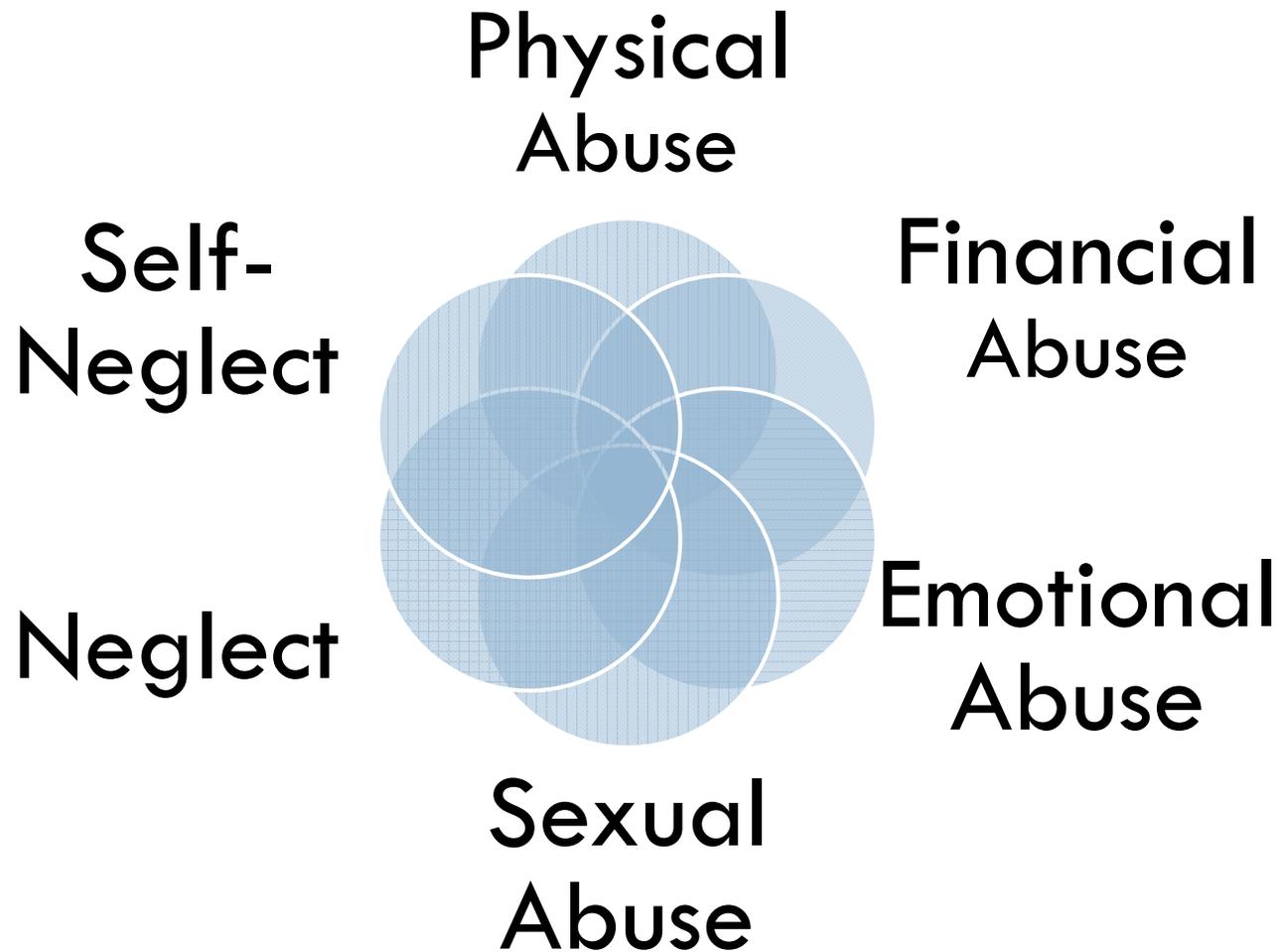
www.ncea.aoa.gov

Who is covered by elder abuse laws?



- In California,
 - ▣ Those 65 years of age and older
 - ▣ Those 18-64 years of age who have a disability
 - ▣ Any adult who is admitted as an inpatient to a 24-hour health facility
- Different states have different qualifying ages and other criteria. Important to learn your state's laws.

Types of Abuse

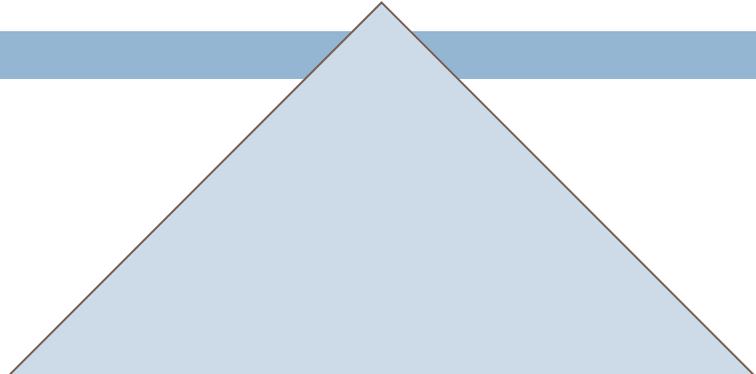


A map of the United States showing state boundaries and major cities. The text "2-5 million victims of elder abuse in the U.S. in the last year" is overlaid in large, bold, black font. The map includes labels for Canada to the north, Mexico to the south, and the North Pacific and North Atlantic Oceans. State abbreviations are visible, and several major cities are marked with red diamonds. An inset map shows Alaska (AK) and Hawaii (HI).

**2-5 million victims of
elder abuse in the
U.S. in the last year**

NATIONAL INSTITUTE OF JUSTICE, *Ron Acierno
Ph.D.; Melba Hernandez-Tejada M.S.; Wendy
Muzzy B.S.; Kenneth Steve M.S., March 2009.*

Reports on the Rise



In 2006 California APS agencies received over 104,000 reports of abuse and neglect, a 34 percent increase since 2000.



Source: California Welfare Directors Association

Elder Abuse Incidence

FOR EVERY REPORT OF ABUSE....

23.5 CASES GO UNREPORTED



Lifespan of Greater Rochester, Inc., Weill Cornell Medical Center of Cornell University, and New York City Department for the Aging. (2011). *Under the Radar: New York State Elder Abuse Prevalence Study*.

Common Characteristics of Victims

17



- 80+ years
- Cognitively impaired
- Female
- Physically or Psychologically Aggressive

National Elder Abuse Incidence Study, 1998

Victims are also from...



- All races, genders, sexual orientations, countries of origin
- It is important not to paint a picture of a typical victim in one's head...
- You might miss someone right in front of you!



Red Flag Situations

- Caregivers with inadequately treated mental health and/or substance abuse problems who also...
- Feel burdened, resentful and are providing care for...
- An older adult who is physically combative and/or verbally abusive

Who abuses?



- 90% of elder abuse is perpetrated by relatives
- Of these, 50% are adult children
- 52% are men
- 30% are themselves over 60 years

Quick Quiz Question

Which is the setting where elder abuse most commonly occurs?

- Adult Day Care Center
- Nursing Home
- At home in the Community
- Hospital



The correct answer is C



- ❑ At home in the community—this is the most common setting. As only 5% of the U.S. elderly population reside in nursing homes at any given time, the vast majority of elders are community-dwelling.
- ❑ Unlike children, elders and their caregivers often become isolated, and there are few protective measures in place to watch out for them.
- ❑ This is why the role of mandated reporters, like nurses, is so important.

Quick Quiz Question 2

- ❑ TRUE or FALSE: Mandated reporters must make reports of suspected self-neglect to Adult Protective Services.



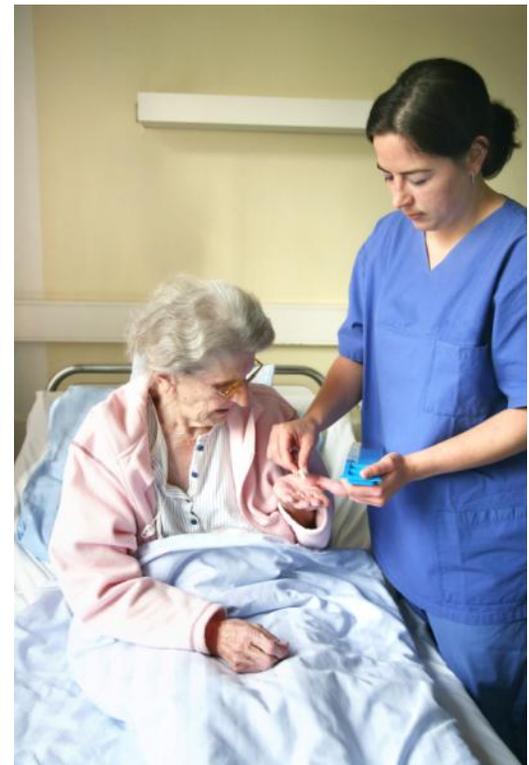
The correct answer is A (and B)



- For people living in the community, abuse can be reported either to APS or law enforcement
- In an emergency or if a crime is in progress, reports can be made to the police or sheriff
- In CA, APS will cross-report to law enforcement any allegation involving a crime.

Quick Quiz Question 3

- ❑ Nurses must only report elder abuse/neglect or self-neglect when they are SURE that abuse is taking place?
 - ❑ True
 - ❑ False



The correct answer is False

- ❑ **With rare exceptions, signs of elder abuse are subtle. In addition, often victims of abuse are reluctant to admit that abuse is taking place. For these reasons, it is not necessary to be sure that abuse is taking place before making a report to APS or the Long-Term Care Ombudsman.**

Nurses are mandated reporters



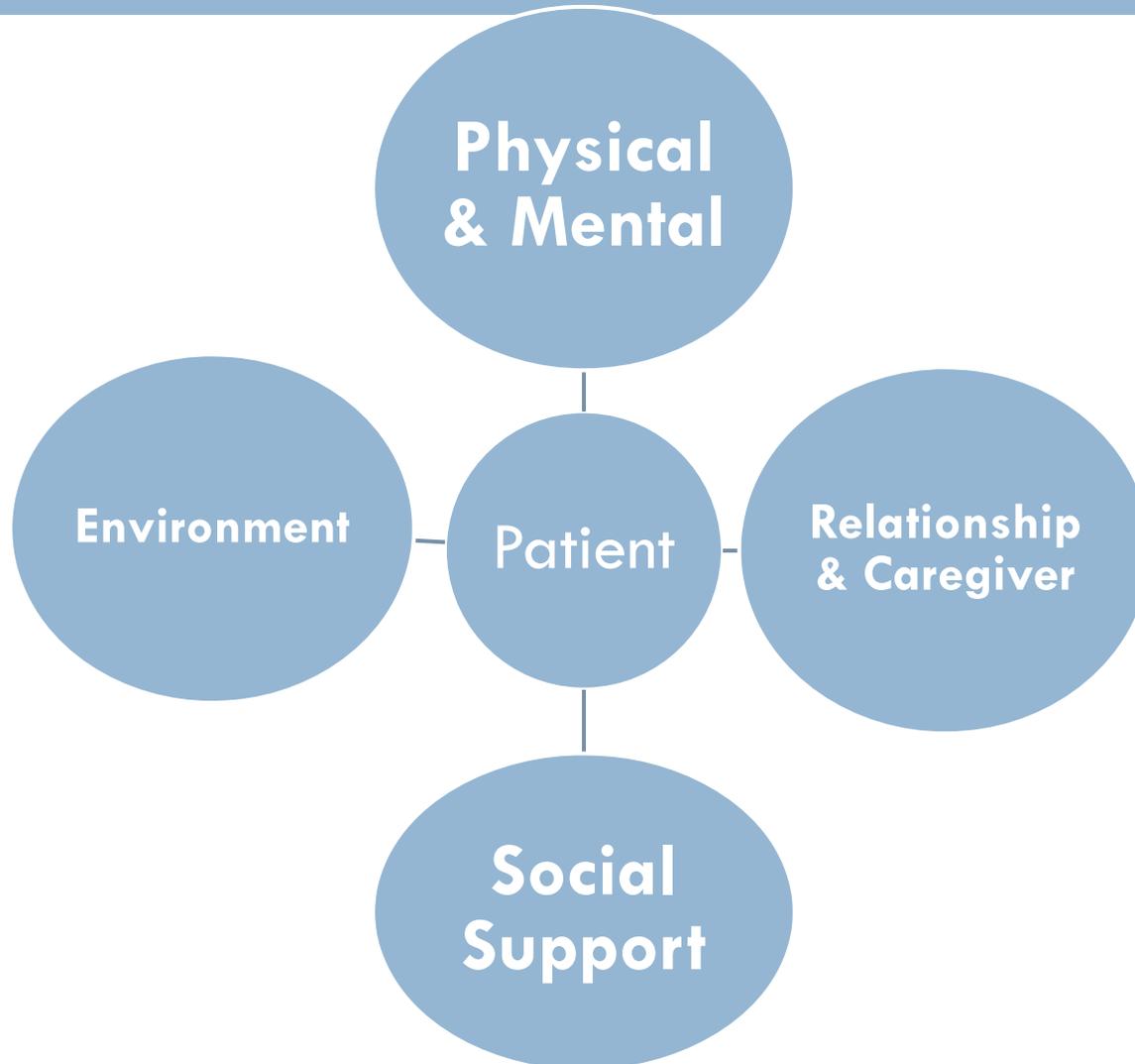
Under California law, health professionals are “mandated reporters” for both child and elder abuse or neglect purposes.

What does this mean?

You must report elder abuse

California Penal Code section 11166 and Welfare and Institutions Code section 15630 require that all mandated reporters make a report to an agency [generally law enforcement, state, and/or county adult protective services agencies, etc...] whenever the mandated reporter, in his or her professional capacity or within the scope of his or her employment, has knowledge of or observes a child, elder and/or dependent adult whom the mandated reporter knows or reasonably suspects has been the victim of child abuse or elder abuse or neglect.

Domains of inquiry



Physical Status Clues

Pressure sores

Poor hygiene



Poor nail care

Low weight

Dehydration

Burns/restraint marks

Over-under medicated

Broken bones



Mental Status Clues

Confused

Depressed

Anxious

Sudden
change in
behavior



Fearful,
Suspicious

Patient reports that
bills have become
confusing

Relationship Status Clues

Stories aren't consistent

Caregiver won't let you talk to the patient alone

Caregiver speaks for the patient

Previous reports of abuse

Delay in seeking care

Body language of patient (won't make eye contact with you)

Caregiver Status Clues

Caregiver has
untreated mental
health issues

Caregiver
indicates burden,
resentment,
frustration

Caregiver abuses
alcohol, drugs



Social Support Status Clues

Telephone calls
screened

Isolated

Patient is told she is
sick and needs to
stay in bed

Patient reports
someone is accessing
her accounts or
money is
disappearing

Financial decisions
being made for
patient are contrary
to good care

Person who used to
handle finances
recently left or had
to stop

Mail is intercepted

Prohibited from
attending religious
services

Doctor shopping
(changing MDs
frequently)

Environment Status Clues



Clutter

Filth



What to do if you suspect mistreatment

- Talk with the older patient alone; enlist help from other members of your medical team if needed
- Normalize the situation as much as possible
- Try to maintain an objective and supportive demeanor with both patient and caregiver



CONFIRMING THE DIAGNOSIS

□ **Ubiquity statements:**

- “I don’t know if this is a problem for you, but because so many patients I see are dealing with abusive relationships, I have started asking about it routinely.”
- “Because there is help available for my patients who are being abused, I now ask everyone about the possibility if it is occurring to them.”
- Allow silence.

Ron Chez, M.D. “Elder Abuse: An Introduction for the Clinician”
www.centeronelderabuse.org, Training Institute, Course Materials

CONFIRMING THE DIAGNOSIS



- Direct question examples:
 - “Does anyone threaten, hurt or abuse you?”
 - “Do you feel safe where you live?”
 - “Are you afraid of anyone?”
 - “Are you made to stay in your room or left alone a lot?”

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ASSESSMENT: CAREGIVER



- Ubiquity statements:
 - “Some people find it difficult to care for a parent with your mother’s condition. Do you?”
 - “Are you able to meet your personal and family needs?”
 - “Sometimes providing care for a family member is challenging. Do you ever feel like you will lose control?”

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ASSESSMENT: CAREGIVER



- Direct question examples:
 - “Is X physically or verbally abusive toward you?”
 - “Are you overwhelmed, confused, fearful, or angry as a result of being a caregiver?”
 - “Is there a reason for waiting this long to seek medical care for X?”

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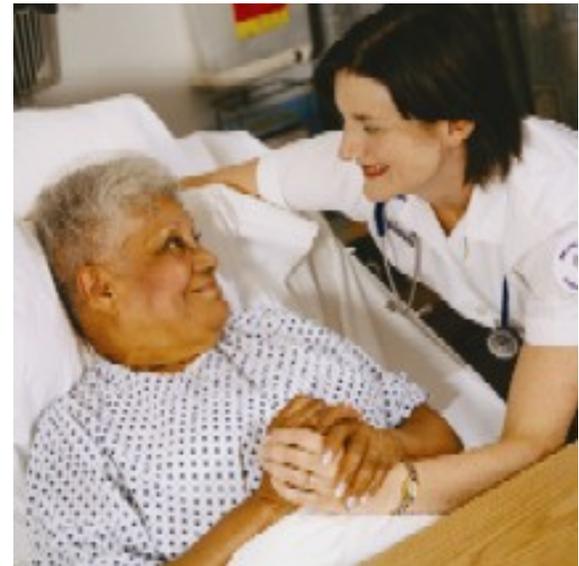
FOLLOW UP IF A YES ANSWER

- ☑ Give permission
 - ◆ validate the experiences and name it
 - ◆ identify abuse as a problem
 - ◆ affirm elder's right to safety
- ☑ Provide information
 - ◆ educate about dynamics of abuse
 - ◆ refer to community resources
- ☑ Establish a follow up process

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SAFETY PLANNING

- Respect patient's autonomy
- Respect patient's confidentiality
- Referrals:
 - ▣ **Adult Protective Services**
 - ▣ **Long-term care ombudsman**
 - ▣ **Law enforcement agencies**
 - ▣ **Emergency planning**



Where to Report Abuse

In the community:

- Adult Protective Services
 - ▣ Social workers/nurses
 - ▣ Receive reports of abuse from mandated reporters and others
 - ▣ Work with elder/dependent adult and family/friends
 - ▣ Help access resources in community to stay safe
 - ▣ In many states: Cross report to police

In residential facilities:

- Long-Term Care Ombudsman
 - ▣ Social workers/volunteers
 - ▣ Receive complaints from residents
 - ▣ Advocate on behalf of residents
 - ▣ Work with State Licensing to identify problems in facilities

AB 40 Update: Reporting Suspected Elder Physical Abuse in a Facility

- **Physical abuse resulting in serious bodily injury**
 - Report by telephone to local law enforcement immediately, but no later than within two hours of obtaining knowledge
 - Report in writing (SOC 341) to local law enforcement, LTCOP & licensing within two hours of obtaining knowledge
- *“ ‘Serious bodily injury’ means an injury involving extreme physical pain, substantial risk of death, or protracted loss or impairment of function of a bodily member, organ, or of mental faculty, or requiring medical intervention, including, but not limited to, hospitalization, surgery, or physical rehabilitation”*

□

AB 40 Update: Reporting Suspected Elder Physical Abuse in a Facility

- **Physical abuse NOT resulting in serious bodily injury**
- Report by telephone to local law enforcement within 24 hours of obtaining knowledge
- Report in writing (SOC 341) to local law enforcement, LTCOP, and licensing within 24 hours of obtaining knowledge
- *BUT...*
- *If* alleged perpetrator is a resident, *and*
- has a physician's diagnosis of **dementia**,
- report by telephone to local law enforcement **or** LTCOP immediately or as soon as practicably possible.
- Report in writing (SOC 341) within 24 hours.

Mandated Reporter



Observes, has knowledge of, or reasonably suspects abuse in a Long-Term Care Facility



Non-physical Abuse

Physical Abuse

Abandonment, abduction, financial abuse, or neglect (see reverse for definition)

Serious Bodily Injury (see reverse for definition)

No Serious Bodily Injury

Caused by Resident Diagnosed with Dementia by Physician
No Serious Bodily Injury



and



and



and



and

Immediately, or as soon as practically possible:	Within 2 Working Days
LTC Ombudsman	Written Report SOC341 to:
<input type="text"/>	LTC Ombudsman
or	or
Law Enforcement	Law Enforcement
<input type="text"/>	<input type="text"/>

Immediately, 911	Within 2 Hours
Telephone Law Enforcement	Written Report SOC341 to:
<input type="text"/>	LTC Ombudsman
	and Law Enforcement
	and Licensing Agency
	<input type="text"/>

Within 24 Hours:	Within 24 Hours
Telephone Law Enforcement	Written Report SOC341 to:
<input type="text"/>	LTC Ombudsman
	and Law Enforcement
	and Licensing Agency
	<input type="text"/>

Immediately, or as soon as practically possible:	Within 24 Hours
LTC Ombudsman	Written Report SOC341 to:
<input type="text"/>	LTC Ombudsman
or	or
Law Enforcement	Law Enforcement
<input type="text"/>	<input type="text"/>

Adult Protective Services (APS): Contact Information

- [CA APS County contact Information](#)
- [Orange County APS](#)

24 Hour Abuse Hotline:

(800) 451-5155

(714) 825-3001 fax

Social Services Agency

P.O. Box 22006

Santa Ana, CA 92702-2006

REPORTING SUSPECTED ABUSE/NEGLECT IN CALIFORNIA

COMPLETE: The Report of Suspected Dependent Adult /Elder Abuse Form online OR

CALL: Local APS or Long-Term Care Ombudsman **and**

FAX: The completed form to the reporting agency within two working days

STATE OF CALIFORNIA – HEALTH AND HUMAN SERVICES AGENCY CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

**CONFIDENTIAL REPORT -
NOT SUBJECT TO PUBLIC DISCLOSURE**

DATE COMPLETED: _____

REPORT OF SUSPECTED DEPENDENT ADULT/ELDER ABUSE

TO BE COMPLETED BY REPORTING PARTY. PLEASE PRINT OR TYPE. SEE GENERAL INSTRUCTIONS.

A. VICTIM Check box if victim consents to disclosure of information [Ombudsman use only - WIC 15636(a)]

*NAME (LAST NAME FIRST)	*AGE	DATE OF BIRTH	SSN	GENDER <input type="checkbox"/> M <input type="checkbox"/> F	ETHNICITY	LANGUAGE (✓ CHECK ONE) <input type="checkbox"/> NON-VERBAL <input type="checkbox"/> ENGLISH <input type="checkbox"/> OTHER (SPECIFY)
*ADDRESS (IF FACILITY, INCLUDE NAME AND NOTIFY OMBUDSMAN)			*CITY	*ZIP CODE	*TELEPHONE ()	
*PRESENT LOCATION (IF DIFFERENT FROM ABOVE)			*CITY	*ZIP CODE	*TELEPHONE ()	

ELDERLY (65+)
 DEVELOPMENTALLY DISABLED
 MENTALLY ILL/DISABLED
 PHYSICALLY DISABLED
 UNKNOWN/OTHER
 LIVES ALONE
 LIVES WITH OTHERS

B. SUSPECTED ABUSER ✓ Check if Self-Neglect

NAME OF SUSPECTED ABUSER _____

CARE CUSTODIAN (type) _____
 PARENT
 SON/DAUGHTER
 OTHER _____

Post-test Questions



1. Which population group is the fastest growing in the U.S.?
A. Children B. Teens C. Elders D. Women
2. Elder abuse most commonly occurs in nursing home and residential care facilities? True or False
3. Nurses do not need to report elder abuse unless they are **sure** that abuse has occurred. True or False
4. Suspected elder abuse *in the community* should be reported to _____.
5. Three types of elder abuse are: _____
_____ and _____

What can YOU do about it?



What can YOU do about it? *Examples*



- **Know the signs, and report** suspected abuse and neglect
- Help older patients and their families **navigate the care systems**
- **Document** care agreements and possible signs of mistreatment
- **Raise awareness**

<http://youtu.be/DLPMKgU4Gv4>



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