

## AD-29 Suspected resident abuse

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Catégorie: Administration

### MAIMONIDES GERIATRIC CENTRE

Title: <b>Suspected Resident Abuse By Caregivers</b>		Number: <b>AD-29</b>						
Approved by: <b>Senior Management Committee</b>		Date issued: March 1999						
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Signature:								
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#### **PREAMBLE**

Residents of Maimonides Geriatric Centre have the right to be treated with dignity and respect and to be free from all anxiety or acts of violence that could threaten their physical or mental well-being and the full enjoyment of their possessions.

Maimonides Geriatric Centre has the obligation to ensure the above through the establishment and implementation of policies and procedures related to the reporting and investigating of suspected abuse reported by residents, residents' families, visitors and companions, and caregivers of the Centre.

#### **SCOPE**

This policy delineates actions to be taken in instances where suspected abuse of a resident has occurred. Maimonides Geriatric Centre is committed to making this policy and the procedures known to all staff and to include this policy and the procedures in the orientation of all new employees. Maimonides Geriatric Centre is further committed to informing residents and/or their families/ representatives of this policy and procedure.

## **PURPOSE**

To protect residents of Maimonides Geriatric Centre from all forms of abuse through the reporting and investigating of reports of suspected abuse made by residents, residents' families, visitors and companions, and caregivers.

## **DEFINITIONS :**

- **Caregiver**

Any person who performs paid or unpaid work within the Centre, including but not limited to physicians, dentists, trainees, and volunteers. Accredited Home and Intermediate Resource managers and their staff are also considered to be caregivers.

- **Abuse**

Abuse is a violation of the rights, dignity and worth of residents. It is any act or behaviour by a person providing care, which results in harm or neglect of a resident. This would include, but is not limited to the following:

- **Physical Abuse** - Intended, direct infliction of physical pain or injury. This includes, but is not limited to, the non-accidental use of physical force that results in bodily injury, pain or impairment. Denial of physical and health-related necessities of life.
- **Neglect** - Material lack of attention, abandonment and undue confinement of the resident. Intended or non-intended failure on the part of the caregiver to fulfill his/her obligation.
- **Emotional/Psychological Abuse** (Often verbal) - Removal of decision-making power from the resident when the individual is able to participate in making decisions. Withholding of attention. Intended social isolation. Intended infliction of mental or emotional anguish by threat, humiliation, intimidation, or verbal or non-verbal abusive conduct. Some examples include: Joking about age or disabilities, treating an adult as a child, speaking as if not present, ignoring feelings, labeling, anti-Semitic comments.
- **Financial or Material Exploitation** - Any situation involving either the unauthorized, dishonest or exploitative use of a resident's funds, property or resources.

- Sexual Assault - Sexual assault, molestation, sexual harassment or attempts at the foregoing.

## **POLICY**

1. Abuse of residents of Maimonides Geriatric Centre will not be tolerated.
2. All caregivers of Maimonides Geriatric Centre are required to immediately report suspected abusive acts or behaviours that they have witnessed or become aware of. Family members and visitors are encouraged to do likewise.
3. Caregivers who, after investigation, are found to have committed abusive acts will be subject to disciplinary and/or administrative action up to and including summary dismissal for cause, notification of the relevant authorities and, where applicable, disciplinary and/or administrative action in accordance with the rules and regulations of the Professional Order.
4. Family members or visitors found to have committed abusive acts may be limited in their visiting privileges. Steps, including application for protective supervision if deemed necessary may be taken to protect vulnerable residents.
5. Measures will be taken to protect a resident from abuse by another resident where there is evidence that this is a concern.

## **PROCEDURE**

1. Anyone (staff person, caregiver, family member, visitor or resident) witnessing or becoming aware of an abusive act or behaviour perpetrated by anyone (staff person, caregiver, family member, visitor or resident) must immediately report it to a Supervisor/Department Head. The person making this report will be received in a favourable and supportive manner by the administration and actions will be taken to ensure confidentiality in the treatment of the dossier. Measures will be taken by the administration to protect the person making the report from reprisals.
2. An Incident Report must be completed. The name of the person completing the report does not appear in the copy kept on file, and therefore the report is only seen by the Supervisor and the Risk manager.
3. The responsibilities of the Supervisor/Department Head will be assumed by the Nursing Co-ordinator on duty when the former is absent.
4. In the event that a family member/visitor/resident reports a suspected abusive act or behaviour, the complaint MAY ALSO be processed through the Centre's Complaints Examination Policy and Procedure by reporting it to the Ombudsman.
5. The Supervisor/Department Head will ensure that the immediate needs of the resident are attended to.

6. Upon becoming informed of a suspected act of abuse, the Supervisor/Department Head will immediately inform the Director of Nursing and Clinical Services.
7. The Director of Nursing and Clinical Services or her delegate must inform the alleged victim and/or family of the suspected abuse.
8. All investigations of suspected resident abuse must be conducted with the strictest degree of confidentiality and within the briefest time delay possible. Confidentiality must be maintained throughout the process.
9. As soon as the Director of Nursing and Clinical Services has been advised of any suspected resident abuse by a caregiver, an investigation must be conducted. The police may be advised. While the investigation is being conducted, the caregiver may be suspended. The Director of Human Resources must be contacted to assist and advise during the investigation of a serious complaint against a staff person. If the reported abuse is about a family member, this person may be restricted in access to the resident.

The management investigation should cover the following points:

- a. The Director of Nursing and Clinical Services or her delegate must interview the person who reported an incident of suspected resident abuse. It is important to thoroughly investigate the facts of the occurrence. (The who, what, when, where and why of the incident).
  - b. The Director of Nursing and Clinical Services or her delegate must interview the suspected abuser.
  - c. The Director of Nursing and Clinical Services or her delegate must interview any witnesses.
  - d. Once the Director of Nursing and Clinical Services or her delegate believes that she has all the facts, the caregiver (suspected abuser) should be re-interviewed, going through all of the evidence that has been collected. If the report relates to a staff member, a representative from the Human Resources Department may attend this meeting. The caregiver suspected of abuse has a right to have a Union representative present.
10. Corrective measures, if deemed necessary, will be implemented within the briefest time delays.
  11. The resident and his/her family will be made aware of information related to the report under investigation **WHILE RESPECTING THE CONFIDENTIALITY OF THE PERSON UNDER INVESTIGATION.**
  12. If the police are involved, the Centre's procedures will be co-ordinated with those of the police, and, when appropriate, directed by the police.

13. The employee who has reported the abuse is advised of the follow-up WHILE RESPECTING THE CONFIDENTIALITY OF THE PERSON UNDER INVESTIGATION.
14. The employee not satisfied with the handling of the situation or who determines that the signaled situation has not been corrected, brings the dossier to the attention of the president-director of the Development Agency for the local network of Health and Social Services. This should be done in writing with a copy to the assistant deputy-minister.
15. The resident/family not satisfied with the handling of the situation may lodge a complaint through the Centre's Complaints Examination Policy and Procedure. This is done by contacting the Ombudsman.