



# Blue Mountains Retirement Village (BMRV)

## ELDER ABUSE IN RETIREMENT VILLAGES: IDENTIFICATION AND PREVENTION STRATEGY

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### What is Elder Abuse?

The World Health Organisation's (WHO) definition of the abuse of older people:

***“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 physical, psychological or emotional, sexual and financial abuse. It can also be the result of intentional or unintentional neglect. In this context, abuse is generally perpetrated by a relative of the older person where the trust relationship involves dependency and proximity to the older person such as an adult child or spouse. Supporting and educating the older person, no matter what their choices are in relation to their situation is paramount. Providing information about available support and options can support the older person in their decision-making and in making referrals.

### What Elder Abuse is Not

Age discrimination, or an estranged relationship with a relative are not examples of elder abuse.

Elder abuse is also not a crime committed by a stranger. It does not involve self-neglect or self-mistreatment – rather, the abuse happens at the hands of a trusted person.

### Our Policy

Blue Mountains Retirement Village is committed to ensuring safeguards are in place to prevent elder abuse and protect staff who report actual or suspected elder abuse. Thus all Blue Mountains Retirement Village employees are obligated to the prevention of elder abuse, identifying actual or suspected elder abuse and take appropriate actions to manage elder abuse.

## What are the Types of Elder Abuse?

Financial	Psychological	Neglect	Physical	Sexual
<p><b>Behaviours:</b> Threatening, coercing re: assets or Wills; Taking control of the older person's finances and against their wishes and denying access to their own money; Abusing Powers of Attorney; Stealing goods, e.g. jewellery, credit cards, cash, food, and other possessions; Unauthorised use of banking and financial documents; and The recent addition of a signature on a bank account.</p>	<p><b>Behaviours:</b> Pressuring, intimidating or bullying; Name-calling, and verbal abuse; Treating an older person like a child; Threatening to harm the person, other people or their pets. Engaging in emotional blackmail such as threatening to withdraw access to grandchildren, family, friends, services, or placement in an aged-care facility. Preventing contact with family and friends, or denying access to the phone or computer; Withholding mail; Preventing an older person from engaging in religious or cultural practices; and Moving an older person far away from family or friends.</p>	<p><b>Behaviours:</b> Failure to provide basic needs, e.g. food, adequate or clean clothing, heating, medicines; Under- or over-medication; Exposure to danger or lack of supervision, such as leaving the older person in an unsafe place or in isolation; An overly attentive carer in the company of others; and Refusal to permit others to provide appropriate care.</p>	<p><b>Behaviours:</b> Pushing, shoving, or rough-handling; Kicking, hitting, punching, slapping, biting, and/or burning; Restraining: physical or medical; Locking the person in a room or home or tying a person to a chair or bed; Intentional injury with a weapon or object; and Overuse or misuse of medications.</p>	<p><b>Behaviours:</b> Non-consensual sexual contact, language or exploitative behaviour; Rape and sexual assault; Cleaning or treating the person's genital area roughly or inappropriately; Unwanted exposure to pornography; Enforced nudity of a person; and Any behaviour that makes an older person feel uncomfortable about their body or gender.</p>

Source: NSW elderabuse helpline & resource unit, [NSW Elder Abuse Toolkit](#), 2016

## What are the Signs of Elder Abuse?

Financial	Psychological	Neglect	Physical	Sexual
<p><b>Signs:</b> Unexplained disappearance of belongings; Inability to pay bills; Significant bank withdrawals and/or changes to Will. Inability of an older person to access bank accounts or statements. Stockpiling of unpaid bills. Disparity between living conditions and money; and No money to pay for essentials for the home including food, clothing, and utilities.</p>	<p><b>Signs:</b> Resignation, shame; Depression, tearfulness; Confusion, agitation, and social isolation; Feelings of helplessness; Unexplained paranoia or excessive fear; Disrupted appetite or sleep patterns; Unusual passivity or anger; Sadness or grief at the loss of interactions with others; Social withdrawal; Changes in levels of self-esteem; and Worry or anxiety after a visit by specific person/people.</p>	<p><b>Signs:</b> Inadequate clothing; complaints of being too cold or too hot; Poor personal hygiene; unkempt appearance; Lack of medical or dental care, or injuries that have not been properly cared for; Absence of required aids; Exposure to unsafe, unhealthy, and/or unsanitary conditions; and Unexplained weight loss, dehydration, poor skin integrity, malnutrition.</p>	<p><b>Signs:</b> Internal or external injuries (sprains, dislocations and fractures, pressure sores, unexplained bruises or marks on different areas of the body, pain on touching); Broken or healing bones; Lacerations to mouth, lips, gums, eyes or ears; missing teeth and/or eye injuries; Evidence of hitting, punching, shaking, pulling, e.g. bruises, lacerations, choke marks, hair loss or welts; and Burns, e.g. rope, cigarettes, matches, iron, and/or hot water.</p>	<p><b>Signs:</b> Unexplained STD or incontinence (bladder or bowel). Injury and trauma, e.g. scratches, bruises etc. to face, neck, chest, abdomen, thighs or buttocks. Trauma including bleeding around the genitals, chest, rectum or mouth. Torn or bloody under-clothing or bedding. Human bite marks; and Anxiety around the perpetrator.</p>

Source: NSW elderabuse helpline & resource unit, [NSW Elder Abuse Toolkit](#), 2016

## A Case Scenario in a Retirement Village

A husband has no understanding about his wife who lives in the village and who is living with dementia. He has been advised many times both verbally and in writing.

The husband yells at the wife to stop being so stupid (emotional/psychological abuse) and expects the wife to provide daily living requirements such as meals, laundry, cleaning, shopping etc. – the lifelong expectation of the husband. The husband becomes increasingly embarrassed about his wife's "behaviour" and isolates her, restricting enjoyment of friends and family (psychological abuse). The husband starts smacking her to force her to walk and behave in a particular way (physical abuse).

## What Can the Management and Staff Do In An Emergency?

### 1. *Call 000 without delay, and depending on the circumstances:*

- Contact other emergency services and arrange medical treatment.
- Arrange emergency accommodation.
- Determine capacity of an older person and make an urgent Guardianship application.
- Other support sensitive to culture, sexual identity and religious beliefs.

### 2. *What if I am unsure about whether it is an emergency?*

- An emergency is when there is an immediate threat or risk of physical harm or serious damage to property. Workers should review their own policies about emergency situations.
- The threat or risk may be suspected or actual. If you are unsure, it is safest to treat it as an emergency.

### 3. *What can the police do?*

The NSW Police respond to emergencies and have powers under NSW Crimes acts. Some forms of elder abuse are crimes.

- Conduct a welfare check.
- Investigate a report that is made which may lead to criminal charges.
- Under some circumstances, gain access and entry to premises.
- Apply on the person's behalf for an Apprehended Domestic or Personal Violence.
- Order which can include an Exclusion Order.
- Ring an ambulance or mental health team and make referrals.

### 4. *What if the older person does not want help?*

Older people should be involved in making decisions about their life as much as possible, including in an emergency. However, if a worker decides a person is in imminent danger, they must act, even if this goes against the person's wishes. This relates to 'duty of care' to avoid further harm.

Source: NSW elderabuse helpline & resource unit, [NSW Elder Abuse Toolkit](#), 2016

## 5–steps to identify and respond to elder abuse

### STEP 1: IDENTIFY ABUSE (suspected, witnessed or disclosed)

- Ask questions and gather further information.

### STEP 2: ASSESS IMMEDIATE SAFETY

- Determine the level and urgency of safety concerns for the older person and others.
- In the event of an emergency, contact emergency services.
- Consent of the older person is not necessary in emergency situations.
- Protect evidence.
- Follow your workplace policy and procedures for internal reporting.
- If not an emergency, continue to step 3.

### STEP 3: PROVIDE SUPPORT

- Listen to the older person.
- Acknowledge what they tell you.
- Validate their experience.
- Check for capacity indicators.

### STEP 4: INFORM MANAGER & DOCUMENT

- Report suspected, witnessed or disclosed abuse to your manager or supervisor.
- Document the abuse and action/s taken, following your own workplace policy and protocols.
- Document if the older person has capacity and refuses intervention.

### STEP 5: RESPOND & REFER

- Ask the older person what they want to do about their situation. If the older person lacks capacity, include the substitute decision-maker (if this person is not the abuser) in the conversation.
- Discuss referral options.
- Seek consent from the older person or, when lacking capacity, the appropriate substitute decision-maker to make a referral.
- Make appropriate referrals.
- Leave information (if safe to do so) if the older person refuses assistance, and keep the lines of communication open.
- Consider implementing any local or regional protocols, interagency protocols and service coordination plans.
- Ensure procedures are in place for coordination and/or monitoring, and follow-up as required.

Source: NSW elderabuse helpline & resource unit, [NSW Elder Abuse Toolkit](#), 2016

## Effective questions

Open questions: use to initiate conversations	Direct questions: use when abuse is strongly suspected
<ul style="list-style-type: none"> <li>• How are things going at home?</li> <li>• How do you spend your days?</li> <li>• How do you feel about the amount of help you receive at home?</li> <li>• How do you feel your carer/family is managing?</li> <li>• How are you managing financially?</li> <li>• How do you feel when carer/family member does/says (name behaviour noticed)?</li> <li>• Lots of women put up with abuse and it can be hard to talk about. Does this sound like your situation?</li> <li>• What is happening now/how can I support you?</li> <li>• I noticed a bruise on your arm today. How did this happen?</li> <li>• You seem a little upset - what's happening for you?</li> <li>• How are you managing at home? (Or how is your carer managing?)</li> <li>• What would you like to do about your situation?</li> <li>• You seem anxious about your finances. What would it be like if I arranged someone to assist you with your banking etc.?</li> </ul>	<ul style="list-style-type: none"> <li>• Are you feeling safe?</li> <li>• Are you afraid of anyone at home?</li> <li>• Has anyone close to you tried to hurt or harm you recently?</li> <li>• Are you often sad or lonely?</li> <li>• Are you helping to support someone?</li> <li>• Has anyone touched you without consent?</li> <li>• Has anyone shouted at you or threatened you?</li> <li>• Has anyone taken anything that was yours without your consent?</li> <li>• Have you signed any documents that you didn't understand?</li> <li>• Has anyone failed to help you when you needed help?</li> <li>• Is there someone you can talk to about your situation?</li> <li>• Would you like me to talk to someone who can help or advise you?</li> <li>• Would you like to have a visit from one of our social staff?</li> <li>• Has anyone tried to hurt you recently?</li> <li>• Do you know about a free telephone service called the NSW Elder Abuse Helpline - would you like the number?</li> </ul>

Source: NSW elderabuse helpline & resource unit, [NSW Elder Abuse Toolkit](#), 2016

## Emergency Contacts

Policy Ambulance	000	Seniors Rights Service	1800 424 079
Policy Ambulance (call from mobile phones)	112	Police LAC /Domestic Violence Liaison	9199 9999
Elder Abuse Helpline & Resource Unit	1800 628 221	Local GP	9199 9999
NSW Rape Crisis	1800 424 017	Legal Aid	9199 9999
Domestic Violence Line	1800 656 463	Social Work	9199 9999