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## Elder Abuse Policy

Myhomecare.ie developed an elder abuse policy in line with the recommendations set out in the HSE National Elder Abuse Policy, "Responding to Allegations of Elder Abuse", Protecting our Future, the Working Group Report on Elder Abuse (DOCH&C 2002) and the National Centre for Protection of Older People (NCPOP).

Myhomecare.ie is registered with the NCPOP and we have attended lecturers receiving information on the protection of elderly people. Following the lectures, myhomecare.ie introduced the findings into our staff training module on Elder Abuse in order to educate and raise awareness.

Our instructors have been trained by the HSE South Dedicated Officer in Elder Abuse, Con Pierce. The program they administer includes:

- HSE's response to Elder Abuse PowerPoint application
- Recognising and Responding to Elder Abuse in Care Settings HSE DVD
- Scenario discussion
- Myhomecare.ie complaints procedure/ Internal investigation
- Trust in care policy
- Myhomecare.ie Policy for the Safe Guarding and Protection of Vulnerable Adults

### Purpose

The purpose of this policy is to inform all staff of their responsibilities in regard to safeguarding and protecting elderly adults from abuse or neglect.

The policy also aims to provide guidance and support to all staff that have direct contact with elderly adults and ensure that service users adults and their carers have confidence in the safeguarding practices of myhomecare.ie.

### Policy Statement

The protection of vulnerable people is one of the most important tasks facing social and health care services. Awareness of elder abuse has received growing attention from the public, the media and voluntary and statutory agencies over recent years. However there is still much for agencies commissioning and providing services to vulnerable adults to do, in order to raise the profile of adult protection.

Myhomecare.ie believes that every vulnerable adult has the right to be protected from harm and their health and welfare promoted. Where required this should be with full support from the myhomecare.ie health professional. Furthermore, Myhomecare.ie is dedicated to protecting and promoting the rights of service users, their dignity, integrity and independence

All staff are expected to comply with this policy at all times and are expected to work with partner organisations such as the HSE and local authority in order to promote the wellbeing of the adult.

Any member of staff raising concerns about an adult's welfare will be fully supported by the senior management team of myhomecare.ie.

Myhomecare.ie employed nurses and care workers who are unsure at any time of what action to take should contact the line manager.

## **Legislation**

This section of the policy summarises aspects of the law about protecting or safeguarding elderly adults. It covers people's rights, and the powers and duties to protect them. This is a legislative summary and it is important to seek legal advice about specific situations.

## **Human Rights**

Under the European Convention on Human Rights (ECHR), everyone has a number of rights, which the Human Rights Act 1998 makes directly enforceable. The following are particularly relevant to safeguarding adults from abuse.

- Article 8 ECHR: "Everyone has the right to respect for [their] private and family life, [their] home and correspondence"
- Article 3: "No-one shall be subjected to torture, or inhuman or degrading treatment or punishment"
- Article 14 prohibits discrimination on any grounds in the way that people access their rights under the Convention
- Article 6 entitles everyone to a "fair hearing" when a decision is made about their civil rights and obligations. This includes the right to be consulted before decisions are made, and to be given reasons for decisions

## **Data Protection Act 1998**

The Act covers all recording, storage and sharing of personal information held on paper files or computer. All personal data must be recorded and shared lawfully.

Investigating, assessing and responding to risks posed to adults are multidisciplinary and joint agency activities. They depend on the selective sharing of information which is normally confidential. All Information sharing on behalf of the HSE will comply with the Data Protection Act 1998.

## **Mental Capacity Act**

The Mental Capacity Act encompasses the requirement of a person having the capacity to make decisions and consent. Capacity determines who makes a decision. If an adult can make an informed decision, it is their right to make that decision whilst family members and professionals can only advise and support.

If the elderly adult lacks capacity to decide, others must make the decision, acting in what they believe to be the person's best interests. This is a crucial distinction in work to safeguard adults.

Policy for the Protection for elderly adults receiving Domiciliary or Nursing Care

Domiciliary and nursing care providers are under statutory duties to provide care which is appropriate to the assessed needs of service users. In particular, arrangements must be made to;

- Ensure users are treated with respect and their right to privacy is upheld
- Prevent service users from suffering physical, financial or sexual abuse, neglect or self-harm
- Ensure service users' health and welfare are promoted

This policy respects the rights and dignity of all adults regardless of their age, gender, ethnic origin, culture, faith, ability, or sexuality. People's rights will be positively promoted through service support and delivery.

## **Scope of Policy**

This policy is to be followed by all staff working for Myhomecare.ie in cases of suspected or actual abuse and neglect of any vulnerable adult.

**Exclusions**

This policy does not cover people who have not reached their 18th birthday. Please refer to the Safeguarding Children policy.

**Types of Abuse**

For the purpose of this policy, abuse is categorised as physical, emotional, psychological, sexual, institutional, financial, neglect, bullying and harassment. Situations are rarely as straightforward as these categories suggest and many situations may involve a combination of abuse elements.

The Table below outlines the definitions of the types of abuse listed above. The table is intended as a guide only and does not purport to be a definitive or comprehensive description of abuse.

Type of Abuse	Definition	Examples
<b>Physical Abuse</b>	Physical abuse is violent behaviour toward another individual, which may result in physical injury, pain or mental distress.	<ul style="list-style-type: none"> <li>• The invasion of the person’s bodily integrity e.g. invasive medical/nursing procedures conducted without consent</li> <li>• Hitting, shaking, slapping, burning, biting, unnecessary restraint</li> <li>• Giving inappropriate medication, or other substances</li> </ul>
<b>Emotional and Psychological Abuse</b>	Emotional and psychological abuse is any behaviour carried out with the intention of causing mental distress, or which results in mental distress. It may take many forms and may be overt or subtle as the examples demonstrate.	<ul style="list-style-type: none"> <li>• Persistent criticism, sarcasm, humiliation, hostility, intimidation or blaming, shouting, cursing, invading someone personal space</li> <li>• Unresponsiveness, not responding to calls for assistance or deliberately responding slowly to a call for assistance</li> <li>• Failure to show interest in, or provide opportunities for a person’s emotional development or need for social interaction</li> <li>• Disrespect for social, racial, physical, religious, cultural, sexual or other differences</li> <li>• Imposing punishment such as removing someone’s wheelchair</li> </ul>
<b>Sexual Abuse</b>	Sexual abuse is the involvement of an individual in sexual activities to which they have not consented, or are unable to give informed consent to.	<ul style="list-style-type: none"> <li>• Intentional touching, fondling, molesting, sexual assault or rape</li> <li>• Inappropriate and sexually explicit conversations or remarks</li> <li>• Exposure of the sexual organs or any sexual act intentionally performed in the presence of a person using the service</li> <li>• Exposure to pornography or other sexually explicit and inappropriate material</li> <li>• Sexual exploitation of a vulnerable adult, including any behaviours, gestures or expressions that may be interpreted as being seductive or sexually demeaning to a person using the service</li> <li>• Non-consensual sexual activity between a staff member and a vulnerable adult</li> </ul>
<b>Financial Abuse</b>	Unauthorised interference with or theft of personal possessions, money or property belonging to another.	<ul style="list-style-type: none"> <li>• Taking money without a person’s consent</li> <li>• The soliciting of personal or organisational gifts or bequests from people using the service</li> <li>• Unauthorised charges for services.</li> </ul>

Type of Abuse	Definition	Examples
<b>Neglect</b>	Negligence or carelessness in attending to the support needs of the person using the service constitutes an abuse.	<ul style="list-style-type: none"> <li>• Person is routinely deprived of food, clothing, entitlements, warmth, hygiene, intellectual stimulation, supervision, safety, attention from staff or medical care</li> <li>• Failure to protect a person when threatened by physical danger</li> <li>• Failure to provide appropriate information</li> </ul>
<b>Institutional Abuse</b>	Inappropriate practices or systems employed by or within the organisation which deny people using the service their right to choice, privacy and independence	<ul style="list-style-type: none"> <li>• Staff become desensitised through lack of management and supervision and accept as reasonable, practices which could be deemed inappropriate outside the organisation</li> <li>• Staff and management do not listen to, hear and respond appropriately to views of people using the service</li> <li>• The organisation cannot respond within a reasonable timeframe or appropriately to complaints made</li> <li>• People using the service are treated collectively rather than as individuals</li> <li>• The person's right to privacy and choice are not respected e.g. the practice of entering a person's room without knocking and getting a response</li> <li>• Talking about individual's personal or intimate details in a manner that does not respect a person's right to privacy</li> </ul>
<b>Bullying</b>	Repeated inappropriate behaviour, direct or indirect conducted by one or more persons against another which could be regarded as undermining an individual's dignity	<ul style="list-style-type: none"> <li>• Constant humiliation, ridicule or belittling often in front of others</li> <li>• Persistently and inappropriately finding fault with a person</li> <li>• Constantly picking on a person when things go wrong even though the person is not at fault</li> </ul>
<b>Harassment</b>	Inappropriate behaviour based on a characteristic of the person such as: marital status, family status, sexual orientation, religious beliefs, age, disability, race, colour, nationality, ethnic or national origin	<ul style="list-style-type: none"> <li>• Conduct including spoken words, gestures or the production, display or circulation of written materials that could be regarded as offensive, humiliating or intimidating</li> <li>• Verbal harassment e.g. jokes, derogatory comments, ridicule or song</li> <li>• Written harassment e.g. text messages, e-mails, notices</li> <li>• Physical harassment e.g. gestures or threatening poses.</li> </ul>

### Staff training and continuing professional development

Myhomecare.ie will enable staff to participate in training in safeguarding vulnerable adults and where appropriate this will be included in local induction programmes. The training will be proportionate and relevant to the roles and responsibilities of each staff member.

### **Supervision and support**

Myhomecare.ie recognises the importance of providing supervision and support to staff.

### **Safe recruitment and vetting procedures**

Myhomecare.ie has in place robust recruitment and vetting procedures for all staff, in line with national and local guidance. This includes thorough checks being carried out as part of the recruitment process;

- Gaps in employment history are checked and accounted for
- Qualifications are checked
- References are always being taken up and followed up if necessary

### **Robust complaints procedures**

Myhomecare.ie has in place robust complaints and whistle blowing procedures, which Myhomecare.ie guarantees that staff and vulnerable adults using these procedures appropriately will not prejudice their own position and prospects.

### **Management responsibilities**

- Demonstrate leadership, be informed about and take responsibility for the actions of their staff
- Maintain confidentiality of the elderly adults in their care
- Support their staff throughout the process of reporting concerns through to case conferences
- Ensure their staff access training, supervision and support relevant to their roles and responsibilities
- Ensure their staff are clear about their professional roles and responsibilities
- Ensure their staff make comprehensive and accurate healthcare records
- Ensure their staff work effectively with professionals from other relevant organisations
- Facilitate and/or undertake regular audit of practices
- Ensure the management of safeguarding elderly adults is identified in the Appraisal and Personal Development Plans

### **Individual Staff Members**

- Be aware of myhomecare.ie policies procedures and guidance for safeguarding vulnerable adults
- Ensure that they report any concerns regarding the welfare of vulnerable adults immediately to their line manager. Reasons for concern and actions taken should be documented in the professional's record for that adult
- Work closely with professionals from other agencies to promote the welfare of all vulnerable adults
- Promote the confidentiality of vulnerable adults identifiable information whilst supporting the need for information sharing where appropriate
- Take part in training, including attending updates so that they maintain their skills and are familiar with procedures
- All practitioners registered and non-registered should access regular supervision and support in line with local procedures
- All staff should maintain accurate comprehensive and legible records, with records being stored securely in line with local guidance.

### **Assessment of Risk**

Assessment of risk and planning are integral to protecting vulnerable adults and myhomecare.ie health staff will be expected to contribute to these processes.

Assessing an elderly adults' risk of becoming subject to abuse or neglect, must be a continuous process. This is because the circumstances within which an elderly adult lives may undergo subtle or evident changes that may directly affect the impact on their physical or mental health. Observations of the elderly adults' health should be documented in their nursing notes.

### **Recognition of Abuse**

It is not always easy to recognise when abuse has taken place or a situation that has taken place may develop to become abusive. Myhomecare.ie staff are not expected to be experts in recognising such situations. However, below are some indicators of abuse;

- Unexplained or suspicious injuries such as bruising, cuts or burns, particularly if situated in a part of the body not normally prone to such injuries. Bruises that reflect hand marks or fingertips could indicate pinching or slapping. Cigarette burns and scalds would also be a concern
- An injury for which the explanation seems inconsistent
- The vulnerable adult describes what appears to be an abusive act involving him or her
- Unexplained reaction to individuals or settings
- Frequent visits to the GP or hospital setting
- Frequent or irrational refusal of treatment or care
- Inconsistency of explanations
- Someone else (a child, young person or adult) expresses concern about the welfare of another person
- Unexplained changes in behaviour e.g. becoming very quiet, withdrawn or having severe temper outbursts
- Inappropriate sexual awareness
- Engaging in sexually explicit behaviour
- Discomfort when walking or sitting down
- Distrust of others, particularly those with whom a close relationship would normally be expected
- Has difficulty making friends
- Is prevented from socialising with other people
- Displays variations in eating patterns including overeating and loss of appetite
- Loses weight for no apparent reason
- Becomes increasingly dirty and unkempt

This list is not exhaustive and the presence of one or more of the indicators is not proof that abuse is actually taking place or has taken place.

### **Barriers to reporting abuse**

There are a number of barriers that exist which prevent a vulnerable adult from telling others about abuse, some of the main barriers are they may;

- Be scared because they may have been threatened
- Think they will be taken away from home
- Believe that they are to blame or they may feel guilty
- Think it happens to others
- Feel embarrassed
- Not want their abuser to get in trouble
- Have communication or learning difficulties
- Not have not yet have the vocabulary to describe what has happened
- Be afraid that they won't be believed
- Think they have already told e.g. by dropping hints'
- Have told someone before and weren't believed, so what's the point in trying again

### **If an elderly adult discloses abuse**

- Listen to what the vulnerable adult is telling you and try not to show you are shocked
- Do not question the vulnerable adult or try to encourage further disclosure
- Tell the vulnerable adult that you will do your best to support him/her but you must tell others in order to do this. You cannot promise confidentiality / secrecy
- Reassure the vulnerable adult that it is not their fault
- Record accurate, contemporaneous notes on observations, events and actions taken. Sign with job title and date.

### **ACTIONS TO TAKE OR NOT TO TAKE IF SUSPECTING ABUSE**

#### **Actions to be taken if a disclosure or allegation is made**

- React calmly so that you do not frighten the person and try not to appear shocked
- Reassure the person that they were right to tell you
- Focus on listening and do not make comments other than neutral ones
- Inform them that you need to pass on the information to your line manager or General Manager
- Determine the views of the elderly adult about what you propose to do
- Do not make promises of confidentiality; let the person know that you will have to tell another adult but all sharing is on a need to know basis
- Try to reduce any questions you may choose to ask, to an absolute minimum
- Questions should never be leading, they should only consist of Who...? Where...? When...? What...?
- Be aware of the need to gather forensic evidence and ensure the protection of such evidence
- Make a full written record of what has been said, heard and/ or seen as soon as possible using an Incident Report form.
- This report form should then be discussed with your line manager or other senior member of staff

#### **Actions not to take**

- Question the elderly adult about his or her experience – leave this to the experts
- Panic
- Allow shock and/ or distaste to show
- Probe to find out more information than offered
- Speculate or make assumptions
- Make negative comments about the alleged abuser
- Make promises to agree to keep it a secret
- Doing nothing, expecting someone else to deal with it
- Discussing the issue with anyone other than the appropriate line manager or senior member of staff

#### **Procedure for reporting concerns**

If the employee feels they cannot discuss the issue with their line manager because they feel the line manager is the alleged perpetrator, the myhomecare.ie employee should consult the whistle blowing policy for guidance.

A referral must initially be made by telephone call on the day and followed up within 24 hours by a faxed referral. It is important to have all the relevant details in front of you and be sure to take a name and job title of the person you have spoken to. The relevant safeguarding lead should provide the reporter with the form relevant to their procedures.

The reasons for referral should normally be discussed with the vulnerable adult and his/her consent sought for the referral. If consent is not given the referral may go ahead if it is felt that the vulnerable adult or other vulnerable adults are at increased risk. Do not contact the alleged perpetrator – unless this is done as part of emergency action otherwise this must only be done when

agreement has been given as part of the investigation.

Myhomecare.ie senior management will support the homecare professional if a false allegation has been made; it is better to have made a false allegation than to miss a case of abuse although staff would be supported if this happened too.

### **Writing up a report**

An incident report form will need to be written by the person who identified the abuse. The following information should be provided;

- Name, address and date of birth of elderly person
- Allegations/suspicions reported – list each separately
- If an allegation has been made, note who is making it and about whom. If a suspicion, the basis for it
- Record dates and locations where known
- Previous related allegations/history of abuse, if any
- A brief description of the vulnerable adult, including nature of disability/vulnerability, communication needs, etc.
- Social situation / family network and current services received
- Where they are currently residing if different from their normal address
- Your assessment of the person's capacity to consent in relation to allegations/suspicions and their legal status.  
(Please refer to the Mental Capacity Act -2005) and check if an Independent Mental Capacity Advocate (IMCA) is required?
- Vulnerable person's views. Do they wish to involve the police, if it is appropriate?
- Information about the person allegedly responsible for abuse, as applicable
- A description of the investigation process and evidence gathered. Attach body maps (available in the Berkshire Safeguarding Adults Policy and Procedures 2008 document), medical and other reports
- Include information about the level of co-operation that you received from the various people involved
- An evaluation of the evidence
- Your assessment of the seriousness of the alleged abuse
- Risk assessment
- Recommendations for action
- Your name, organisation, team, position and qualifications

### **Information sharing**

In the best interests of protecting elderly adults, myhomecare.ie will comply with any validated request to share information in regard to the safety and protection of a particular service user as long as the request complies with information governance and sharing policies and agreement has been provided by the myhomecare.ie information management lead. Information will only be shared on a need to know basis.

There may be occasions when information is shared in the best interests of the elderly adult or members of the public, without consent of the service user or health professionals. This may be permitted when:

- Reasonable concerns about an elderly adult identifies that their health or development will be impaired without the provision of services
- There is evidence or reasonable cause to believe that an elderly adult is suffering or is at risk of suffering significant harm
- There is a need to prevent significant harm arising to elderly adults, including through the prevention, detection and prosecution of serious crime.

Any concerns about the welfare of an elderly adult arising from alleged abuse or harassment by a homecare worker must be reported immediately. It can often be difficult to report a fellow employee, but Myhomecare.ie assures all employees that it will fully

support and protect anyone who, without malicious intent reports their concerns about a colleagues practice or the possibility that a vulnerable adult may be being abused or harassed.

Myhomecare.ie whistleblowing policy and procedure enables and encourages employees to raise any concerns that they have about malpractice, abuse or wrong doing at an early stage and in the right way, without fear of victimisation, subsequent discrimination or disadvantage.

Myhomecare.ie employed nurses and care workers should act in a professional way at all times to minimise being accused of abuse and maintain high standards of documentation. If an employed nurse or carer suspects that the relationship between them and the elderly adult and their representative is breaking down for any reason, they should discuss these issues with their line manager.

All staff should be aware that if they are accused of abuse that they will be suspended from duty whilst an investigation is underway; this is as much to protect the homecare workers as it is the family.

### **Handling difficult situations**

There may be situations when individuals pose an immediate risk to others, property or themselves. Where dialogue and diversion tactics fail there are two types of simple control methods that can be used.

- Simple physical presence as control. This involves no contact e.g. standing in front of an exit
- Holding or touching to persuade a child or young person to comply with verbal requests e.g. holding a person's hand or using the shoulders to steer a person away from a situation.

If a situation is approaching the point where these methods will not or don't work or if the person is threatening or using violence then the police should be contacted immediately. After the incident the line manager should be informed and the incident reported via the incident reporting mechanism.

### **Record keeping**

All records must be kept in accordance with national requirements such as the Data Protection Act 1998 and with Myhomecare.ie information governance and records management policies.

Recording in the home care records must be according to the best practice developed by Myhomecare.ie.

### **Training**

Myhomecare.ie will enable staff to participate in training in obtaining certifications in safeguarding adults and where appropriate this will be included in local induction programmes. The training will be proportionate and relevant to the roles and responsibilities of each staff member.

Staff must attend training to ensure that they are competent and have reached an agreed standard of proficiency in the management of safeguarding vulnerable adults.

All training provided will be mapped to the requirements of individual care packages, the appraisal process, and noted in the personal development plan.

All staff providing direct care to elderly adults or are in contact with them will be expected to undertake training that consists of awareness raising about the general signs of abuse, types of abuse and the management of reporting abuse and recording. This

training should occur within three months of starting with the organisation. The training should be repeated annually.

### **Audit and monitoring**

Processes for monitoring the effectiveness of the policy include;

- Assessment of the management of safeguarding alerts and their outcomes

### **Evidence of learning across the organisation**

- Incident reporting procedure
- Annual report to the Governance Committee
- Appraisal and Personal Development Plan (PDP).

Myhomecare.ie operated by Servisource Healthcare believes that abuse, neglect and mistreatment within its services is unacceptable in all circumstances. This policy addresses Myhomecare.ie commits to safeguarding the welfare of all people using our services by outlining the right relationship that should exist between people to prevent abuse from taking place within its services.

Ethical issues and confidentiality around disclosure of abuse

Respecting the rights, privacy and autonomy of people using myhomecare.ie services is a fundamental requirement of all myhomecare.ie staff. Acting with a person's consent whilst also respecting their confidentiality and individual identity is a core principle of the adult protection policy.

It must be acknowledged however, that many people with disabilities who are vulnerable, experience many barriers when it comes to reporting or disclosing abuse or neglect. People may be either unwilling to report abuse or co-operate with investigations due to a number of issues such as;

- A lack of awareness that what they are experiencing is abuse
- A lack of clarity as to who they can talk to
- Lack of capacity to report the incident
- A fear of the alleged abuser
- A fear of other backlash as a result of raising an issues such as being ignored

This can raise some ethical issues for staff in respecting the person's right to self-determination and staff exercising their duty of care to protect a person from abuse or neglect and report incidents of abuse. It may be necessary for staff to override the wishes of the person in order to prevent serious harm for example in cases of serious physical or sexual assault.

### **Whistleblowing**

Myhomecare.ie recognises that situations may arise where staff become aware of poor practice, abuse and/or neglect which can affect the well-being of people using the service. Suspecting or even knowing of such poor practice may cause contradictory feelings for staff such as being worried about raising such issues or wanting to keep concerns to themselves.

They may feel that raising the matter would be disloyal to colleagues and peers. They may have decided to say something but find that they have raised the issue with the wrong person and feel that the matter has not been addressed. All staff should be aware that failure to report and record abuse is failure to discharge a duty of care to the client.

This policy has been introduced to enable staff to raise their concerns at an early stage. Any person who raises a genuine concern about abuse or neglect will not be at risk of losing their job or any form of retribution. Harassment or victimisation of whistleblowers

will not be tolerated by Myhomecare.ie

Every effort will be made to ensure that the persons identity is kept confidential. However it must be appreciated that an investigation process may reveal the source of information. If it becomes necessary to reveal the person's identify in order to pursue the investigation, this will be discussed with the person at the earliest possible stage. In such circumstances, it may affect the organisations capacity to continue the investigation if the person does not agree to be identified.

An accurate and detailed record must be kept of the allegations of elder abuse and the actions taken. An incident report completed.