



## Elder abuse prevention

Elder abuse and resident neglect are two of the most serious situations that can occur in a nursing home. All nursing home staff members, especially CNAs, need to be aware of the problem and, more importantly, understand the dangers of abuse and neglect, as well as the potential consequences.

Every nursing home must do all that it can to protect residents from **abuse and neglect**. Residents have the right to be free from any verbal, sexual, physical, or mental abuse. CNAs play a critical role in **protecting residents** from abuse and neglect, as they are on the front line of care in nursing homes.

In this lesson, CNAs will learn ways to prevent abuse and neglect based on the various types. They will examine the role that **caregiver stress** can play in elder abuse and recognize some of the signs of stress that can lead to abuse. CNAs will also learn the **signs** of resident abuse, the signs of neglect, and how to report abuse and neglect.

Have a good day of training, and stay tuned for next month's issue of **CNA Training Advisor**, which will cover caring for residents with diabetes.

### Everyone must be involved

For a facility to provide the highest possible level of care to its residents, all staff members must be involved and invested in the residents' well-being. Have you witnessed any type of elder abuse or neglect? If so, it is your responsibility to notify your supervisor so the appropriate measures can be taken, and so the wrongful behavior can be prevented in the future.

### PROGRAM PREP

#### Program time

Approximately 30 minutes

#### Learning objectives

Participants in this activity will learn how to:

- Prevent elder abuse and neglect
- Manage stress
- Recognize signs of abuse and neglect
- Report elder abuse or neglect to their supervisor

#### Preparation

- Review the material on pp. 2–4
- Duplicate the **CNA Professor** insert for participants
- Gather equipment for participants (e.g., an attendance sheet, pencils, etc.)

#### Method

1. Place a copy of **CNA Professor** and a pencil at each participant's seat
2. Conduct the questionnaire as a pretest or, if participants' reading skills are limited, as an oral posttest
3. Present the program material
4. Review the questionnaire
5. Discuss the answers

### Tips and tools for CNA training

Looking for more information about CNA training? Sign up to receive the **LTC Nursing Assistant Trainer**, a free biweekly e-newsletter that addresses all of your training needs. The **LTC Nursing Assistant Trainer** provides training tips on nursing measures, best practices, and other crucial aspects of job training for CNAs. This free e-newsletter gives you valuable information and tools to help you conduct efficient, innovative training for every CNA in your facility.

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## ELDER ABUSE PREVENTION

The definition of elder abuse covers any mistreatment or neglect of an elderly person. Everyone has the right to be treated with respect, including your residents.

The following are some of the ways in which elder abuse may occur within nursing homes:

- **Psychological abuse:** Causing emotional or psychological pain, whether through isolation, verbal abuse, threats, or humiliation
- **Neglect:** Failing to provide something necessary for health and safety, such as personal care, food, shelter, or medicine
- **Physical abuse:** Using physical force to cause pain or injury
- **Rights violations:** Confining someone against his or her will, or strictly controlling the elder's behavior, including improper use of restraints and medications to control difficult behaviors
- **Financial abuse:** Stealing or mismanaging the money, property, or belongings of a resident, also known as exploitation
- **Sexual abuse:** Forcing sexual contact without the resident's consent, including touching or sexual talk of any nature
- **Overmedication**
- **Denying aids**
- **Dirty living conditions**
- **Inadequate heating or air-conditioning**

### Breaking the ADL Code

Don't let inaccurate ADL scoring hinder your reimbursement under the MDS 3.0. Use this comprehensive, 20-minute video to train your entire nursing team—CNAs, RNs, and MDS coordinators—on the new ADL documentation requirements under the MDS 3.0.

Familiar scenarios illustrate the ADL coding changes, provide concrete examples of each level of scoring, and walk CNAs and RNs through the correct ways to code the four late-loss ADLs. In addition, MDS coordinators will discover how to tabulate the ADL scores of each resident to come up with the final ADL codes, which ultimately determine reimbursement.

The DVD includes a set of valuable tools that you can download and distribute to your staff, including:

- A 10-question comprehensive quiz to test your nursing staff's retention and understanding of the video's content
- An achievement certificate to document training
- CMS' ADL self-performance algorithm
- A flow sheet for CNAs to document ADLs
- A list of definitions related to ADLs and the MDS 3.0

**For more information about Breaking the ADL Code: A Team Approach to MDS 3.0 Documentation, visit [www.hcmarketplace.com/prod-8756](http://www.hcmarketplace.com/prod-8756).**

You should be concerned if you see a resident exhibiting the following new behaviors or signs, as all indicate possible abuse or neglect:

➤ **Personality and behavior changes:**

- Becoming withdrawn, unusually quiet, depressed, or shy
- Becoming anxious, worried, or easily upset
- Refusing care from caregivers
- Not wanting to be around people
- Not wanting to see visitors

➤ **Physical conditions:**

- Bruises or burns
- Vaginal bleeding in women or bruising of the genitals or thighs
- Fractures
- Unreasonable or inconsistent explanations for injuries
- Frequent emergency room visits

➤ **Signs of neglect:**

- Weight loss
- Malnutrition
- Dehydration
- Insufficient clothing or shoes
- Insufficient basic hygiene items
- Medications not filled or taken
- Doctor visits not scheduled or kept
- Unclean appearance
- Foul smell
- Pressure ulcers or skin sores
- Overall declining health

Although most of these things are controlled in an institution, it is possible for them to occur in any setting. Abusive or neglectful caregivers can be professionals as well as family members, so it is important for everyone to be alert to the signs.

### Reporting abuse and neglect

Anyone who knows of an elderly person being abused or neglected is obligated to notify the proper authorities. Reporting procedures vary from state to state. In a long-term care facility, any CNA who suspects abuse of a resident by either a family member or another professional caregiver should first report it to his or her supervisor.

CNAs should become familiar with any statements or rights that their state has in place to protect the elderly and residents of long-term care facilities. CNAs should ask their supervisor for copies of relevant documents.

Every state has an office or department that deals with elderly abuse and neglect. There are different names for these offices (e.g., human services, adult protective services, health and welfare, and department of aging). Write down the name and number of your state agency and know where you can access it at all times.

**ELDER ABUSE PREVENTION**

**Protecting residents from mistreatment**

Nursing homes have a responsibility to protect residents from abuse and neglect. Failure to protect residents is a common charge for lawsuits. Most often, the facility is charged with neglect resulting from conditions such as:

- Pressure ulcers
- Malnutrition
- Dehydration
- Injuries from falls

Neglect is the failure to provide goods and services necessary to avoid physical harm, mental anguish, or mental illness. Neglect occurs on an individual basis when a resident does not receive care in one or more of the activities of daily living. Some examples of this are failure to:

- Bathe residents regularly
- Frequently monitor a resident who is incontinent, resulting in him or her being left to lie in urine or feces
- Turn and reposition a resident to prevent pressure ulcers

Failure of the nursing home to report neglect of this type is a common claim in lawsuits.

Although the lawsuit may list another factor as the major reason for the suit, bringing up many lesser problems often strengthens the case against a nursing home by proving an ongoing pattern of poor care.

**What facilities must do**

Abuse and neglect of nursing home residents is a crime. Individuals who carry out abusive or neglectful actions in a SNF will be reported to law enforcement authorities for prosecution.

All facilities, including yours, have policies and procedures expressly forbidding abuse and neglect of residents.

To reduce legal exposure and help prevent elder abuse and neglect, nursing homes should consider doing the following:

- Make clear to staff that the facility's abuse and neglect policies allow zero tolerance
- Create policies and procedures for education, prevention, reporting, investigation, documentation, and response to reports of abuse and neglect
- Complete criminal background checks for every employee
- Check references, state registries, and licensure boards when hiring new staff and maintain records of those checks
- Perform drug and alcohol tests upon employment and conduct random testing of current employees
- Ensure adequate staffing
- Teach staff how to identify and manage stress and burnout, and how to receive help doing so, if necessary
- Provide resources for employees to use if they need stress and anger management
- Teach staff members how to manage residents with aggressive or combative behavior, verbal aggressiveness, and catastrophic reactions
- Evaluate employee discipline situations, incident reports, and other problematic matters to determine whether the matter could be misconstrued as neglect

**Questions? Comments? Ideas?**

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## ELDER ABUSE PREVENTION

- Immediately investigate reported or suspected cases of abuse and neglect and report to the appropriate state survey agency as required by law

### Ways to reduce stress levels

Most people who become healthcare workers do so because they like caring for people.

Abusing residents is the last thing they would think of doing. However, sometimes dealing with one's own problems in addition to the demands of caring for difficult residents can cause CNAs to become very stressed and frustrated.

It is extremely important for CNAs to monitor their own stress level and find ways to reduce it when it becomes too high.

There are several ways to reduce stress levels when caring for difficult or disruptive residents. Possible responses to these situations include the following:

- Try to identify the cause of your irritation and, if possible, deal with it in a healthy fashion
- Keep in mind that a resident's behavior is likely not directed toward you, but caused by a physical or mental condition
- Make sure the resident is safe, then leave the room
- Speak with your supervisor about the problem
- Request another assignment

### Are you an overly stressed caregiver?

Caregiver stress can be a problem for anyone caring for the elderly, and it can certainly lead to abuse in a facility setting. Respond to the following 10 statements "yes" or "no":

1. I am frequently unable to sleep because I have so much on my mind.
2. Most of the time, I don't feel very good.
3. I have difficulty concentrating throughout the day and often forget to perform routine tasks.
4. I feel depressed or sad much of the time.
5. I feel worried and anxious almost all of the time.
6. I lose my temper easily and become angry at other people.
7. I don't think there's anything wrong with me; I just wish everyone else would stop doing things that upset me.
8. Most days I feel irritable and moody, and I often snap at other people.
9. I feel tired almost all the time and just drag myself through my days.
10. I'm too busy to do anything fun or to enjoy the company of my family and friends.

"Yes" answers could be a sign of excessive stress. More than three "yes" answers should prompt CNAs to talk to their supervisors or a physician about the way they are feeling. Caregivers who are feeling too much stress are more likely to abuse or neglect the people in their care. To be a good caregiver, you must care for yourself, as well as others. ■

### What is self-neglect?

Elder abuse and self-neglect are two separate yet related sets of behaviors and interactions. With self-neglect, the harm or the potential for harm is created by one's own behaviors rather than resulting from others' actions. Both elder abuse and self-neglect are important because both compromise health, decrease quality of life, and threaten longevity.

Self-neglect occurs when vulnerable elders fail or refuse to address their own basic physical, emotional, or social needs. Examples include self-care tasks such as nourishment, clothing, hygiene, and shelter; proper/appropriate use of medications; and managing or administering one's finances.

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## ELDER ABUSE PREVENTION

*Mark the correct response.*

Name: \_\_\_\_\_

Date: \_\_\_\_\_

1. Failing to provide a resident with something necessary for health or safety, such as personal care, food, shelter, or medicine, is known as \_\_\_\_\_.
  - a. psychological abuse
  - b. neglect
  - c. physical abuse
  - d. rights violations
2. Confining a resident against his or her will, or strictly controlling the individual's behavior, including improper use of restraints and medications to control difficult behaviors, is known as \_\_\_\_\_.
  - a. psychological abuse
  - b. neglect
  - c. rights violations
  - d. denying aids
3. Exploitation is a form of abuse that involves \_\_\_\_\_.
  - a. physical harm
  - b. emotional harm
  - c. overmedication
  - d. misuse or theft of money or property
4. Which of the following is NOT a personality or behavior change that is often a sign of abuse or neglect?
  - a. Frequent eating
  - b. Becoming withdrawn, depressed, or shy
  - c. Refusing care from caregivers
  - d. Not wanting to be around people
5. \_\_\_\_\_ is a sign of neglect.
  - a. Weight loss
  - b. Dehydration
  - c. Unclean appearance
  - d. All of the above
6. If a CNA suspects abuse of a resident by either a family member or another professional caregiver, he or she should first report it to the resident's primary contact family member.
  - a. True
  - b. False
7. Failure to complete any one of the following tasks is an example of neglect: bathing a resident regularly, monitoring his or her incontinence and providing proper care for that condition, or turning and repositioning the resident to prevent pressure ulcers.
  - a. True
  - b. False
8. Methods of abuse prevention include \_\_\_\_\_.
  - a. employee training and education
  - b. criminal background checks for every employee
  - c. both a & b
  - d. neither a or b
9. It is not important for facilities to teach staff how to manage residents with aggressive or combative behavior, verbal aggressiveness, and catastrophic reactions.
  - a. True
  - b. False
10. Caregivers who are feeling too much stress are \_\_\_\_\_ likely to abuse or neglect elderly residents.
  - a. more
  - b. less
  - c. Neither a or b; there is no correlation between caregiver stress and resident abuse