

#### RECOGNITION

# Session 3: Violence against older persons in residential care facilities

### Materials for this session<sup>6</sup>

- Sign-in sheet
- Participant Manual, one for each participant
   OR copy of Module 3 for each participant (Manual pages 42-57)
- Trainer Notes
- PowerPoint
- Handouts
- Participant Evaluation Form #1
- Compilation and Summary of Data Collected with Evaluation Form #1 (for Trainer's use)

# **Key points in Module 3**

- All types of violence of older persons that occur in the home or community can also happen in residential care facilities.
- Institutions exist because large numbers of people working together are able to do more good than individuals working on their own. The collective nature of institutions also means there is a greater potential for violence, since there are more people and more interactions.
- In Newfoundland and Labrador, there are several kinds of residential care facilities where older persons live. In this module, we refer primarily to the two most common models of residential care, the *Personal Care Home* and the *Long-term Care Home*.
- On average, women live longer than men. This leaves them at greater risk of violence at home or in residential care facilities.
- Most violence committed against older persons in residential care facilities involves failure to respect their basic rights.

<sup>&</sup>lt;sup>6</sup> See pages 28-29 in this Guide for a Training Checklist and a list of materials, supplies and equipment for each training session.

<sup>&</sup>lt;sup>7</sup> Government of Newfoundland and Labrador. (no date). *Provincial Healthy Aging Policy Framework*. Retrieved from: http://www.health.gov.nl.ca/health/publications/ha\_policy\_framework.pdf.

- Systemic violence refers to practices (within an institution or organization) that have a harmful impact on subordinate group members even though the organizational norms and rules were created with no intent to cause harm.
- Violence can happen in all kinds of residential care facilities. This
  includes those with good reputations. The reasons for this vary.
  - Smaller private residences may lack funds to meet growing needs.
  - Larger long-term care homes tend to be more rigid and bureaucratic. These homes may become more impersonal and de-humanizing.
- When an older person moves into a residential care facility, it becomes the facility's duty to provide care. The Government of Newfoundland and Labrador is committed to improving the quality of life for all citizens. To help achieve this goal, Operational Standards for personal care homes and long-term care homes were developed.
- Residents have the same rights as all other adults. They do not "leave their rights at the door". Residents and their families may not know that they have the same rights as people who live in the community.
- There are a number of practices that show promise in preventing violence against older persons in residential care facilities, for example:
  - Regular meetings should be held with families to ensure they are satisfied with the level of care being provided to their family member.
  - Residential care facilities should be encouraged to have older persons (residents and patients) and their families participate on boards and steering committees.
  - Conduct awareness-raising campaigns on ageism and violence against older persons.
  - o Train staff to effectively meet the care needs of residents.



## **RECOGNITION**

# Session 3: Violence against older persons in residential care facilities

### **AGENDA**

Activity #	Activity	1.5 hour session	Materials
	Welcome	10 minutes	PowerPoint
	Welcome participants.		slides 1-2
	Introduce yourself if		Participant
	necessary.		Manual
			OR one copy
	Participant Introductions, if		of Module 3
	necessary		for each
	Small group: have		participant
	participants introduce		' '
	themselves one at a time to		
	the whole group.		
	Large group: have		
	participants introduce		
	themselves to one or two		
1	people sitting next to them.		
	Housekeeping		
	Make announcements, such as:		
	<ul> <li>Details about refreshment</li> </ul>		
	breaks.		
	<ul> <li>Location of washrooms.</li> </ul>		
	Time the session will end.		
	Guidelines for being together		
	(See some examples on p.14)		
	Today's topic		
	Briefly explain that this is		
	Session 3 in the Respect		
	Aging training program.		

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	Today's topic is <i>Violence</i>		
	against Older Persons in		
	Residential Care Facilities.		
	Agenda		
	Review Agenda.		
	<ul> <li>If participants do not have</li> </ul>		
	their own copies of the		
	Manual, hand out copies of		
	Module 3.		
	Brainstorming	5 minutes	PowerPoint
	Ask the group to call out		slide 3
	definitions of "institution".		
	Ask for examples of		
2	institutions. These could		
2	include schools, churches,		
	hospitals, etc.		
	Show the definition of institution are alide. 2.		
	institution on slide 3.	00!	D D: (
	Learning together	30 minutes	PowerPoint
	Ask for three volunteers to		slides 4-17
	read out the Stories from the		<ul> <li>Handout 1</li> </ul>
	Front Lines from the		
	Handout, one volunteer for		
	each story.		
	<ul> <li>Ask participants to keep</li> </ul>		
	these stories in mind as you		
3	go through the material for		
3	today.		
	Show the slides.		
	<ul> <li>Refer to the Additional</li> </ul>		
	Notes on the Notes		
	pages of the slides for		
	discussion questions to		
	encourage participation.		
	Use the Stories from the		
	Front Lines as examples or		
1	i ioni Lines as examples ul	I	1

	when posing questions.		
4	<ul> <li>Small group activity</li> <li>Divide participants into small groups of 3-6.</li> <li>Trainer tip: Mix up the groups to allow people to meet new contacts.</li> <li>Ask each group to respond to the Question on the Questions for Reflection Handout.</li> <li>Ask each group to appoint a recorder and reporter.</li> <li>Ask each group to make two lists on flipchart paper in response to the question.</li> <li>Have them prepare to report back to the larger group. Tell them to keep responses anonymous.</li> </ul>	15 minutes	<ul> <li>Handout 2</li> <li>Flipchart</li> <li>Markers for each group</li> </ul>
5	<ul> <li>Reporting back</li> <li>Bring the large group back together.</li> <li>Ask each reporter to share the group's responses.</li> <li>Ask for comments from the group. Ask, "Looking at these lists, what do you notice?"</li> <li>Trainer tip: These lists are the personal preferences of participants. There are no right or wrong answers.</li> </ul>	20 minutes	Masking tape
6	Wrap-up / Evaluation  Distribute Participant Evaluation Form #1 and ask participants to complete	10 minutes	<ul><li>Participant Evaluation Forms</li></ul>

<ul> <li>them.</li> <li>Do a final go-round. Ask participants to briefly share how the session was for them.</li> <li>Ask how they will use what they have learned in their work or interactions with older persons.</li> <li>Thank participants for their input, sharing and time.</li> <li>Collect Participant Evaluation Form #1.</li> </ul>		
Total time	90 minutes	

#### **IMPORTANT!**

After facilitating this session, please complete the form titled **Compilation** and **Summary of Data Collected with Evaluation Form #1** (page 221). Your feedback will help us keep project materials relevant, useful and upto-date. Mail or fax within one week of the session to:

Provincial Training Coordinator Women's Policy Office/Violence Prevention Initiative Government of Newfoundland and Labrador Confederation Building, 4<sup>th</sup> floor, West Block St. John's, NL A1B 4J6

PHONE: (709) 729-5009 FAX: (709) 729-1418 EMAIL: vpi@gov.nl.ca

# RECOGNITION – SESSION 3 HANDOUTS

#### **HANDOUT 1: STORIES FROM THE FRONT LINES**

#### Michael

Michael, 87, lives in a long-term care home. He is blind, and has diabetes and mild dementia. Michael does not like having his blood sugar checked. Sometimes, staff will sneak up and restrain him to get a blood sample. This often leaves bruises. Michael also requires help with meals, but the home has limited staff resources. If no one is there to help him eat, his meal is often taken away before he has finished.

#### Stan

Stan, 69, just moved to a long-term care home. He was very capable of getting to the bathroom with a little help. Stan was put into an adult diaper soon after moving in. He asked for help to go to the bathroom and was told, "Your toilet is on you now".

#### Stella

Stella, 61, was diagnosed with Alzheimer's disease when she was 48. She had to move into the dementia unit of a hospital when she was 60. Stella was sexually attacked by another patient. The family expected the police to be called. Management did not do so. The family tried to have patients better monitored to prevent this from ever happening again. Management will not admit that the attack happened, even though there were witnesses.



#### **HANDOUT 2: QUESTION FOR REFLECTION**

1. List the things that define "quality of life" for you. What makes your life worth living? Now imagine that you are living in long-term care. Define "quality of life" for yourself in that situation. Is this definition the same as the first? If not, what has changed? What does this tell you?