ELDER ABUSE

Are you worried your PATIENT is being abused?
Ask for Help: Notify your CLM and/or other team members as appropriate.
Keep the patient/SDM involved and informed.

Do you think your patient is at significant risk of serious bodily harm?

*You may disclose personal health information to the Police to eliminate or reduce a significant risk of serious bodily harm*

Questions to help you decide if you can disclose:
- Is there a clear risk to the patient?
- Is there a risk of serious bodily harm or death?
- Is the danger imminent?

YES
Call Police

NO
Continue

Do they reside in a Long Term Care (LTC) Home?

YES
You must report your concerns to the Long Term Care Action Line at: 1 866 434 0144

NO
Continue

Do they live in a Retirement Home?

YES
You must report your concerns to the Registrar of Retirement Home Regulatory Authority: 1 855 275 7472

NO
Continue

Is the patient capable of making decisions about your concerns and the help you’d like to offer?

A person is capable with respect to a treatment, admission to a care facility or a personal assistance service if the person is able to understand the information that is relevant to making a decision about the treatment, admission or personal assistance service, as the case may be, and able to appreciate the reasonably foreseeable consequences of a decision or lack of decision. HCCA, 1996, c. 2, Sched. A, s. 4 (1).

YES

UNSURE
Ask for Expert Help: MD, Geriatrics, Psychiatry, SW...

NO
Contact and/or establish the SDM providing they are not alleged abuser

Does the patient consent to your intervention?

YES:
- Provide practical, emotional and medical support.
- Discuss and prepare a plan for safety.
- Contact Police if patient consents.
- Explore alternative living arrangements as necessary.

NO:
- Offer support as able to discuss family stress, caregiver burnout, challenging relationship, make a safety plan and refer to community supports as permitted.
- If there is no SDM determine if patient is capable of assigning POA.
- If responsible party is the alleged abuser OR if the patient is suspected to be incapable of making decisions around their property or personal care needs and you are worried that serious effects are occurring/may occur as a result, contact the Office of the Public Guardian and Trustee for assistance at 416 327 6348

DOCUMENT
TIPS FOR WORKING WITH ELDERLY PATIENTS
THOUGHT TO BE AT RISK OF HARM

Physical Abuse • Sexual Abuse • Neglect • Financial Abuse • Emotional Abuse

• Meet in a private place if possible.
• Explain why you’re asking these questions i.e.: “I am asking these questions because I am worried about you. I want you to be safe”.
• Use active listening skills to support and encourage the patient.
• Proceed at a pace that is comfortable for the patient.
• Communicate information about abuse in a matter of fact way (i.e. this is not your fault, abuse does not tend to stop on its own, it is normal to be reluctant to seek help etc)
• Work to develop a safety plan. A safety plan is a plan that the patient can refer to in an emergency and their safety should be the focus. Provide a list of emergency contacts and telephone numbers that the patient can call in an emergency.
• Document the details of your interaction and inform the patient about what you are doing.
• Ask for help! You don’t have to do this on your own. Speak to your team for assistance.

Resources
If your Program does not have a Social Worker, you can call the SW Office at x5090 during office hours (Monday-Friday 8:00am-4:00pm) and ask for a telephone consultation from a Social Worker with expertise in this area. A Social Worker with expertise in this area will call you back and try and help.

If you need help outside of these hours, you can try:
• PC Fleischmann, Toronto Police Service, 416 808 7040
• Advocacy Centre for the Elderly, 416 598 2656
• Senior Safety Line, 1 866 299 1011
• Office of the Public Guardian and Trustee, 1 800 366 0335
• COSS, Crisis Outreach Service for Seniors, 416 640 1459
• SCAL, Senior Crisis Access Line, 416 619 5001