## Part C Elder Abuse in the Long-Term Care Facility



More than two out of every five Americans will need long-term care at some point in their lives.

Long-term care encompasses a wide variety of settings and services designed specifically to meet the special needs of elders. Long-term care services can be found in settings such as skilled nursing facilities, residential care facilities for the elderly, intermediate care facilities and sub-acute care facilities.

Long-term care may include medical assistance, such as administering medication, ambulation assistance, or performing rehabilitation therapy. But more typically it involves assistance with the activities of daily living, including personal hygiene, dressing, bathing, meal preparation, feeding, and travel to medical services. It often includes supervision, such as protecting a person from wandering away or inadvertently injuring themselves.

These facilities are generally licensed by either the California Department of Health Services or the California Department of Social Services.

## How to Choose a Long-Term Care Facility

Choosing a long-term care facility, such as a skilled nursing facility or a residential care facility, is one of the most difficult decisions one can make.

## The Following are Some Suggestions for Selecting a Long-Term Care Facility:

- Plan ahead. This gives you and your family more control and can help make sure that your needs are met.
- Visit on-line resources such as those listed in Chapter 3 of this booklet. These on-line resources provide information on long-term care, including facility profiles. Facility profiles contain everything from the location, size and type of the facility and its staff to a history of a facility's violations of California and federal care laws.
- Visit the facility and meet the administrator.
   Ask to see the entire facility, not just one wing or floor.
- Ask to see the facility's license and the latest inspection report by either the Department of Health Services or Social Services on the facility's performance.
- Try to visit the facility more than once and at different times of the day. Make a point to visit at mealtimes, during activity periods and also at nights and on the weekends.

- Try to choose a facility that is close and convenient to those who will be visiting most often. When family and friends are able to visit frequently, they can oversee the resident's condition and actively participate in care decisions. It also enables family or friends to be able to respond quickly in times of emergencies.
- Contact your local Long-Term Care
   Ombudsman for information about a
   particular facility. Talk to friends, other
   residents' family members or any other
   individuals who may be familiar with
   the facility.
- Be observant. When visiting or making inquiries, pay attention to how residents are treated by staff members. Nothing is more important than the quality and quantity of facility staff.
- Don't be afraid to ask questions. Does the facility offer the religious or cultural support the elder resident needs? Does the facility provide an appropriate diet? Is the primary language of the resident spoken by the staff?

## **Recognizing the Warning Signs**

The existence of any one or more of these indicators does not necessarily mean that abuse has occurred. Instead, treat them as signs that diligent attention or investigation is needed.

### **Physical warning signs:**

• Call light is not functioning or is removed from resident's reach

• Development or worsening of pressure sores

• Excessive weight loss

• Unusual or recurring scratches, bruises, skin tears or welts

• Bilateral bruising (bruises on opposite sides of the body)

- "Wrap around" bruises (bruises that typically encircle the arm)
- Torn, stained or bloody underclothing
- Signs of excessive drugging
- Foul smelling, uncombed or matted hair
- Patches of hair missing or bleeding scalp
- Injuries that are incompatible with explanations
- Injuries caused by biting, cutting, pinching or twisting of limbs
- Burns caused by scalding water, cigarettes or ropes
- Any injuries that reflect an outline of an object, for example a belt, cord or hand



### **Behavioral warning signs:**

- Withdrawn
- Confused or extremely forgetful
- Depressed
- Helpless or angry
- Hesitant to talk freely
- Frightened
- Secretive

#### **Isolation warning signs:**

Isolation of an elder is an insidious tool used by many abusers. Accomplished with the systematic exclusion of all real outside contact, the elder victim is eventually driven to distrust friends, doctors and even close family members. Ultimately, the elder victim becomes a pawn – manipulated into trusting only the abuser.

• Family members or caregivers have isolated others, including family, visitors, doctors, clergy or friends.

the elder, restricting the elder's contact with

• Elder is not given the

opportunity to speak

freely or have contact

### **Financial abuse warning signs:**

- Disappearance of papers, checkbooks or legal documents.
- Staff assisting residents with credit card purchases or ATM withdrawals.
- Lack of amenities, such as appropriate clothing, grooming items, etc.
- Bills unpaid despite availability of adequate financial resources
- Unusual activity in bank accounts, such as withdrawals from automatic teller machines when the person cannot get to the bank.
- Provision of services that are not necessary or requested.
- The appearance of a stranger who begins a



esidents of skilled nursing facilities are guaranteed certain rights and protections under federal and state law. Facilities are required to provide a copy of these rights to individuals upon admittance to a facility. For more information and a complete listing of residents' rights, contact the California Department of Health Services at: www.dhs.ca.gov/ LNC/nhrights/

## Residents

## Each resident has the right to:

## Dignity & Privacy:

- Be treated with consideration, respect and dignity
- Privacy during treatment and personal care
- Receive and make phone calls in private
- Send and receive mail unopened
- Visit privately with family, friends and others

## **Medical Condition & Treatment:**

- Be fully informed by a physician of his or her total health status
- Participate in health care planning and treatment decisions
- Choose a personal physician
- Be free from unnecessary drug treatment

# Bill of Rights (Partial list)

## Abuse & Chemical & Physical Restraints:

- Be free from verbal, sexual, physical and mental abuse, corporal punishment and involuntary seclusion
- Be free from any physical or chemical restraints - given for the purposes of discipline or staff convenience - which are not required to treat the resident's medical symptoms

## Safety & Hygiene:

- Receive care from an adequate number of qualified personnel
- Receive care necessary to ensure good personal hygiene
- Receive care to prevent and reduce both bedsores and incontinence
- Receive food of the quality and quantity to meet the resident's needs in accordance with a physician's orders
- Reside in a facility which is clean, sanitary and in good repair at all times

## Transfer & Discharge:

- Be transferred or discharged only if he or she has recovered to the point of not needing nursing facility care
- Be transferred or discharged only if it is necessary for the resident's welfare or if his or her needs cannot be met in the facility
- Be transferred or discharged only if the health or safety of others is endangered
- Be transferred or discharged if he or she has failed to pay for care or the facility ceases to operate

#### Grievances:

 Voice grievances and recommend changes in policies or services to facility staff, free from restraint, discrimination or reprisal