

KEEPING OUR SENIORS SAFE



A Community Resource Guide for Service Providers

July 2004

COMMUNITY HEALTH PARTNERS
BRANDON MANITOBA

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In response to an increasing awareness of abuse towards elderly individuals, the Brandon Regional Health Authority invited many service providers in our community together to become versed in the network of supports available to confront these issues.

As the population begins to visibly age with larger numbers of elderly in our communities, the growing awareness of elder abuse is being more widely discussed. It is not new and solutions not easily found.

In the spring of 2003, the Brandon Community Health Partners extended an invitation to a wide network of service providers in the community. The purpose was to develop a Resource Manual for the Brandon Region for education on Elder Abuse and to provide linkage to resources available in the community when encountering situations of abuse.

We would like to acknowledge the Assiniboine Regional Health Authority who worked at the development of a provincial template on an Elder Abuse Resource Guide, and also the participation of the following agencies and/or individuals:

- Addictions Foundation of Manitoba
- Alzheimers Society of Manitoba
- Brandon Civic Seniors
- Brandon Friendship Centre
- Brandon Police Service
- Brandon Seniors for Seniors Coop
- Bank of Nova Scotia
- Canadian Imperial Bank of Commerce
- Centre for Geriatric Psychiatry - BRHA
- Community Mental Health – BRHA
- Crocus Credit Union
- Home Care – BRHA
- Manitoba Housing
- Manitoba Metis Federation
- Mental Health Services for the Elderly - BRHA
- Public Health - BRHA
- Public Trustee
- Social Work – BRHA
- Sokol Manor Supportive Housing
- Veterans Affairs Canada
- Volunteer Services – BRHA
- YWCA Westman Women's Shelter
- S. Crichton, Elder Abuse Consultant - MB Seniors Directorate

Keeping Our Seniors Safe

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Evaluation

Staff of the Manitoba Seniors Directorate has provided expertise in researching and writing the *Elder Abuse Resource Guide*. This guide is a component of the Manitoba government's seniors' strategy *Advancing Age: Promoting Older Manitobans*. This strategy addresses a wide range of issues, ensuring Manitoba is well positioned to respond to the current and future needs of Manitoba's aging population.

BRANDON REGIONAL HEALTH AUTHORITY KEEPING OUR SENIORS SAFE

1.0 INTRODUCTION:

The focus of this Community Elder Abuse Resource Guide is intended for those who have contact with seniors and to help health care providers and other agencies recognize and effectively respond to elder abuse.

The purpose of this Resource Guide is to:

A) Promote:

- Education and awareness about elder abuse
- Linkages between agencies related to elder abuse

B) Identify:

- the rights of individuals
- elder abuse
- signs/characteristics of the abused and the abuser
- high risks for abuser and abused
- the steps to take when abuse is identified
- the appropriate sources of help for the victim and perpetrator
- the roles of community organizations and agencies

2.0 INSTRUCTIONS FOR USE

Please use this document as a resource to guide your actions in assisting in an elder abuse situation. For further copies of the entire document, please visit the Brandon Regional Health Authority Web Page at www.brandonrha.mb.ca. If you have any questions/comments, please contact Brandon Home Care at 571-8416.

3.0 RIGHTS OF THE INDIVIDUAL

Every individual has the right to:

Confidentiality/Privacy

Older individuals have the right to privacy. Most agencies/organizations are governed by privacy policies or legislation that ensures confidentiality is maintained (i.e. Personal Health Information Act).

Freedom of choice...

Older individuals have the right to make decisions and live their lives as they wish provided they do not infringe on the rights or safety of others. This includes the right to refuse assistance and intervention. There may be instances where an individual's ability to make decisions is in question. These situations should be referred to the Doctor.

Safety...

Older individuals have the right to live in safety and without fear. This includes the right to be free from physical, emotional, and financial abuse as well as from neglect.

Information...

Older individuals have the right to information required to make meaningful and informed choices. This includes information about their legal and civil rights, resources and the range of service options available to them to address their needs.

The Basic Necessities of Life...

Older individuals have the right to basic requirements of life: food, clothing, shelter, medical care, etc...

(Source: The Direct Services Committee, Age and Opportunity Elder Abuse Resource Centre; Age and Opportunity Elder Abuse Resource Centre Assessment Protocol December 1992; Winnipeg, Manitoba.)

4.0 DEFINITIONS AND TYPES OF ABUSE:

Definition of Elder Abuse:

Is any action/inaction by a person in a position of trust that results in harm to or jeopardizes the well being or safety of an older person. (See Elder Abuse Decision Tree – Appendix A)

Note: *No single characteristic automatically points to abuse or neglect of the older adult. One should look for multiple factors that might indicate mistreatment. Some adults may have severe physical or emotional problems resulting from disease or the aging process. Indicators that trigger further investigation may include the following:*

Types of Abuse:

1) Physical:

- Any unwanted physical and/or sexual contact.
- Any act of violence or rough treatment.

Possible Indicators of Physical Abuse:

Unexplained:

- | | | |
|---------------------------|-----------------------|--|
| • baldness | • bed sores | • swelling |
| • burns | • scars | • torn, stained, bloody clothing |
| • bumps | • punctured ear drums | • difficulty walking or sitting |
| • falls | • sore throat | • hypothermia (lowered body temperature, blue lips, cold hands, shivering) |
| • cuts, lacerations | • tenderness | |
| • fractures, broken bones | • black eye | |
| • marks | • broken teeth | |
| • infections | • scratches | |
| • internal injuries | • bite marks | |
| • pain | • confusion | |
| • fearfulness | • grip marks | |

Any unusual pattern or location of injury such as clustered bruises or welts, or bruising along the inner arm or thigh, or any other soft body parts such as abdomen, buttocks.

2) Financial Abuse

Any situation involving the dishonest or illegal use of an adult's personal money or property and/or possessions. This includes: - fraud, force, misrepresentation, theft, "conning", extortion, withholding, forced changes of will or property titles, misuse of power of attorney.

Possible Indicators of Exploitation/Financial Abuse:

- signed over power of attorney against own will
- forced to change will or sell house
- used as a babysitter/house sitter
- inadequate living environment
- unable to afford social activities
- possessions disappear such as artwork, jewelry, furs, silverware, vehicles, equipment...
- unexplained or sudden withdrawal of money from accounts
- unexplained or sudden inability to pay bills
- lack of money for food, appropriate clothing, glasses, hearing aid, cane or other walking aids, dentures, or other necessities when income appears potentially adequate
- indicates papers were signed but doesn't know what for
- rent or mortgage in arrears
- bills unpaid (particularly if paying these bills is the responsibility of the alleged abuser)
- pension cheque withheld

3) Emotional Abuse

Any behaviour which provokes fear of violence or isolation, emotional stress or mental anguish. Any behaviour which diminishes a person's sense of identity, dignity, or self-worth. This includes: threatening, name calling, humiliating, withholding affection, social isolation, removal of decision making rights, insulting, harassment, intimidation, coercion.

Possible Indicators of Emotional Abuse:

- appears ashamed
- low self-esteem
- withdrawn, passive
- appears to recoil (flinching, cringing)
- fearful, anxious
- feels guilty without cause
- excluded from family gatherings
- loss of self determination
- does not make decisions
- "baby talk"
- depressed, hopeless, helpless
- agitated
- difficulty sleeping or needs excessive sleep
- tearfulness
- restricted access to: telephone, food, bathroom facilities, family, service providers...
- not permitted to have friends, visitors, go to church or outings

4) Neglect

Withholding any basic needs of life.. This includes: abandonment, confinement, lack of attention, withholding food, hygiene or medical care, denial of clothing, heat, and shelter.

Possible Indicators of Neglect:

- malnourished, overly thin
- no dentures
- dehydration
- mouth sores
- bed sores
- poor skin condition
- poor hygiene
- unpleasant odor
- soiled linen, clothing
- unkempt appearance
- clothes in poor repair or inappropriate for season
- urine burns
- confusion
- over sedation - reduced physical/mental activity
- reduced/absent therapeutic response
- no glasses, hearing aid, cane, walker
- dangerous environment
- unattended, tied to chair or bed
- cancellation of or not taken to doctor/dentist/therapy
- immobility, weakness
- deserted
- home in disrepair
- lack of required safety features in home
- presence of untreated injuries
- medication problems

5.0 PROFILE OR BEHAVIOR PATTERNS IN THE ABUSED OLDER ADULT AND IN THE ABUSER

5.1 The ABUSED OLDER ADULT may exhibit any of the following:

- history of repeated incidents of unexplained accidents or injuries
- medical history does not coincide with presenting injuries
- seek medical attention from a variety of doctors - “doctor shopping”
- postpone seeking medical attention
- frequent use of Emergency Department
- prolonged delay between time of injury and presentation for treatment
- has physical/mental limitations affecting ability for self-care
- gives information reluctantly: waits for caregiver to answer
- avoids physical, verbal, eye contact with caregiver or professional
- hesitant, inaudible, loud, rapid, slow speech
- agitated, anxious, excited, discouraged, fearful, humiliated, overly quiet, resigned, unresponsive, passive
- clenched hands
- rigid
- rocking
- suicidal thoughts or attempts
- crying
- complaints of insomnia
- cringing, flinching
- may indicate a fear of being left alone with the alleged abuser
- drug/alcohol abuse

5.2 The ALLEGED ABUSER may exhibit any of the following:

- refuse to permit hospitalization/diagnostic tests
- ignore victim's hospital admission - doesn't visit
- refuse to participate in discharge planning or take elder home
- be impatient with victim/staff/procedures
- appear fatigued
- respond defensively when questioned
- make excuses
- be hostile, suspicious, irritable, demanding, angry and impatient
- not want victim interviewed alone
- lack remorse
- be depressed
- have erratic behaviour
- abuse substances
- have employment difficulties
- have agist attitudes
- feel excessively burdened by care giving role
- have feelings of anger/frustration
- deny that caregiving has changed lifestyle in any way
- have unrealistic expectations of victim's limits and abilities
- lack understanding of aging process
- intimidate, threatens, insults, or is indifferent to victim
- be reluctant to touch, make eye contact, face or speak directly to the victim
- speak for victim
- be excessively involved with victim or not involved at all
- ignore needs and rights of victim
- make decisions without consulting victim
- treat victim like a child or non-person
- blame victim for problems which are not within the victim's control
- be unwilling or reluctant to comply with service provider when planning for care
- isolate the victim by denying access to friends, visitors, monitoring all social interactions
- use finances
- be caregiver based on financial need

6.0 SOME FACTORS CONTRIBUTING TO THE RISK OF ABUSE:

Intergenerational family violence

- If violence is a typical pattern of family behaviour, abusers may learn to be violent by witnessing it.

Personality traits of abusers

- Studies show that abusers are more likely to have psychological or substance abuse problems than people who are not abusive. Alcohol consumption has also been associated with severe and frequent abuse.

Social Isolation

- As with other forms of family violence, some studies have shown that many abused older people have fewer social contacts than their peers who are not abused. However, it is not clear whether social isolation causes abuse or results from it – both victims and abusers may feel that isolation is necessary to keep the abuse hidden.

Ageism

- Because of the negative stereotypes and attitudes toward aging and older people, some strains of our culture can appear to dehumanize older adults. As a result, it is easier for some to abuse seniors without feeling guilt or remorse. Some older people hold many of these same negative stereotypes themselves. They may think that the abuse is deserved, unavoidable, or not significant enough to warrant help; it is accepted or expected that older people lose power and control over their lives.

Reacting to stress in violent or abusive ways.

- Caring for an older relative can be stressful for families. Caregivers may become angry and frustrated due to a limited understanding of the aging process, a lack of caregiving skills, and inadequate supports or resources. However, caregiver stress does not necessarily lead to violence or abuse.

Spousal abuse.

- Research suggests that older people are frequently abused by their spouses. According to a large national study, 40% of older men and 28% of older women who were abused by a family member were victimized by their spouses – Statistics Canada, 1999). Until recently, spousal abuse among older adults has been largely ignored, even though the number of injuries and level of violence are considered as serious as they are in cases of abuse by adult children toward their parents.

Tolerance of violence in this society.

- The abuse and neglect of older adults does not occur in a vacuum. Rather, it is a product of society's general tolerance and acceptance of violence, demonstrated by the toys children play with, the content of many movies and sports, and the methods used by nations to solve conflicts. This acceptance of violence contributes to the abuse and neglect of older people.

(Source: Abuse and Neglect of Older Adults: Community Awareness and Response, Health Canada, 2002).

7.0 INTERVENTION

There may be opportunities for you to assist individuals in accessing available community services. If you suspect abuse in a situation, you can refer to the Elder Abuse Decision Tree, Appendix A, for assistance.

7.1 Develop a trusting relationship

You can be supportive when talking to the abused person by reminding them of the following:

- it's not their fault.
- they are not alone.
- help is available.
- it is abuse; they don't have to put up with it.
- something can be done

If an individual does disclose abuse to you:

- take the report seriously the first time
- believe the individual
- identify your role as someone who can help
- be non-judgmental – avoid victim blaming
- support the individual:
 - 1) listen and let them talk about their feelings
 - 2) respect their feelings and concerns
 - 3) help them find the good things about themselves

Give clear messages:

- abuse is never okay or justifiable
- personal safety is always the most important issue
- assault is a crime
- they do not cause the abuse
- they are not to blame for the abuser's behaviour
- they cannot change the abuser's behaviour
- apologies and promises will not end the violence
- they are not alone
- they are not crazy
- abuse is not loss of control, it is a means of control

Present options:

- talk about what they can do to plan for their safety
- encourage them to make their own decisions.
- Ask the individual what they want
- Know the key resources in the community and how to contact them (see Appendix B)
- Respect the individual's right to confidentiality and the right to seek or not to seek treatment.

Note: An abused person needs your support and encouragement in order to make choices that are right for them. However, there are some forms of advice that are not useful and are even dangerous for them to hear.

- Don't tell them what to do, when to leave or when not to leave.
- Don't tell them to go back to the situation and try a little harder.
- Don't suggest you try to talk to the abuser to straighten things out.

7.2 Emotional Support

Maintaining contact with the individual provides emotional support to the individual even if it is not outwardly shown to be appreciated – don't give up!

How do I determine what the individual wants?

- Practice active listening, reflect and clarify what you hear
- Ask, discuss, give options
- Allow time for the person to decide what they want
- Support decisions to seek help
- Keep line of communication open for a later time

7.3 Develop a safety plan

The older individual will require assistance to develop a safety plan. This can either be done by yourself or by referring the individual to an appropriate resource (see Appendix B)

7.4 Documentation:

Later in privacy, write down everything that was said and note how the individual looked, reacted, and tone of voice. Document the facts of the situation: who, what, when, why. This will help you sort the reality of the situation in your mind and clarify the problem and the type of intervention that may be required. It will also help your memory if intervention occurs at a later date. As a courtesy follow up with the person making the referral (not specifics).

7.5 Reporting/Not Reporting

To date there is no mandatory legislation for the reporting of elder abuse in community settings as there is for the abuse of children. For more information about elder abuse call 1-888-896-7183. Please note that if your concern relates to a person in an institutional setting there is mandatory reporting as set out in the Protection of Persons in Care Act (toll-free number 1-866-440-6366).

The following provides direction when elder abuse has been disclosed to you:

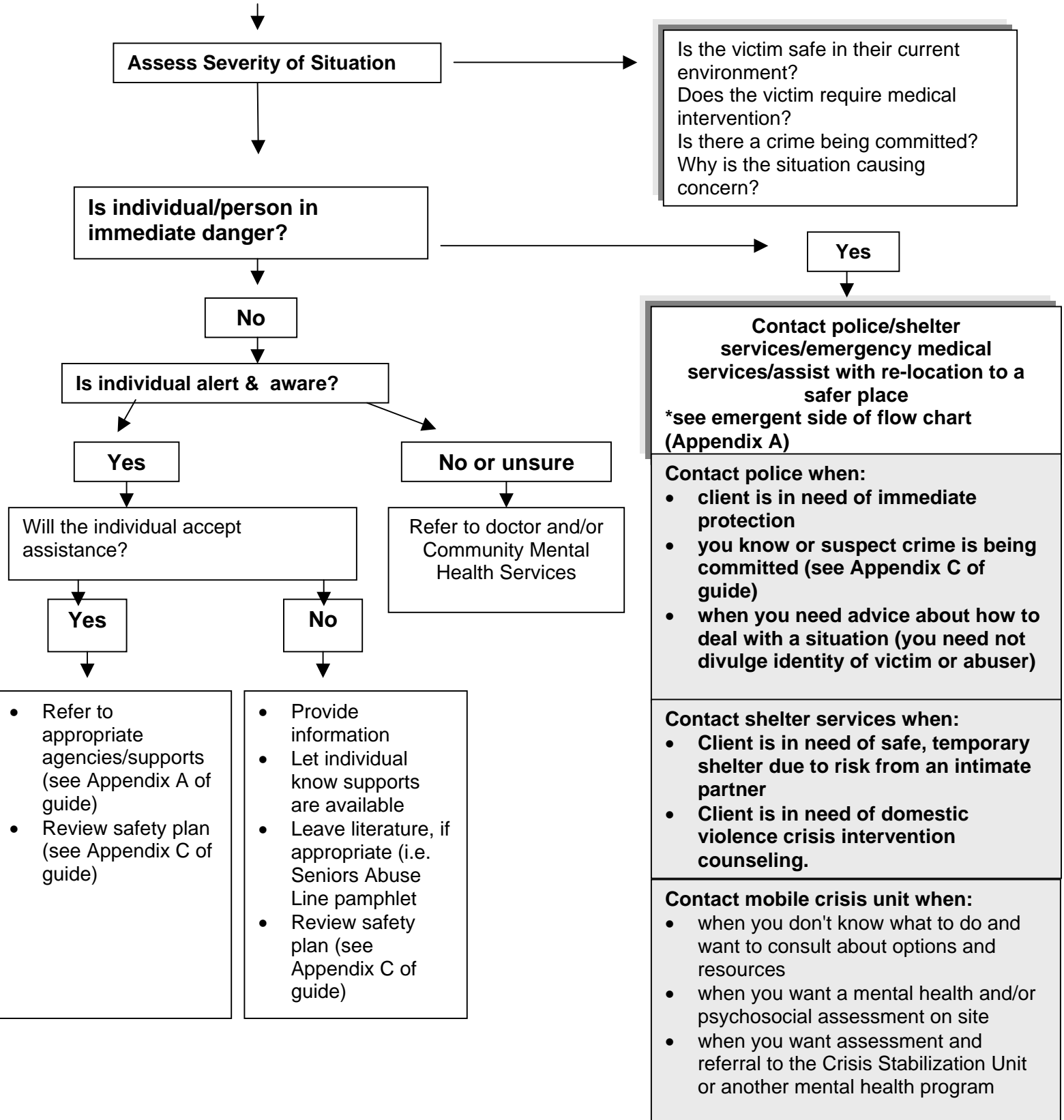
- If the individual is suspected of being in imminent risk of death, serious physical harm or exploitation, dial 9-1-1 or call the police in the area in which the incident is occurring. See Appendix D for more information regarding criminal and non criminal abuse. The person doing the abuse may be in a position to harm others
- If abuse is suspected or individual discloses the abuse see Appendix B for a list of resources. (If you are concerned it is worth investigating further)

8.0 Additional Resources

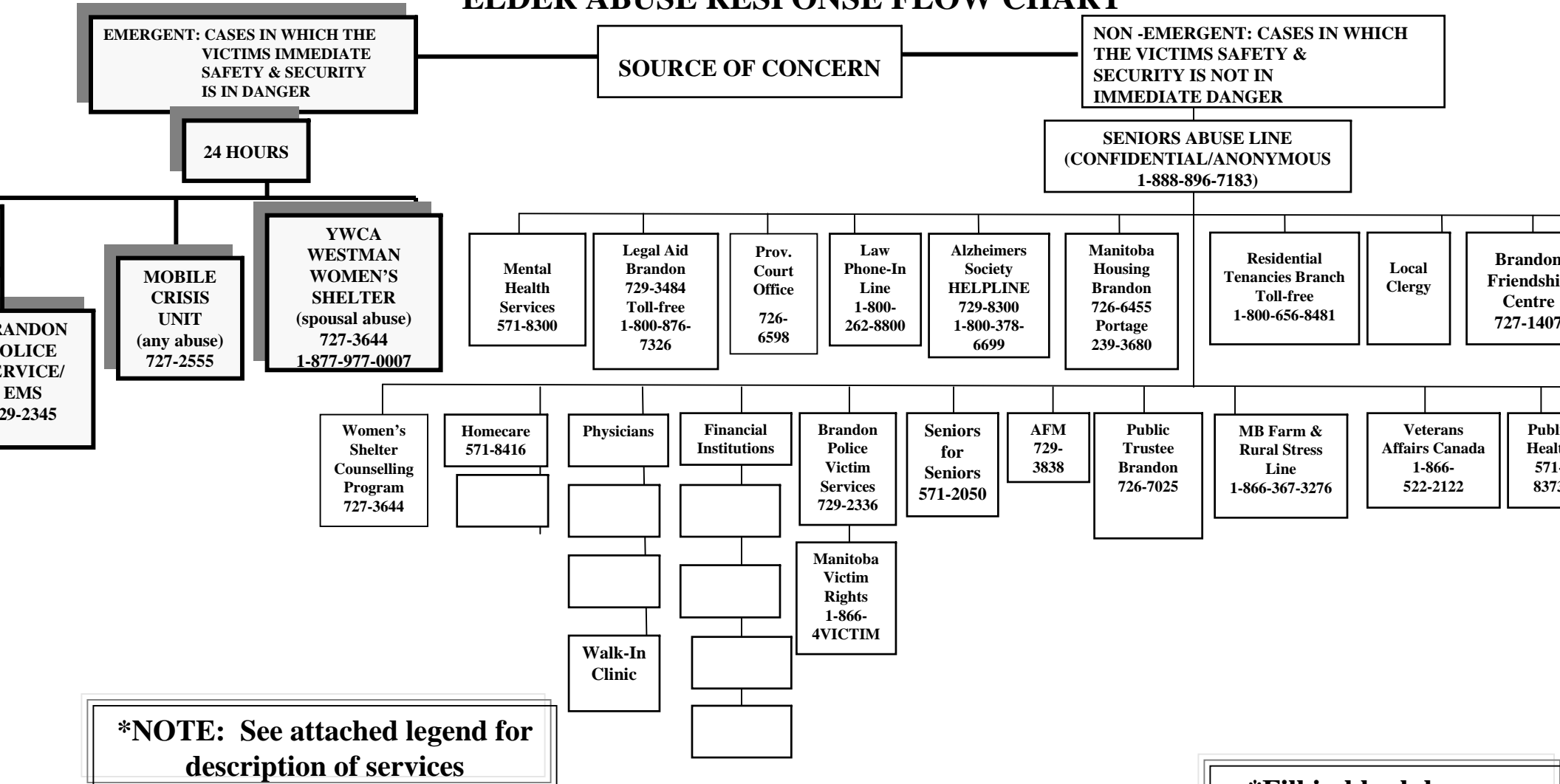
For a list of additional resources see Appendix E.

ELDER ABUSE DECISION TREE – APPENDIX ‘A’

Elder Abuse Suspected (See definitions/indicators pages 5 to 8 of the guide*)



APPENDIX B BRANDON ELDER ABUSE RESPONSE FLOW CHART



**RESPOND IMMEDIATELY
AND
REFER FOR FOLLOW-UP**

**RESPOND, INVESTIGATE, DEVELOP PLAN
OF ACTION AND FOLLOW-UP**

***Fill in blank boxes as
appropriate for your
area**

APPENDIX B

BRANDON ELDER ABUSE RESPONSE FLOW CHART LEGEND

AFM (Addictions Foundation of Manitoba)

The Addictions Foundation of Manitoba provides prevention, treatment and rehabilitation services for seniors with problems involving the misuse of alcohol or other drugs and gambling. AFM is also a good resource for seniors who are affected by somebody else's use of alcohol or other drugs, or gambling.

Address: 510 Frederick Street, Brandon MB R7A 6Z4

Contact: 729-3838

Hours of Operation: 24 hours per day, 7 days per week

Alzheimer Society of Manitoba

- Alzheimer Help Line 1-800-378-6699 or 729-8320
- Support Group Meetings for families and caregivers
- Support Group for people with Alzheimer disease and related dementia
- Family Education Sessions
- Information and resource materials
- professional education
- Safety Home Registry
- Community Outreach and advocacy
- www.alzheimer.mb.ca

Contact Name: Jolene Balciunas – 729-8320; wmprog@alzheimer.mb.ca

Hours of Operation: Monday to Friday; 8:30 a.m. – 4:30 p.m.

Brandon Friendship Centre

Administers and implements programs to meet the needs of people

Contact: Laura McLean, 727-1407

Hours of Operation: 8:30 a.m. – 4:30 p.m.

Brandon Police Service

Brandon Police Service provides emergency and non-emergency response to complaints of a criminal nature from the public. Complaints related to abuse of an elderly person will be thoroughly investigated by a police officer from either the Patrol Division or the Criminal Investigation Section.

Contact Name: Duty Sergeant – 729-2320 or General Complaints – 729-2345
Hours of Operation: 24 hours per day/7 days/week

Brandon Police Victim Services

The Victim Services Unit will provide support, information and referrals to victims, family members and caregivers following a criminal incident. Services are provided on a case-by-case basis and relate directly to the impact of the crime and ongoing involvement in the criminal justice system.

Contact Name: Jane Hunt – 729-2336 or Michelle Solonyczny – 729-2335
Hours of Operation: Monday to Friday; 8:00 a.m. – 4:00 p.m.

Financial Institutions

It is the financial institution's responsibility to help protect their customers and their money the best way they can. Vulnerable customers may not have any other guidance in protecting their assets and in some cases the financial institutions are their last line of defense. The financial institution may be in a position to recognize potential financial abuse due to their relationship with the client. If there are concerns the staff may speak with the customer directly and explore the situation. If the customer appears competent to make their own financial decisions, their decisions will be respected. If the client does not appear competent and they have a Power of Attorney appointed then staff would disclose their concern and contact their legal department.

Home Care

The Home Care program helps people who need health services and assistance with daily living activities live at home and remain independent for as long as possible.

Some of the services offered by Home Care are personal care, nursing, household assistance, respite, occupational therapy and physical therapy assessments, referrals to other agencies, coordination of community services, and assessments for long term care and specialty services.

Contact: 571-8416; Intake Line 571-8427
Hours of Operation: Monday to Friday, 8:30 a.m. – 4:30 p.m.

The Manitoba Human Rights Commission

The Manitoba Human Rights Commission deals with issues of discrimination, harassment, reasonable accommodation and reprisal in the areas of: Services; Employment; Contracts; Rental of Premises; Purchase of Real Property; Signs.

Our group factors are: ancestry, including color and perceived race; nationality or national origin; ethnic background or origin; religion or creed, or religious belief, religious association or religious activity; age; sex, including pregnancy, the possibility of pregnancy, or circumstances related to pregnancy; gender-determined characteristics or circumstances; sexual orientation; marital or family status; source of income; political belief, political association or political activity; physical or mental disability or related characteristics or circumstances, including reliance on a dog guide or other animal assistant, a wheelchair, or any other remedial appliance or device.

Contact: Toll free at 1-800-201-2551 or 726-6261
Hours of Operation: Monday to Friday, 8:30 a.m. - 4:30 p.m.

Law Phone-In Line

The Community Legal Education association operates a Law Phone-In Line, which provides legal information over the phone on many types of legal problems and can refer to a lawyer if necessary. A referral lawyer will not charge for the first half-hour of consultation. “Shut-in” lawyers are prepared to visit ill, disabled or older clients in hospital or at home.

Contact: Toll Free 1-800-262-8800

Legal Aid

Legal Aid Manitoba assists individuals and groups who require the services of a lawyer and who do not have the means to obtain those services.

Contact: Toll Free 1-800-876-7326 or 729-3484

Manitoba Housing

Tenant Resource Worker

This program coordinates access to information, services and activities to tenants living in the following Senior Housing Complexes: Grand Valley Place, Lawson Lodge, Princess Park, Princess Towers, and Winnipeg House. Part of the responsibilities include: visiting new tenants shortly after they move in, review fire procedures, discuss services available, and complete an evaluation of the application process.

Contact Name and Phone Number: Barb Roque, Tenant Resource Worker - 726-7029

Hours of Operation: 8:30 AM - 4:30 PM

Mental Health Services For The Elderly

Mental Health Services for the Elderly is a group of mental health professionals with specialized training and experience in working with the elderly who have complex mental health care needs complicated by effects of the aging process. The team works closely with the local health care providers and supports, seeing clients in a variety of settings including personal care homes, hospitals, or clients own homes.

Contact: Mental Health Services – 571-8300

Hours of Operation: Monday to Friday, 8:30 a.m. – 4:30 p.m.

Metis Child & Family Support Services

The Metis Child & Family Support Services Department provides advocacy and voluntary support services to Metis children and families through the regional structure of the Manitoba Metis Federation, with emphasis on locating adoptive and foster care resources, and liaising with the Provincial Department of Family Services on child welfare-related concerns of the Metis community. MCFSS offers non-mandated services to the Metis community. A very important part of our program is to assist our Elders in anyway possible.

Contact: Dennis Desjardins – 725-7529

Hours of Operation: Monday to Friday, 8:30 a.m. – 4:30 p.m.

Provincial Court Office – Magistrate or designated Justice of the Peace

The *Domestic Violence and Stalking Prevention, Protection and Compensation Act* offers persons subjected to stalking and domestic violence, the ability to seek a wide range of civil remedies to address their individual needs. People seeking ways to protect themselves can choose from two different types of orders: **Protection Orders** obtained from a designated Justice of the Peace of the Provincial Court of Manitoba and **Prevention Orders** obtained from a Court of Queen’s Bench Judge.

Protection Orders are granted on an emergency basis by a Justice of a Peace, without notice to the *respondent*, and contain conditions which prohibit the *respondent* from having contact with someone (the *applicant*) they have harassed or caused to fear for their own safety. Protection Orders may contain provisions as are necessary for the immediate protection of an applicant. Usually the *applicant* is you – the person seeking protection. In some cases the *applicant* may be another person such as a mentally incompetent person, for whom you are trying to get protection. The *respondent* is the person you are seeking the order against. This is the person you want protection from.

To be eligible for a Protection Order you (or the person for whom you are seeking relief) and the *respondent* must be cohabitants as defined by the *Act*. You are cohabitants if:

- You and the respondent now live together or have in the past lived together in a family, spousal or intimate relationship
- Or you and the respondent are the biological or adoptive parents of a child, regardless of your marital status or whether you have lived together at any time.

CONTACT: Brandon Provincial Court Office – 726-6598

HOURS OF OPERATION: Monday to Friday, 8:30 am – 4:30 pm. An after hours / weekend Magistrate is available in Winnipeg by telephone on an emergency basis to police officers or lawyers assisting individuals to obtain a Protection Order.

Public Health

Public Health Services seeks to strengthen individuals, families and communities through promotion of health and prevention of disease. Health Care professionals work together to empower individuals/families to pursue optimum health through healthy lifestyles. Public Health Services include:

- Prairie Health Matters (Diabetes and Heart Health)
- Audiology
- Public Health Nursing
- Travel Health/Immunization Program
- Communicable Disease Control

Contact: Public Health Coordinator – 571-8373; Reception – 571-8446

Hours of Operation: Monday to Friday, 0830 – 1630 hours

Public Trustee

The Public Trustee provides the following types of trustee services for seniors:

- Acts on behalf of those individuals who, through age, mental illness or disease, are incapable of looking after their personal or financial affairs and have no one to represent them in the management of their affairs;
- Acts as Substitute Decision Maker for personal and financial affairs for Vulnerable Persons living with a disability within the meaning of *The Vulnerable Persons Act*.
- Acts as an official Guardian for the Province of Manitoba.
- Acts as official administrator of deceased persons who have no relatives in the Province of Manitoba capable of doing so.

Contact Name:

Head Office: Phone (204) 945-2700; Fax (204) 948-2251; Mailing Address: 13th Floor
Woodworth Building, 405 Broadway, Winnipeg MB R3C 3L6

Brandon Office: Phone (204) 726-7025; Fax (204) 726-7037; Mailing Address: Room 111 –
340 – 9 Street, Brandon MB R7A 6C2

Residential Tenancies Branch

The Residential Tenancies Branch deals with landlord and tenant relations and related problems, matters pertaining to rent increases of any amount, the allowable rent charges for premises, and general rent controls.

Contact: Toll Free 1-800-658-8481

Seniors Abuse Line

The toll-free Seniors Abuse Line is a confidential information service aimed at providing seniors and others concerned about elder abuse with a one-stop information resource on elder abuse. The abuse line staff can provide information about community resources and support services available to help.

Contact: Toll Free 1-800-896-7183

7th Street Health Access Centre

The Access Centre houses a number of health and social services including a doctor, nurse practitioner, adult community mental health worker, community addictions worker, information and referral for Manitoba Family Services and Housing, the Community Volunteer Income Tax Program (Feb.- Sept.), Travel Health, Harm Reduction Program and Public Health Nursing. Individuals can self-refer to any of the programs/services or be referred from another agency.

Contact: 578-4800

Hours of Service: Currently 12-8, 7 days/week (subject to change after 11/04).

Support Services to Seniors Programs

The Support Services to Seniors program is a resource to assist seniors to remain living independently in the community as long as possible. Seniors Resource Councils act as a point of access for information and referral, as well as identify and develop new services needed for seniors at the local level. These services may include:

- Congregate meals
- Friendly visitors
- Cleaning and home maintenance
- Transportation
- Safety checks (daily hello)
- Lifeline (Personal Emergency response System)
- E.R.I.K. (Emergency Response Information Kits)
- Educational and recreational programs

Hours of Operation: Monday to Friday; 8:30 a.m. – 4:30 p.m.

Call: 571-2050

Veterans Affairs Canada

In recognition of the sacrifices made by Canadians in this nation's war and peacekeeping efforts, Veterans Affairs Canada offers a wide range of services and benefits to qualified Veterans, still-serving Canadian Forces members, RCMP members, and certain civilians, as well as to their dependents or survivors.

Veterans Affairs Canada (VAC) provides a wide array of services and benefits to eligible clients. These services and benefits may include: health benefits including medical, surgical or dental examinations or treatment provided by health professionals; surgical or prosthetic devices or aids and their maintenance; home adaptations to accommodate the use of devices or aids; preventative health care; and prescribed drugs. Clients may also be eligible for the Veterans Independence Program (VIP), a program designed to help clients remain healthy and independent in their own home or community. In addition, clients may be eligible to receive supplementary benefits such as costs associated with travel to receive treatment, and travel costs for medical escort, treatment allowances and costs associated with medical examinations when requested by the Department.

Contact: Veterans Affairs Canada, 1039 Princess Avenue, Brandon MB R7A 4J5, Phone: 1-866-522-2122, Fax: (204) 726-7539; Website <http://www.vac-acc.gc.ca>
Hours of Operation: Monday to Friday, 8:30 a.m. – 4:30 p.m.

WATCH Westman Hospice

WATCH Westman Hospice provides no-charge volunteer services to individuals and their families who are living with a life-threatening or terminal illness. Volunteers go into homes and health care facilities and provide emotional support and practical assistance.

Contact: 727-1745

Westman Crisis Services

The Westman Crisis Services consist of a twenty-four hour crisis telephone line (shared with Adult Community Mental Health Services), an after-hours Mobile Crisis Unit, and a 24 hour 8 bed Crisis Stabilization Unit. All services are voluntary, short term, free, and offered to people over 18 who live in the Assiniboine or Brandon Regional Health Authorities. The Mobile Crisis Unit offers crisis counseling, assessments and care planning for those in a mental health or psychosocial crisis. The Crisis Stabilization Unit provides short-term, intensive crisis intervention in a residential setting and individualized discharge planning to facilitate the client's return to the community. Clients are welcome to self-refer to the Mobile Crisis Unit or telephone service; referrals for admission to the Crisis Stabilization Unit can be arranged through the Mobile Crisis Unit or directly by a mental health professional.

Contact: Crisis Stabilization Unit – 727-2555
Hours of Operation: Open 24 hours.

Contact: Mobile Crisis Unit – 725-4411 or 1-888-379-7699
- Hours of Operation: Open 24 hours.

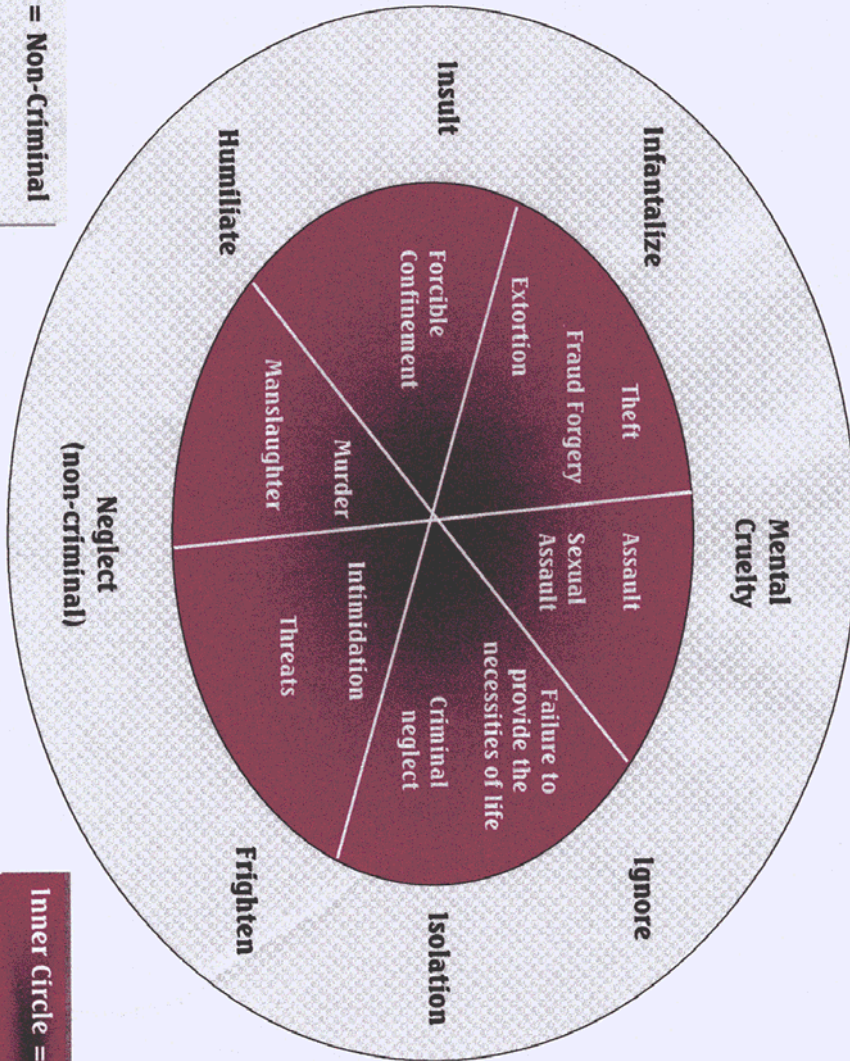
YWCA Westman Women’s Shelter

The WYCA Westman Women’s Shelter of Brandon is a 24 hour crisis facility for women and their children fleeing domestic violence. Our services include free counseling within the residential and non-residential program, children’s counseling, support groups and public education on violence prevention and education.

The YWCA of Brandon assists to improve the lives of women through supportive programs and services within a safe and positive environment.

Contact: Thelma Noctor, Manager
Crisis Lines: 727-3644, or toll free 1-877-977-0007
Hours of Operation: 24 hours

APPENDIX C



Outer Circle = Non-Criminal

Inner Circle = Criminal

1. Individual incidents in the outside circle themselves are not Criminal, however when more than one incident from the outside circle are coupled together, they may in fact become Criminal.
2. Incidents from the outside circle may best be handled by way of a Peace Bond or a Protection/Prevention order by contacting a magistrate or peace officer.

Adapted with permission from the Advocacy Centre for the Elderly (1988) "Elder Abuse: The Hidden Crime". Toronto: Advocacy Centre for the Elderly

APPENDIX D

Safety Planning for Abused Older Adults

Things to consider when developing a safety plan with an older person:

- ensure that they understand that if they are in immediate danger, they should call 911
- help them develop a plan for where they can go and how they can get there if they feel like their life and well-being have been threatened (i.e. trusted friend or relative, local women's shelter,)
- ensure that they will have access to financial resources and necessary medication if they have to leave home quickly
- encourage them to have trusted friends and/or family visit often, and/or check in by phone regularly
- let them know that there are civil remedies available to them if they fear that the abusive behaviour is likely to continue (contact a peace officer or magistrate for more information)
- encourage them to participate in community activities so that they are getting out of the house and have contact with others if possible
- ensure that they have access to their own telephone
- suggest that they post and open their own mail and have pensions cheques or other income deposited directly into their bank account
- link them to legal advice to discuss arrangements to make now for possible future disability (i.e. power of attorney)
- encourage them to keep accurate records, accounts, and lists of property/assets available for examination by a trusted individual
- suggest that they review their will periodically and not make changes to it without careful consideration and/or discussion with a trusted family member or friend
- remind them to give up control of property or assets only when they decide they can't manage them
- encourage them to ask for help when they need it and ensure that they are aware of community support available for assistance (see Appendix A)
- suggest that they discuss their plans regarding future financial and health care with their attorney, physician, and family members

APPENDIX E

Additional Resources

Suggested Web-Sites:

* **Canadian Network for the Prevention of Elder Abuse**

www.mun.ca/elderabuse/

* **International Network for the Prevention of Elder Abuse**

www.inpea.net/links.htm

The organization aims to increase society's ability, through international collaboration, to recognize and respond to the mistreatment of older people in whatever setting it occurs, so that the latter years of life will be free from abuse, neglect and exploitation.

* **Ontario Network for the Prevention of Elder Abuse**

www.onpea.org

* **National Clearinghouse on Family Violence**

www.hc-sc.gc.ca/hppb/familyviolence/bilingual.htm

Offers excellent Canadian educational materials (booklets and pamphlets) free of charge.

* **National Center on Elder Abuse (U.S.)**

www.elderabusecenter.org

NCEA exists to provide elder abuse information to professionals and the public; offer technical assistance and training to elder abuse agencies and related professionals; conduct short-term elder abuse research; and assist with elder abuse program and policy development. NCEA's website contains many resources and publications to help achieve these goals.

* **British Columbia Community Response Networks**

www.bccrns.ca/

An overview of part 3 of the legislation, the role of CRN's, how the public can be involved, how the public can report abuse or seek more information.

* **Haldimand and Norfolk Community Response Network** (Ontario)

www.hncrn.ca/

Describes a group whose purpose is "to develop a community based, and "senior driven," inter-linking community response network to assist abused and neglected older adults living in Haldimand-Norfolk."

Suggested Readings:

The following publications are available from *National Clearinghouse on Family Violence*, Health Canada and may be downloaded from their website.
(www.hc-sc.gc.ca/hppb/familyviolence/)

Abuse and Neglect of Older Adults: Community Awareness and Response (2002)

This guide has been written for concerned seniors, interested community members and service providers who wish to address the abuse and neglect of older adults. The document has been updated and revised to include discussion of current knowledge, emerging trends and issues, and up-to-date information on resources and initiatives across Canada.

Directory of Services and Programs Addressing the Needs of Older Adult Victims of Violence in Canada (2002)

This updated directory provides a current listing of 354 services and programs that address the needs of older adult victims of violence. The services are listed by province/territory from the east to west coast and, within each province/territory, alphabetically by town or city.

Abuse of Older Adults in Institutions (Fact Sheet) (1998)

This fact sheet provides an overview of the available information on abuse and neglect of older adults living in institutions. The fact sheet includes definitions, statistics, signs of abuse, prevention, reporting, and suggested resources.

Abuse and Neglect of Older Adults by Susan Swanson (1998)

This fact sheet provides general information on elder abuse, organized by the following topics: definitions of physical, psychosocial and financial abuse as well as neglect; statistics on how many Canadians are affected; indicators of abuse; available support services; options for responding through education, legislation, and intervention; and suggested readings.

Abuse and Neglect of Older Adults: A Discussion Paper by L. McDonald and A. Collins (1998)

This discussion paper provides an overview of the last decade of developments on the issue of the abuse and neglect of older adults. Existing problems in defining abuse and neglect, lack of consistency in recording incidence and prevalence, the lack of progress on the theoretical front and the related problems of identifying risk factors are discussed. Changes in adult protection legislation, along with advances in the creation of protocols for detection, intervention and programming, are described. An extensive bibliography is attached.

Financial Abuse of Seniors Fact Sheet by Teresa Lukawiecki (1998)

This fact sheet focuses on financial abuse of seniors. It explains what financial abuse is and how often it occurs, identifies signs of abuse, and suggests how seniors, family and friends,

service providers and the general community can act to prevent and address this serious problem. A short list of suggested readings is included.

Prevention of the Abuse of Seniors – Canadian Training Guides

by Kelly Gorkoff, Jocelyn Proulx and Brenda Comaskey (1998)

The purpose of this inventory is to provide an overview of the resources currently used in Canada to train health care professionals and front line workers in the detection, intervention and prevention of abuse of older adults. This inventory provides descriptions of training resource manuals currently available in the field in each province. The inventory provides program descriptions, access information and evaluation outcomes, where available, and recommendations for dissemination and evaluation. This resource will be helpful to trainers and health care professionals working with older adults.

Abuse and Neglect of Older Adults in Institutional Settings: A Discussion Paper Building from French Language Resources *by Charmaine Spencer (1995)*

This discussion paper provides an overview of French language literature on policy and practice issues concerning abuse and neglect in institutional settings. It examines the role of institutions and caregivers in terms of prevention, detection and intervention.

Abuse and Neglect of Older Adults in Institutional Settings: A Discussion Paper Building from English Language Resources *by Charmaine Spencer (1994)*

This discussion paper provides an overview of English language literature on policy and practice issues concerning abuse and neglect of older adults in institutional settings. It identifies key aspects of a caring environment, characteristics of institutional life, which may lead to abuse and neglect, procedures for identifying, reporting, investigating and documenting abuse, ways to intervene and prevention strategies.

Intergenerational Conflict and the Prevention of Abuse Against Older Persons

by J.A. Tindale, J.E. Norris, R. Berman and S. Kuiack (1994)

This report examines the literature on elder abuse based on two specific questions as: Is it likely that the social construction of parent-child relationships over the family life cycle is associated with child-to-parent elder abuse later on? If so, are there preventive strategies that families and practitioners can consider?

Older Canadians and the Abuse of Seniors: A Continuum from Participation to Empowerment *by ARA Consulting Group Inc. (1994)*

The paper explores the current and future role of older Canadians as active participants in the prevention and intervention of the abuse of seniors. It suggests ways for the Family Violence Initiative to support prevention and intervention efforts that build on the skills and knowledge of older Canadians.

Resource and Training Kit for Service Providers: Abuse and Neglect of Older Adults by *Nancy Murphy (1994)*

This kit provides trainers with valuable tools to raise awareness among service providers about abuse and neglect of older adults. It includes sections on adult education, older adults in Canadian society, types of abuse, identification and assessment, intervention and prevention strategies.

Community Awareness and Response: Abuse and Neglect of Older Adults by *Teresa Lukawiecki (1992)*

This guide provides a framework for service providers, seniors' organizations and community groups wanting to develop protocols, policies and services to address the issue of abuse and neglect of older adults.

EVALUATION

This Resource Guide is for you. If you have any suggestions, please fax (726-5720) or e-mail (homecare@brandonrha.mb.ca) your comments to us. Thank you.

1. To what extent has the information in this Guide been helpful?

1 2 3 4 5
Very helpful.....helpful.....somewhat helpful.....not at all

2. Have you had a situation where you have utilized this Guide?

Yes No

3. To what extent has the information provided you with a better referral process to other services?

Very helpful Helpful Somewhat Not at all

4. Do you have any further suggestions that you would share to improve this resource?

Please fax your comments to 726-5720 or e-mail homecare@brandonrha.mb.ca
Thank you!