Situational Learning

Protection from Verbal Abuse and Emotional Abuse



RHRA
Retirement Homes Regulatory Authority

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Introduction

Retirement home staff play an integral role in upholding a culture of care. This means treating all residents with respect and dignity, and protecting them from harm or risk of harm.

To meet these responsibilities, you must be able to recognize all forms of abuse. Verbal abuse and emotional abuse can be challenging to recognize. This is why training on the home's abuse policy is mandatory for all staff prior to working in the home and annually thereafter.

When incidents of abuse do occur, it is important that residents who have suffered abuse are offered immediate support, a mandatory report is submitted to the RHRA, and the home follows their abuse policy.

To this end, a culture of care also means that retirement homes train and support a culture of reporting and ensure that all staff members understand how to respond to and report any suspected, alleged or witnessed incidents of abuse or neglect.

When staff and management are trained on their responsibilities, including how to recognize, report and respond to suspected, alleged or witnessed incidents of abuse or neglect, there is a **direct and positive impact on resident safety** in the home.

To help build this essential knowledge, the RHRA offers:

- A Guidance Document for Abuse and Neglect
- A set of four online situational learning modules, including this module

These RHRA learning resources are designed to assist operators in understanding the requirements of select portions of the Retirement Homes Act (the Act) and Ontario Regulation 166/11 (the Regulation). They are not, and do not replace, the home-specific training that is required by the Act and the Regulation.

If anything in this guidance conflicts with requirements in applicable legislation regulations or any other provincial requirements, those requirements prevail and retirement homes must follow them.

About this Situational Learning Module

This module, Protection from Verbal Abuse and Emotional Abuse, is designed to build your understanding of:

- How to recognize what constitutes verbal abuse and emotional abuse in a retirement home setting
- When and how to report and respond to alleged, suspected, or witnessed incidents of verbal and/or emotional abuse
- Responsibilities in relation to the protection of residents from harm, including any form of abuse and neglect
- Available information resources

Protection from Verbal Abuse

Verbal Abuse – Definition

Verbal Abuse is defined as any form of verbal communication of a threatening or intimidating nature or any form of verbal communication of a belittling or degrading nature that diminishes a resident's sense of well-being, dignity or self-worth, if the communication is made by anyone other than a resident.

Verbal Abuse also includes any form of verbal communication of a threatening or intimidating nature made by a resident who understands and appreciates their consequences, that leads another resident to fear for his or her safety.

- Factors such as the resident's assessment, medical history, current diagnoses and cognitive ability should be considered to determine if the resident making the communication understands and appreciates its consequences.
- It is important to note that the capacity of a resident receiving a threat or communication should not be a factor if they fear for their safety at the time of the incident.
- A resident's cognitive impairment does not alleviate the licensee's responsibility to investigate and follow all requirements in the abuse policy.
- Even if an incident of abuse appears to be unintentional, the home still needs to fully implement their abuse and neglect policy.

Source: *The Guidance Document for Abuse and Neglect*

Under the Retirement Homes Act (the Act) and Ontario Regulation 166/11 (the Regulation), licensees must protect residents from abuse by anyone and prevent neglect by the home's staff.

Scenario One

Jacquie and Laura are both Dietary Aides at a retirement home and have been known to dislike each other.

Recently, Laura reported Jacquie to the General Manager, expressing that Jacquie had been disrespectful to a resident when the resident complained about her meal.

Jacquie was reported as saying, "Stop whining over nothing," to the resident. The resident leaned over to her tablemate and shared that she felt humiliated.

Laura also reported that when another resident seated at the same table tried to intervene, Jacquie raised her voice and said to the tablemate, "Keep your mouth shut and mind your own business!"

Knowledge Check 1

How would you describe Jacquie's behaviour toward the residents? Is it verbal abuse?

- ☐ Jacquie's behaviour was appropriate and necessary to the situation. No, it is not verbal abuse.
- ☐ Jacquie's behaviour was belittling and degrading to the residents. Yes, it is verbal abuse.
- ☐ Jacquie's behaviour was likely to diminish the residents' sense of dignity and self-worth. Yes, it is verbal abuse.
- ☐ Both B and C

→ **Correct Answer:** D - Both B and C

Rationale/Reasoning

Yes, it Is verbal abuse. Jacquie's behaviour was belittling and degrading to the residents. And her behaviour diminished the residents' sense of dignity and self-worth.

Verbal abuse includes any form of verbal communication of a belittling or degrading nature that diminishes a resident's sense of well-being, dignity or self-worth.

In this situation, Jacquie is accused of verbal abuse because she dismissed a resident's concerns about her meal and then told another resident to keep her mouth shut, both of which meet the definition of verbal abuse.

Communicating fees to residents and their families, along with having detailed contingency plans for when scheduled external care is missed, helps protect residents from financial abuse and promotes a culture of care.

Knowledge Check 2

Which of the following statements is true about the situation described in this scenario?

- ☐ It needs to be documented and considered as part of the home's annual evaluation of the abuse policy.
- ☐ The home is required to report this incident to the RHRA.
- ☐ The home must notify substitute decision makers, as applicable, of the suspected abuse.
- ☐ All of the above

→ **Correct Answer:** All of the above.

Rationale/Reasoning

A retirement home must fully implement their abuse policy in responding to the situation, including addressing persons suspected or confirmed of committing abuse.

The policy to promote zero tolerance of abuse and neglect must be evaluated at least once every calendar year. The evaluation must consider each incident of abuse or neglect that occurred during the year to determine what changes and improvements are required to prevent further abuse of residents and to promptly implement those changes. Completing the evaluation can also help identify trends or causes pertaining to specific residents or staff.

In the legislation, anyone other than a resident who sees or suspects an abusive or neglectful situation must report the situation to the RHRA.

A retirement home needs to immediately report situations of resident harm or risk of harm to the RHRA. These are called mandatory reports.

Because Jacquie's communication to the resident is verbal abuse, the home has a duty to report it to the RHRA.

When reporting to the RHRA, relevant information may include: names of involved persons, and dates and times of incidents; the nature of any injuries or other harm sustained; actions taken or planned by the home to address and reduce any risk of harm (if available); and any relevant historical information relating to the persons involved.

Scenario Two

Daniel, a resident who does not have a history of cognitive impairment, walked into the room of another resident, Maria, who has been experiencing short-term memory challenges.

Mistaking Maria's room for his own, Daniel became upset and shouted, "Get out or I'll throw you out!"

Maria was immediately upset and afraid. She walked into the hallway and promptly told a PSW about the altercation and how she felt afraid.

The PSW responded to the incident right away by correcting Daniel and escorting him out of Maria's room. Daniel was very apologetic. He said sorry to Maria and went to his room.

When staff returned to check on Maria soon after the incident, she was resting calmly and could not recall the details of the interaction with Daniel.

Knowledge Check 1

Since Maria cannot recall the incident, does the home still have to investigate the incident?

Yes or No

→ **Correct Answer:** Yes

Rationale/Reasoning

Yes, the home still has to investigate the incident.

The capacity of a resident receiving a threat or communication should not be a factor if they fear for their safety at the time of the incident. In this scenario, Maria reported to staff that she felt afraid after Daniel threatened to throw her out.

A resident's inability to remember the details of an incident due to cognitive impairment does not alleviate the responsibility of the home to follow all requirements in the abuse policy, including, in this situation, an investigation.

For Maria, the home should consider implementing increased monitoring to identify possible behaviours resulting from this incident.

For Daniel, the home should develop a behaviour management strategy to prevent and address further possible behaviours that create a risk of harm for himself or others.

Heightened care and awareness of Maria and Daniel following the incident supports a culture of care.

Knowledge Check 2

Since this incident was unwitnessed and handled by staff without any further upset to Maria, does the incident need to be reported to the RHRA?

Yes or No

→ **Correct Answer:** Yes

Rationale/Reasoning

Yes, the incident needs to be reported to the RHRA.

Verbal abuse includes any form of verbal communication of a threatening or intimidating nature made by a resident that leads another resident to fear for their safety.

In this scenario, Daniel was verbally abusive to Maria when he threatened to throw her out of the room, causing Maria to feel fearful.

In the legislation, anyone other than a resident who sees or suspects an abusive or neglectful situation must report the situation to the RHRA. Because Maria told staff about the incident, the home has a duty to report it to the RHRA.

When reporting to the RHRA, relevant information may include: names of involved persons, and dates/times of incidents; the nature of any injuries or other harm sustained; actions taken or planned by the home to address and reduce any risk of harm (if available); and any relevant historical information relating to the persons involved.

Protection from Emotional Abuse

Emotional Abuse – Definition

Emotional Abuse is defined as any threatening, insulting, intimidating or humiliating gestures, actions, behaviours or remarks, including imposed social isolation, shunning, ignoring, lack of acknowledgement or infantilization that are performed by anyone other than a resident.

Emotional Abuse also includes any threatening or intimidating gestures, actions, behaviour or remarks by a resident that causes alarm or fear to another resident are also considered emotional abuse, if the resident performing the gestures, actions, behaviour or remarks understands and appreciates their consequences.

- The resident's ability to understand and appreciate the consequences of their actions may require consideration in situations where mental illness or other conditions prevent the resident from understanding how their actions are affecting others.
- Considerations would include the resident's assessment, medical history, current diagnosis and cognitive ability.
- Even if an incident of abuse appears to be unintentional, the home still needs to fully implement their abuse and neglect policy.

Source: *The Guidance Document for Abuse and Neglect*

Under the Retirement Homes Act (the Act) and Ontario Regulation 166/11 (the Regulation), licensees must protect residents from abuse by anyone and prevent neglect by the home's staff.

Scenario One

Joan, a resident in a retirement home, recently started experiencing tremors in her hands due to Parkinson's disease. Because of the tremors, Joan asked the dining room staff for assistance with feeding, as she was spilling her food and was embarrassed.

One day, in front of her tablemates, a new Dietary Aide refused to assist Joan and said to her, "No, stop acting like a baby. You should be feeding yourself."

Because of this interaction and to prevent further embarrassment, Joan asked to have her meals brought to her room moving forward.

Knowledge Check 1

In this scenario, does the Dietary Aide's behaviour constitute emotional abuse?

Yes or No

→ **Correct Answer:** Yes

Rationale/Reasoning

Yes, the Dietary Aide's behaviour constitutes emotional abuse.

In this scenario, the Dietary Aide's remarks would be considered both humiliating and infantilizing towards Joan. Denying Joan the assistance with feeding that she needed could also be seen as shunning, or ignoring the resident. For these reasons, the Dietary Aide's remarks meet the definition of emotional abuse.

Also, the remarks affected the resident to the point where she chose to isolate herself during meals to prevent further embarrassment.

Taking the resident's feelings into account can help to identify incidents of emotional abuse in circumstances that may be open to interpretation.

Knowledge Check 2

When an incident of abuse by a staff member is found to have occurred, what are some strategies that can be implemented to support a culture of improvement and reporting, helping to mitigate further instances of abuse?

A. Retraining staff on the home's abuse policy.
B. Encouraging open and constructive group discussions with staff and management.
C. Meeting with staff individually to support their knowledge of the various types of abuse.
D. All of the above

→ **Correct Answer:** All of the above

Rationale/Reasoning

All of these options apply.

Creating an environment in the home where staff, managers, volunteers and anyone else understands their obligation to report alleged, suspected or witnessed incidents of abuse is fundamental to fostering a culture of care.

When an incident of abuse by a staff member is found to have occurred, homes must follow their abuse policy, including dealing with the person who has abused a resident. There are various strategies that can be implemented to help mitigate future instances of abuse and encourage a culture of reporting. Some strategies to consider are:

- Retraining staff on the home's abuse policy.
- Encouraging open and constructive group discussions with staff and management about preventing abuse.
- Hosting individual meetings with staff members to support their knowledge of the various types of abuse, as well as their duty to report.
- Including staff in the annual evaluation of the abuse policy, which can provide important insights and promote collaboration within the home.

Creating an environment where staff and others report alleged, suspected or witnessed incidents of abuse is crucial. Considering and implementing the strategies outlined in this

knowledge check can help staff feel supported and provides them with an opportunity to ask questions if they are unsure.

Scenario Two

An unknown person entered a retirement home and was caught knocking on residents' doors. After this happened, the General Manager implemented a new visitor's policy limiting visitation hours to between 1:00 and 3:00 p.m. during the week so that staff would be able to better monitor anyone entering the home.

The unknown person was arrested by the police shortly after the incident occurred, but the General Manager continued to implement the new visitor policy.

Due to the limited visitation hours and work schedules of residents' family members, several residents' families were unable to visit the home during the permitted times. During this time, the staff reported an increase in concerning resident behaviours such as tearfulness and decreased appetites. Also, the residents voiced concerns about missing their families and feeling upset and isolated but the policy remained in place.

Knowledge Check 1

Why does this situation meet the definition of emotional abuse?

- ☐ The implementation of the policy socially isolated residents from their families.
- ☐ The implementation of the visitor's policy distressed the residents and caused them to become tearful.
- ☐ The home ignored resident concerns about feeling socially isolated and distressed by the visitation policy.
- ☐ All of the above

→ **Correct Answer:** All of the above

Rationale/Reasoning

All of the options apply.

In this scenario, the individual who was knocking on resident doors was apprehended by the police, removing the imminent safety concerns that caused the policy to be implemented. The home continued to implement the restrictive visitor's policy, despite residents expressing to staff their distress due to missing their families, and exhibiting increased behaviors such as tearfulness and loss of appetite, even though the threat no longer existed.

As a result, the home emotionally abused the residents by imposing social isolation with the continued implementation of the restrictive visitor's policy.

Measures that retirement homes take to protect residents from possible harm cannot be abusive in of themselves.

Knowledge Check 2

Since the General Manager continued to implement the visitor policy, what options do the staff have given the negative impacts the policy has on residents?

- ☐ Address the concern directly with the General Manager.
- ☐ Contact the RHRA for advice.
- ☐ Contact the RHRA to submit a report of emotional abuse.
- ☐ All of the above

→ **Correct Answer:** All of the above

Rationale/Reasoning

All of the options apply.

Emotional abuse includes any actions that impose social isolation, performed by anyone other than a resident.

In this scenario, the General Manager's continued enforcement of the restrictive visitor policy, even after the original threat had been removed, is causing social isolation to residents, which constitutes emotional abuse.

For staff, addressing the concerns directly with the General Manager and reporting the policy's negative impacts to residents can help contribute to an open and collaborative environment that is focused on resident safety and well-being.

It is important to report incidents of abuse and neglect to the RHRA so that further action can be taken.

The RHRA can be contacted for advice and to report incidents of abuse and neglect. Staff cannot be retaliated against for making a report to the RHRA but staff may choose to report anonymously.

To support staff in instances where management is suspected of abusing or neglecting a resident, the home's abuse policy should provide direction for staff, including who to report to and the process they should follow.

Reflections

Reflecting on the scenarios in this module and what you've learned, consider the following additional questions.

1. Who is required to report abuse to the RHRA?
2. Can people be penalized for making a report to the RHRA or the police?
3. What other steps can retirement homes take to support residents harmed by verbal abuse or emotional abuse?

In Scenario Two: Protection from Emotional Abuse involving a stranger entering the retirement home, what other reasonable steps could the home have taken to address resident safety concerns, after the individual was apprehended?

Conclusion

We hope this module helps reinforce a culture of care in your retirement home.

1. What more can you do in your home to build and support a culture of care?
2. How can you ensure the well-being, safety and protection of residents in the retirement home where you work?
3. Is there an opportunity to work through and discuss this module with the management team and staff?

Follow-up, as needed, to ensure that you fully understand your responsibilities and obligations regarding the protection of residents from all forms of abuse by anyone.

Still Have Questions?

If you have any questions or would like to discuss education opportunities, please contact the **Retirement Homes Regulatory Authority** by calling 1-855-275-7472 or visiting the website at www.RHRA.ca.

Please complete this short survey. Thank you for your feedback.

Glossary

Abuse
The Act and Regulation outlines and defines five different types of abuse: Emotional abuse, verbal abuse, physical abuse, sexual abuse and financial abuse.

Incident
Alleged, suspected or witnessed abuse or neglect of a resident(s), and/or other behaviour that results in harm or risk of harm to the resident(s).

Investigation
An investigation may require interviewing multiple people (including the alleged victim), taking photographs of evidence, reviewing records, documents and video footage and keeping copies.

Mandatory Reporting
One of the ways the law protects retirement home residents is by requiring people to immediately report to the RHRA if they have reasonable grounds to suspect harm or risk of harm to a resident has occurred or may occur. This requirement is called mandatory reporting.

Mandatory reporting must happen immediately and should not wait until an investigation has been completed.

Neglect
Neglect is defined as the failure to provide a resident with the care and assistance required for their health, safety or well-being and includes inaction or a pattern of inaction that jeopardizes the health or safety of one or more residents.

Protection
When there is a report of suspected abuse or neglect, the Licensee must take immediate steps to ensure the resident is protected. These steps may include immediate separation of the resident from the alleged abuser, physical and mental assessment, medical attention, counseling and increased monitoring.

Reasonable grounds to suspect
A person has "reasonable grounds to suspect" when they have information that would lead an average person, using normal and honest judgment, to believe that abuse or neglect occurred or may occur.

Resident
A person who lives in a licensed retirement home.

Retirement Home
A residential complex or part of a residential complex which has been licensed to operate as a retirement home by RHRA.

Substitute Decision Maker (SDM)
A person who is legally authorized to make a decision or to give or refuse consent on behalf of another person when required. This could, for example, include a Power of Attorney (POA).

Whistle-blowing Protection
It is a contravention of the Act to retaliate or threaten to retaliate against another person, whether by action or omission, because that person has disclosed anything to the Registrar or an inspector or has provided evidence.

Zero Tolerance
To never tolerate, allow or ignore abuse or neglect of a resident.

Resources

RHRA Guidance Document for Abuse and Neglect

Scenario Reflections - Protection from Verbal Abuse and Emotional Abuse

Retirement Homes Act (the Act)

Ontario Regulation 166/11 (the Regulation)

Elder Abuse Prevention (ON)

Behavioural Supports Ontario (BSO)

The Advocacy Centre for the Elderly (ACE)

Alzheimer's Society of Ontario


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Scenario Reflections

Protection from Physical Abuse and Sexual Abuse



Why is it important to report incidents of abuse to the RHRA?

- The duty to report to RHRA provides a mechanism for staff, family, volunteers and external care providers to report incidents of abuse that they may not feel comfortable reporting to the home directly or might be unsure of how to do so.
- Once the RHRA is made aware of the incident, the home is often notified by an inquiry call or an inspection.
- In circumstances where operators are unaware of the incident, notification from the RHRA provides an opportunity for the home to investigate and take appropriate action to protect the resident.
- If the home is already aware, an inspection will verify that the requirements in the abuse policy were complied with. This can assist operators in identifying gaps, so that processes can be improved to increase resident safety in the home. For example, it can indicate that re-training on the policy is needed.

For more information, see **Mandatory Reporting** obligations as set out in Section 75 of the Retirement Home Act 2010.

Would any of the incidents described in these scenarios need to be reported to the police?

- The home must immediately notify the police of any alleged, suspected or witnessed incident of abuse or neglect of a resident that the Licensee or staff of the home believe may constitute a criminal offence.
- Residents or family members do not determine when and if police are to be called, as it is the home's obligation to do so.
- In Scenario Two: Physical Abuse, injuring someone with a knife may be criminal assault, and the police should be called immediately. The previous incidents of physical abuse described in this scenario should also have been reported to the police.

In cases where there is uncertainty, homes are encouraged to err on the side of caution. Homes do not need to be certain that a criminal offence has been committed, only that they suspect the conduct may constitute a criminal offence. The police will take the appropriate course of action based on the details surrounding the incident.

Scenario Reflections

Protection from Physical Abuse and Sexual Abuse
(Continued)



Are all sexual relationships between two residents, where one resident has dementia, a form of sexual abuse?

- No, each situation must be assessed on a case-by-case basis.
- Just because a resident has cognitive impairment doesn't mean that they are incapable of consenting to an intimate relationship. At the same time, homes must take seriously issues relating to capacity to consent.



- In circumstances when dementia may affect a resident's ability to consent to intimate encounters, it may be necessary for the Licensee to speak with the residents involved, the resident's families and care providers involved in the resident's care, to consider further cognitive assessments.
- Such follow-up may also include referrals to agencies who have expertise in these situations to assist in determining a resident's capacity to consent to a sexual relationship.

These situations can be complicated and reaching out to external experts may be required to ensure that residents are protected from potential abuse.