# Knowledgebite

PSYCHOGERIATRIC NEWS AND INFORMATION FOR PRIMARY CARE PRACTITIONERS



**Editor's remarks:** This is the seventh issue of the PRC-PC Newsletter, providing quick tips and useful information to fit your fast-paced work environment and to help you in the care of patients with dementia. This issue focuses on elder abuse. Between 4 and 10% of the elder population is experiencing abuse every year. Elder abuse has many forms: physical, financial, emotional and neglect (SWREA Network, 2011). Many elder abuse cases are inflicted by close family members. Patients with Dementia are vulnerable to abuse due to their mental decline as well as the responsive behaviours they may demonstrate due to dementia. (Einat Danieli – OT.Reg. Ont; PRC-PC)

### **GOOD TO KNOW ABOUT**

The Elder Abuse Consultation Team (E-ACT) provides consultation and support in complex cases of elder abuse; see more information in this link.

## TIP OF THE MONTH

One should consider the stressors of caregiving and the outcomes of those stressors and how those stressors can be lessened through various <u>supports</u>. (SWREA Network, 2011)

Signs of possible abuse:

<u>Physical</u> – multiple injuries or bruises, unexplained injuries /inconsistencies between explanation and injury, malnourishment, neglected appearance, confusion.

<u>Psychological</u> – physical and emotional dependence of caregiver, withdrawal, restlessness, etc. <u>Social environmental</u> – isolation, signs of restraints/locks, broken items, neglected or unsafe environment.

#### **OUR DEMENTIA 'TOOLBOX'**

- Safety Planning for Older Adults sheet <u>Link</u>
- Elder abuse resources GiiC RGP <u>Link</u>
- Follow this <u>link</u> to listen to our webinar recording about capacity POA and cases of abuse and fraud.

# WORKSHOPS, CONFERENCES AND ARTICLES OF INTEREST:

Registration for the "5 Weekend Care of the Elderly Course" is now open –  $\underline{\text{Link}}$ .

For many other educational opportunities in October follow this Link.

### STORIES FROM THE PRC-PC CONSULT LINE

**Situation:** Patient with early stage dementia experiencing financial and physical abuse by her daughter. During a routine visit to her family physician the patient revealed that her daughter has been verbally and physically abusive towards her. She also reported that she has been taking money from her wallet without her permission. The patient asked the physician not to report this to the police or anyone else.

**Family physician's main concern:** The family physician is worried about her patient and unsure of what to offer in light of patient's request not to report the abuse.

**Background:** Patient is in her 80's with early stage dementia, living on her own. She is a widow and has one daughter who has become abusive towards her in the past year. The patient yet still cognitively able and independent in most of her IADLs and all her ADLs, is becoming increasingly frail and struggles with short term memory.

### Assessment: Things to consider:

- As the patient's dementia will progress she will become more vulnerable to financial and physical abuse. It will be important to discuss advance care planning to ensure her future.
- Inquire about any services and social connections the patient has in order to discuss a possible safety plan

### Recommendations:

- Provide patient with the Ontario Seniors Safety Line a 24 hr. confidential support service 1866-299-1011, and the Senior Accesses Crisis Line (SCAL) 416-619-5001 to call at times of crisis when she needs assistance.
- Discuss future planning and assigning a POA for both healthcare and financial decision to protect her interests for when she is no longer able to do so herself.
- Referring to a Social Worker for emotional support, counselling and case management (can be accessed through <u>CNAP</u> or the <u>Alzheimer's Society of</u> <u>Toronto.</u>
- Let the patient know about the <u>Advocacy Centre for the Elderly (ACE)</u> where she can access information and guidance regarding her legal rights.
- Discuss with patient a safety plan such as:
  - Avoiding isolation keeping in close contact with trusted friends and neighbors or even sharing with them her experience so they can help keep an eye on her. Joining a day program and receiving some help services at home such as friendly visiting, homemaking support that can be accessed through <u>CNAP</u>.
  - Advise the patient to purchase a lifeline device

For additional information, support, resources or case-based consultation, please contact your PRC-PC directly at: 416-586-4800 ext. 5251 or edanieli@mtsinai.on.ca or visit our website at www.mountsinai.ca/reitman/orc-pc







