Considerations Regarding the Needs of Long-Term Care Residents for Intimate Relationships and Sexual Activity

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INTIMATE RELATIONSHIPS & SEXUAL ACTIVITY IN LTC

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What to do about Charlotte? Introduction to guideline document

BREAK

RAI and Care Planning

Course Objectives

- Provide practical policy guidance to the longterm care facility regarding their residents' needs for intimate relationships and sexual activity.
- Establish a framework for managing the tension between the competing values of respecting the residents' personhood and providing protective oversight for them in context of their intimate relationships and sexual activity.

The Video

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What
    to
      do
        about
          Charlotte?
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Assumptions

- Long-term care residents are social. The need for intimate connectedness is a universal human characteristic or trait that extends throughout one's lifespan.
- Long-term care residents are sexual. Sexuality is a universal human characteristic that extends throughout one's lifespan.
- Human relationships are informed by the personal values that individuals bring to them. Intimate relationships between long-term care residents may involve competing values.

Assumptions

- Fully articulated policies regarding the intimate relationships of residents address the advent, continuation, and conclusion of those relationships.
- Surveyors respect fully articulated written policies that support the intimate relationships of residents.

Assumptions

- Provided that facilities have fully articulated written policies that support the intimate relationships of residents, surveyors respect the right of residents to accept the risks of an intimate relationship.
- Facilities educate, train, and inform residents, families, staff, and surveyors regarding their processes for accommodating intimate relationships of residents.

Intimacy: An expression of the natural desire of human persons for connection; a state of reciprocated physical closeness to, and emotional honesty with, another. Physical closeness to another includes physical touch as demonstrated by nongenital, nonsexual touching, hugging, and caressing. Intimacy is not a synonym for sex; however, sexual activity frequently occurs within an intimate relationship.

- Protective Oversight: An awareness twenty-four hours a day of the location of a resident; the ability to intervene on behalf of the resident; supervision of nutrition, medication, or actual provision of care; and responsibility for the welfare of the resident, except when the resident is on voluntary leave.
- Sexual Abuse: Subjecting another person to sexual contact by use of forcible compulsion. Sexual abuse includes, but is not limited to, sexual harassment, sexual coercion, and sexual assault.

- Sexual Contact: Includes sexual intercourse, oral sex, masturbation, and sexual touch.
- Sexual Activity: Includes sexual contact and other activities intended to cause sexual arousal (e.g. viewing sexually explicit photographs and videos, reading sexually explicit text, and phone sex.)

Volition: A resident's clear, unequivocal, unforced willing participation in an intimate relationship or sexual activity. Freedom from coercion is a trait of volition. In this document "Consenting resident" means a resident whose participation in an intimate relationship or sexual activity is volitional.

Principles of Ethics

Principle of respecting residents as persons.

We should support efforts to maintain and improve the resident's quality of life. Support their right to make choices including establishing and maintaining intimate, sometimes sexual, relationships with other people to enrich their lives.

The principle of doing good and avoiding harm.

We should act for the benefit of residents and refrain from acting in ways that harm residents. Some things can both benefit and harm a resident, or benefit one resident but harm another. Think: What are the consequences of actions to avoid unintended harm to all residents?