ENDING NURSING HOME VIOLENCE BETWEEN RESIDENTS: PREVENTION, INTERVENTION, AND ADVOCACY

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ENDING NURSING HOME VIOLENCE

A Call to Action
An 81-year-old woman who was allegedly assaulted by a carer at a North Plympton nursing home thought she was going to die and tried to fight back. The elderly woman remains in Flinders Medical Centre with severe bruising to her face, neck and head, a laceration on the back of her head and bleeding in her brain.
Laura Lundquist, a 98-year-old nursing home resident, faces second-degree murder charges that allege she strangled and suffocated her 100-year-old roommate, Elizabeth Barrow.
How Much Violence Is There in Nursing Homes?

- Staff → Resident Violence
- Resident → Resident Violence
- Resident → Staff Violence
Limitations of any Estimates

• Very few studies
• Rates from prevalence studies underestimate the size of the problem
  • Social desirability
  • Difficulty of observation
  • Inadequate record-keeping of incidents
Staff → Resident Violence

Staff report in the past year:

- 36% witnessed physical violence by staff
- 81% witnessed verbal aggression by staff
- 10% reported engaging in physical aggression
- 40% reported engaging in verbal aggression

Source: Pillemer and Moore, 1989
Resident-to-Resident Elder Mistreatment (RREM) study

- 10 skilled nursing facilities in New York City area
- 2011 residents assessed
- In-depth staff interviews and resident interviews/assessments

Total Prevalence
(past month)

<table>
<thead>
<tr>
<th>Experienced RREM</th>
<th>No</th>
<th>1613</th>
<th>80.2%</th>
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<tbody>
<tr>
<td>Yes</td>
<td>398</td>
<td>19.8%</td>
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### Physical RREM

### Experienced RREM

<table>
<thead>
<tr>
<th></th>
<th>Count</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>No</td>
<td>1896</td>
<td>94.3%</td>
</tr>
<tr>
<td>Yes</td>
<td>115</td>
<td>5.7%</td>
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What This Means

In a given month, 74,000 U. S. nursing home residents will experience a violent altercation.
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<tbody>
<tr>
<td>No</td>
<td>1689</td>
<td>84.0%</td>
</tr>
<tr>
<td>Yes</td>
<td>322</td>
<td>16.0%</td>
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Sexual RREM

Experienced RREM

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<tbody>
<tr>
<td>No</td>
<td>1984</td>
<td>98.7%</td>
</tr>
<tr>
<td>Yes</td>
<td>27</td>
<td>1.3%</td>
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### Experienced RREM

<table>
<thead>
<tr>
<th>Yes/No</th>
<th>Count</th>
<th>Percentage</th>
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<tr>
<td>No</td>
<td>1799</td>
<td>89.5%</td>
</tr>
<tr>
<td>Yes</td>
<td>27</td>
<td>10.5%</td>
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Resident Violence

In 2-week period:

- 7.6% of residents violent toward staff
- 12.3% of residents verbally aggressive toward staff
- 15.6% of residents aggressive toward staff overall

Morbid and Mortal

- Injuries: Fractures, dislocations, bruises
- Frailty of residents makes minor incidents potentially very harmful
- Negative psychological consequences of experiencing *or* observing violence
- Likely increased mortality risk
- Negative effects on staff
Three Barriers to Change

• Acceptance
• Ignorance
• Inaction
“What Can You Do?”

- Violence seen as routine feature of nursing home life
BROADWAY Against Bullying
New York

THIS CLASS IS A . . . NO BULLY ZONE!

PLEDGE TO END BULLYING
Ignorance

• Systematic reviews show almost no progress in research on the topic of nursing home violence

• Existing research is scarce and methodologically very weak

• We lack an evidence base to combat nursing home violence
Inaction

Acceptance

+ Ignorance

= Inaction
Residential Child Care Project Violence Prevention Model

- Crisis Communication and Active Listening
- Behavior Support Techniques
- Emotional First Aid
- Conflict Cycle
- Managing Aggressive Behavior
- Nonverbal Communication
- Protective techniques
The Way Forward

• Change the norm of acceptance

• Campaign specifically focused on violence

• Strengthen data collection on extent and causes

• Carry out outcome evaluation studies
The Way Forward

• Develop a comprehensive and data-driven national action plan

• Enforce existing laws and review their quality

• Set baselines and targets, and track progress
We Need a Name

• ???
Resources

Here is a link to a resident to resident violence prevention program:
http://citra.human.cornell.edu/r-remp

And this is a link to a program to prevent violence from staff toward residents:
http://www.programsforelderly.com/nursing-competence-compassion.php
Senior-to-Senior Bullying Reduction for Staff Training:

Developer and Grant Information

This training program was developed by the Michigan Region 9 Area Agency on Aging as a result of funds from the Prevent Elder and Vulnerable Adult Abuse, Exploitation, Neglect (PREVNT) Initiative, made possible by the Michigan Department of Health and Human Services Aging and Adult Services Agency.

The Senior-to-Senior Bullying Reduction for Long Term Care Staff is a 2017 recipient of a N4A Innovation in Aging Award.
2016: Region 9 Area Licensed Skilled Nursing Facilities
  • 21 Facilities
  • Staff Responses to Pre-Survey Only

2017: Region 9 Area Council/Commission on Aging and Senior Centers
  • 12 Counties/Organizations
  • 11 Participating Counties
  • Pre- and Post- Surveys to Staff and Residents/Consumers

Region 9 Area Licensed HFA/AFC Homes

2018: Statewide Train-the-Trainer Sessions and General Session Opportunities
  • Long Term Care Ombudsman and AAA Staff
Skilled Nursing Facilities: Staff Survey 2016

Data collected from 2016 Senior-to-Senior Bullying Reduction PREVNT Grant Initiative: Region 9 AAA
Skilled Nursing Facilities: Staff Survey 2016

Data collected from 2016 Senior-to-Senior Bullying Reduction PREVNT Grant Initiative: Region 9 AAA

![Bar chart showing agreement levels and major problem rates.](chart.png)

- **Agree/Strongly Agree**: 55%
- **Disagree/Strongly Disagree**: 34%
- **Neutral**: 11%

![Bar chart showing types of bullying.](chart.png)

- **Physical Bullying**: 17%
- **Social Bullying**: 35%
- **Verbal Bullying**: 44%
- **Sexual Bullying**: 6%
“The senior community does not like those persons living with disabilities—especially those who they consider ‘slow’”

-2017 Senior Center/COA Staff Survey

“I wouldn’t step in to help anybody. None of my business”

-2017 Senior Center/COA Participant Survey

“Better learn to have a thicker skin”

-2017 Senior Center/COA Participant Survey

“Bullies don’t change. They were raised that way and they know people will cave to their demands. They are selfish, spoiled, self-centered people who never learned ‘to share’, be polite, or care”

-2016 Long Term Care Staff Survey
It’s about POWER and Perception
- NOT simply “rude” or “mean”
- NOT a conflict
- NOT teasing
- NOT expressions based on basic and safety needs

The Cycle of Bullying: The Olweus Bullying Project

**The Bully**

- Follower/Henchmen: Actively participate in carrying out acts of bullying
- Supporter: Participates in bullying
- Passive Supporter: Seems to like the bullying but does not actively take part

**The Victim**

- Defender: Does not like the bully and actively tries to help the victim
- Passive Defender: Does not like the bully but does not openly defend the victim
- Onlooker: Disengaged
Assertive Communication

The ability to express one’s thoughts, emotions, feelings, and point of view in an effective manner without infringing on the rights of another person.

- Helping individuals find their own personal strengths
- Recognizing and intervening on bullying immediately and consistently
- Creating welcoming environments accepting to all persons
- Respecting and celebrating differences and cultures
- Educating staff and Residents/Participants
RESOURCES
Resident-To-Resident Mistreatment: LTCO Advocacy

- Overview of resident-to-resident aggression
- Risk factors are identified
- Examples of advocacy strategies to LTCO to use when investigating complaints and helping with solutions


Preventing and Responding to Resident-to-Resident Mistreatment (In-Service Training)

- Intended for use by LTCOPs to provide in-service training for long-term care facility staff.

- Brief training guide and PowerPoint slides.

- Copies of the “What is Resident Mistreatment” fact sheet or brochure could be included as a handout during the presentation.
What is Resident Mistreatment?

• Consumer Brochure and Large Font Fact Sheet
• Overview of Residents’ Rights
• Defines Resident-to-Resident Mistreatment
• Explains how to seek help

What Is Resident Mistreatment?¹
Mistreatment is anything that causes physical, mental and/or emotional harm and includes abuse, neglect and exploitation.

ABUSE means causing intentional harm and includes physical, mental, verbal, and sexual abuse.
NEGLECT is the failure to provide care for a resident in order to avoid harm and pain.
EXPLOITATION is when someone illegally or improperly uses your moneys or belongings for their personal use.²

IDENTIFY Abuse or Mistreatment
All residents have the right to live in a safe environment that supports each resident’s individuality and ensures they are treated with respect and dignity. If you have experienced any of the following examples of mistreatment you have the right to report it and facility staff are required to investigate all reports.

• **Physical assault**- kicking, hitting, slapping, grabbing, pushing, biting, spitting, throwing items
• **Sexual assault**- unwanted sexual advances/touching, rape
• **Verbal and Mental abuse**- name calling, yelling, cursing, racial slurs, unwelcome verbal sexual advances, threats
• **Neglect**- lack of assistance with eating and drinking, not answering call lights, improper use of restraints, lack of assistance using the restroom
• **Invasion of personal space**- unwanted sexual exposure, use of personal items without permission, theft and/or destruction of personal items, entering room without permission

KNOW Your Rights²
Federal nursing home regulations provide the following resident rights and facility requirements (state nursing home regulations may provide additional protections):

Residents have the right to:
• Be free from verbal, sexual, physical and mental abuse, neglect, exploitation.
• Be treated with dignity and respect.
• Be fully informed of a change in payment.

The facility is required to:
• Develop policies and procedures that prohibit abuse, neglect, and exploitation.
• Investigate and report all allegations of...
Key Resources

• NORC Issue Page – Resident to Resident Mistreatment

• Resident-to-Resident Elder Mistreatment (RREM) A Training and Education Guide. Available for purchase from Research Division of The Hebrew Home At Riverdale.
  http://research-hhar.org/

• A staff intervention targeting resident-to-resident elder mistreatment (R-REM) in long-term care increased staff knowledge, recognition and reporting.
  https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3677710/
QUESTIONS?
The National Long-Term Care Ombudsman Resource Center (NORC)

www.ltcombudsman.org

Connect with us:

The National LTC Ombudsman Resource Center

@LTCombudcenter

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