

HSE's Response to Elder Abuse

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Dedicated Officer for Elder Abuse
HSE South Area

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Background

- Protecting Our Future -2002
 - “a clear policy on elder abuse is formulated and implemented at all levels of governance within the health & social and protection services in Ireland.”
- 2008 – HSE Launch policy
 - Responding to Allegations of Elder Abuse policy document launched in Galway, June 2008.
Available on line www.hse.ie



Policy Statement

- HSE committed:-
 - to protection of older people
 - protection & promotion of rights of older people
- All HSE staff – duty of care to intervene
- Managers – duty to ensure local procedures developed
- LHO ensure systems in place for public to report concerns



Underlying Principles

- ❑ empowerment
- ❑ rights of the individual
- ❑ recognise people who are unable to make their own decisions
- ❑ self determination can involve risk
- ❑ ‘least restrictive alternative’
- ❑ protection of the law
- ❑ access to judicial process



Definition of Elder Abuse

- *“a single or repeated act or lack of appropriate action occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person or violates their human and civil rights”*
- 65 years
- Not just acts by individuals - includes inadequacies of care



Forms of Abuse

- Physical
- Sexual
- Psychological
- Financial or material
- Neglect and acts of omission
- Discriminatory abuse



Why does EA happen?

- ❑ Carer stress
- ❑ Alcohol addiction
- ❑ Drug addiction
- ❑ Family conflict/breakdown
- ❑ Patterns of abuse
- ❑ Dementia/vulnerability
- ❑ Learning Disability
- ❑ Mental Health issues

ALL OF THE ABOVE TO BE VIEWED CAUTIOUSLY!

- ❑ No impediment to stop abuse



Why isn't it detected earlier?

- ❑ Elder Abuse victims are often isolated from social networks, they may not have had a reason to have any contact with statutory agencies
- ❑ Gaining access is often difficult-HSE staff have no right of access (unlike child abuse)
- ❑ Victims can be reluctant to report abuse because of deliberate actions of the abuser
- ❑ Psychological effects of long term abuse-victim believes this is normal
- ❑ Ageism



Why isn't it detected earlier?

- ❑ Family is safe haven-family privacy is paramount
- ❑ Reluctance of older people to ask for help/report
- ❑ Gender differences
- ❑ Diminished capacity and consent
- ❑ Concerns of victim re economic/social repercussions
- ❑ Adult victims may feel responsible for adult child's behaviour



Why isn't it detected earlier?

- ❑ Stigma
- ❑ Persons low level of expectation about what can be achieved through intervention
- ❑ The person may be dependent on abuser for care
- ❑ Older person may be afraid of being judged incompetent if they report abuse
- ❑ Reluctance of abusers to seek assistance



Why isn't it detected earlier?

- ❑ Lack of knowledge of the criminal justice system
- ❑ The “cure being worse than the disease”
- ❑ Lack of previously clear reporting and assessment procedures within statutory bodies
- ❑ Continued Hope
- ❑ Many elder abuse victims want the abuse to end but the relationship to continue



Structure

- **Team** = National Steering Committee, Area Steering Committees.

Dedicated Officer EA, Senior Case Worker EA.

- Devise and oversee policy on EA
- Create awareness of EA among staff
- Promote training for all staff dealing with older people
- Guide development of policy and best practice for prevention
- Develop procedures and guidelines for responding to EA



Dedicated Officer EA

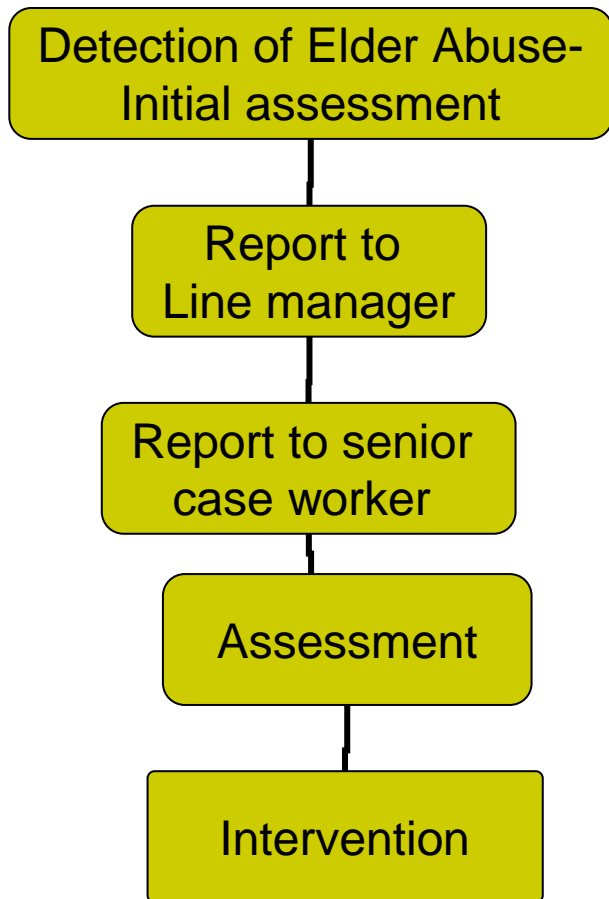
- ❑ Oversee implementation of EA policy
- ❑ Ensure Regional Steering Committee in place
- ❑ Develop processes for reporting and responding
- ❑ Design awareness raising programmes
- ❑ Design and deliver training programmes
- ❑ Provide support to other agencies in developing EA policies and procedures



Senior Case Worker EA

- ❑ Manage and coordinate the response to allegations of EA
- ❑ Carry out, assist or advise in the investigation of concerns / alleged abuse
- ❑ Liaise with Nursing Home Inspection Team in its investigation of complaints where appropriate
- ❑ Act as a resource to health professionals regarding identification and management of EA
- ❑ Participate in design & development of awareness raising and training programmes

Reporting procedure



- Procedures for staff will ensure consistent response
- Take all reports seriously
- Informal discussion can take place with senior case worker
- Anonymous complaints should be followed up
- Dealing with allegations made against an employee
- Assurances to those making complaint



Scale of problem

- ❑ In 2006 CSO statistics showed that 11% of the population were over 65 years.
- ❑ This figure will rise. (www.cso.ie , 2007)
- ❑ Not known in Ireland
- ❑ Studies elsewhere show 3% -5% of older people living in the community suffer abuse at any one time.
- ❑ Based on the above figure and our population - In Ireland 14,000 to 23,000 people **may** be suffering from abuse/neglect and/or mistreatment (O'Loughlin and Duggan 1998)

Elder Abuse Data 2008

Taken from HSE EA Service Developments Report

www.hse.ie



2008 Data Overview

- ❑ 1840 referrals made to the service in 2008,
 - ❑ 427 from DNE (23%),
 - ❑ 245 from DML (13%)
 - ❑ 859 from South (47%)
 - ❑ 309 from West (17%).

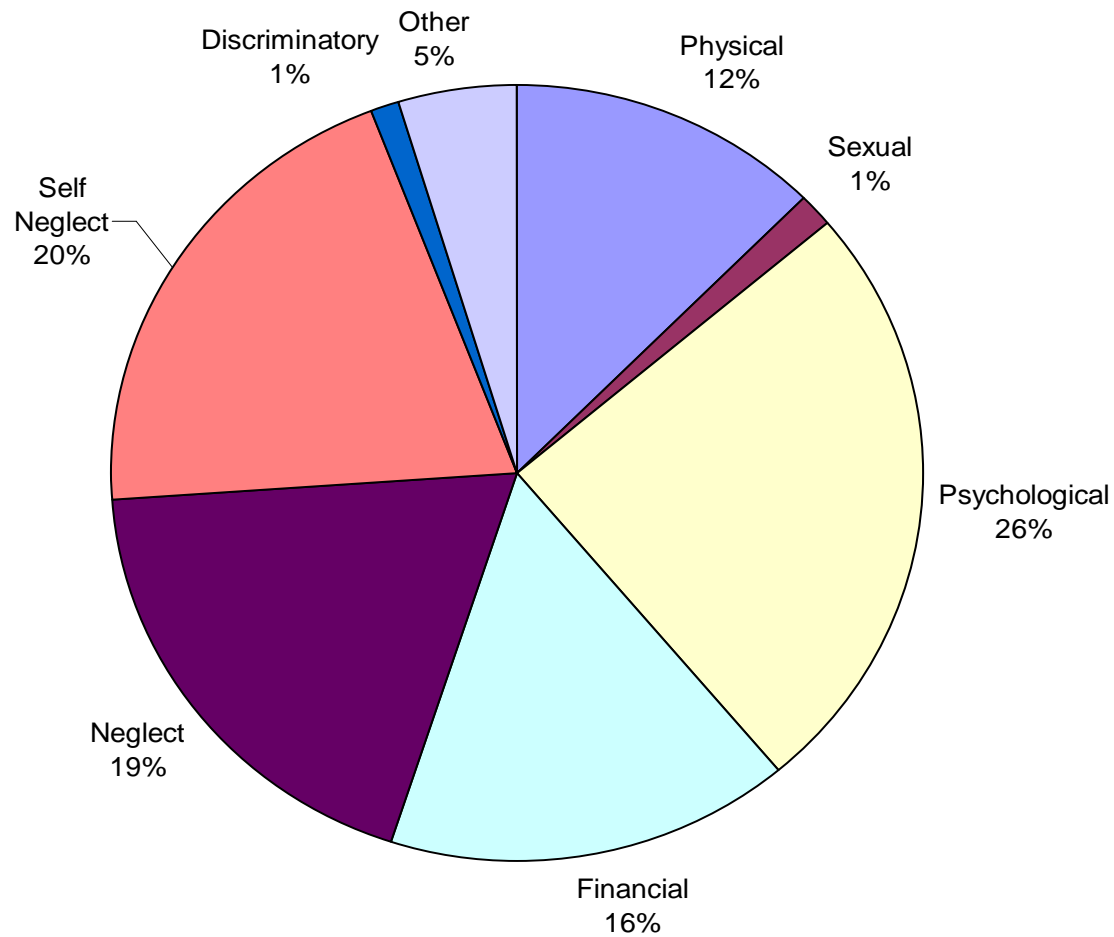
- ❑ The majority of referrals were females (64%)



Referral Rate/1000 Population O/65yrs

□ O/65 yrs.	3.41
□ 65-79 yrs.	2.3
□ O/80 yrs.	6.91

Abuse Type (2479 Abuse Categories)

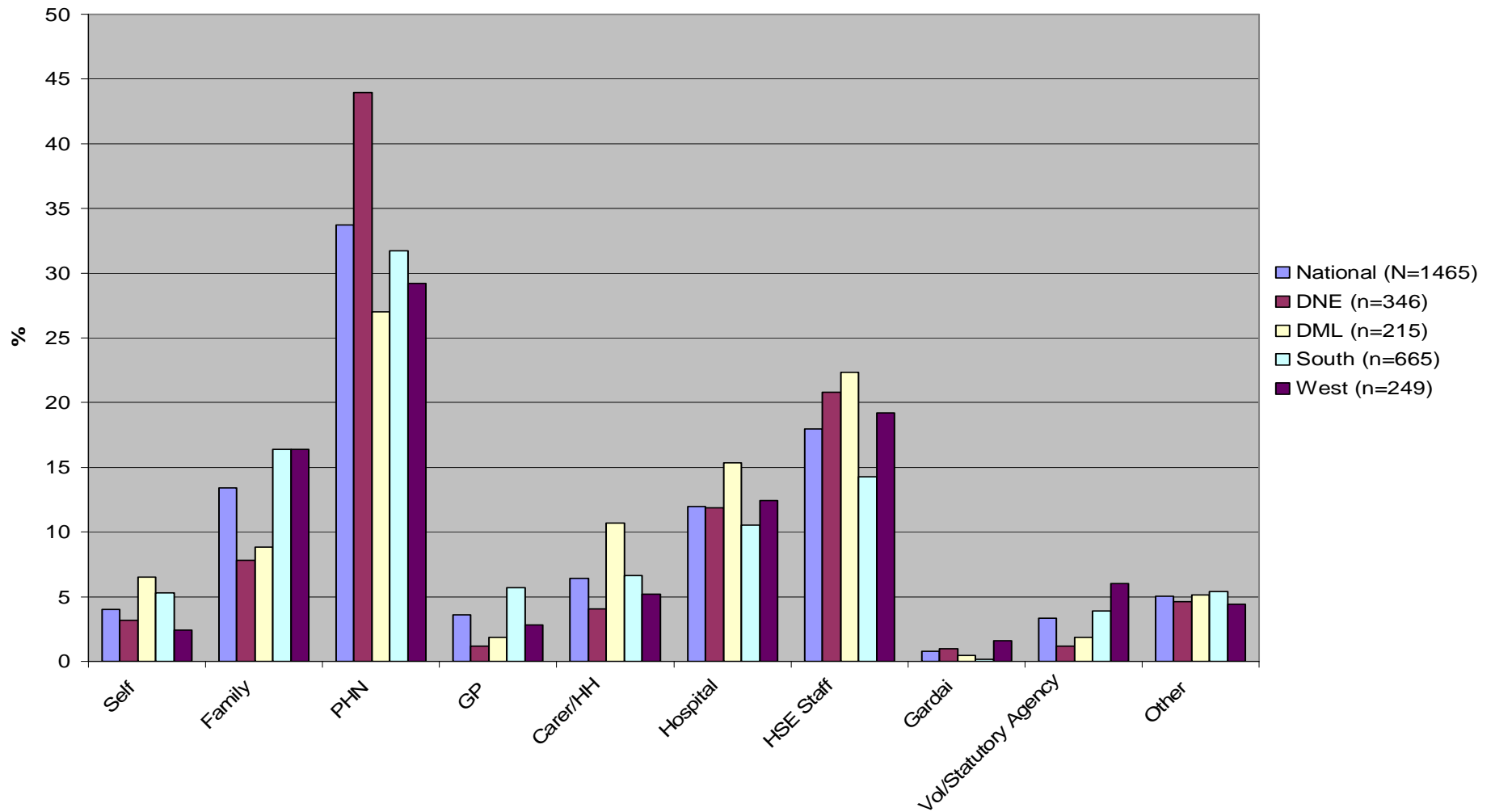




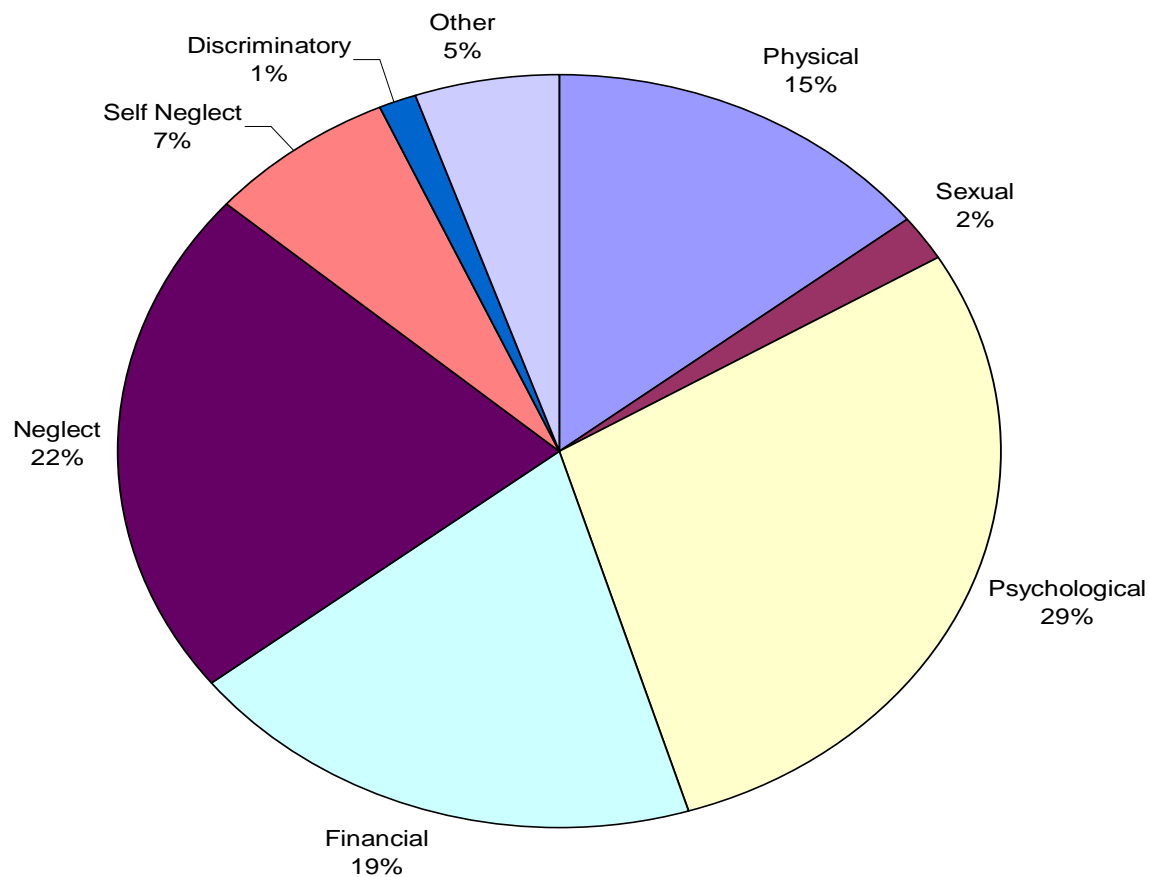
Key Statistics: All Cases Inclusive of Partial SN Cases

- Total 1481- representing 144 cases which had a partial SN component
 - **Gender:** Two thirds of all abuse reported related to females
 - **Age:** Abuse was found to be more common in the over 75 year olds with 45% of referrals between 75-84 and a further 23% being 85+
 - **Referral Source:** A consistent trend is evident across all the HSE Areas in that the PHN is the main source of referral with Hospital, HSE staff and family being the other major sources.
 - **Living Status:** The majority of referrals relate to individuals who still live at home (82%)

Referral Source (N=1465)



Abuse Type (2212 Abuse Categories)





Person Causing Concern

- 83% of cases report just one person causing concern which rises by 14% when two alleged perpetrators are considered.
- The predominant alleged perpetrators have been reported as those that have the closest relationship to the person i.e. son/daughter (43%), partner/husband/spouse (17%) and other relative (12%).
- In 53% of all cases the alleged perpetrator is living with the older person.

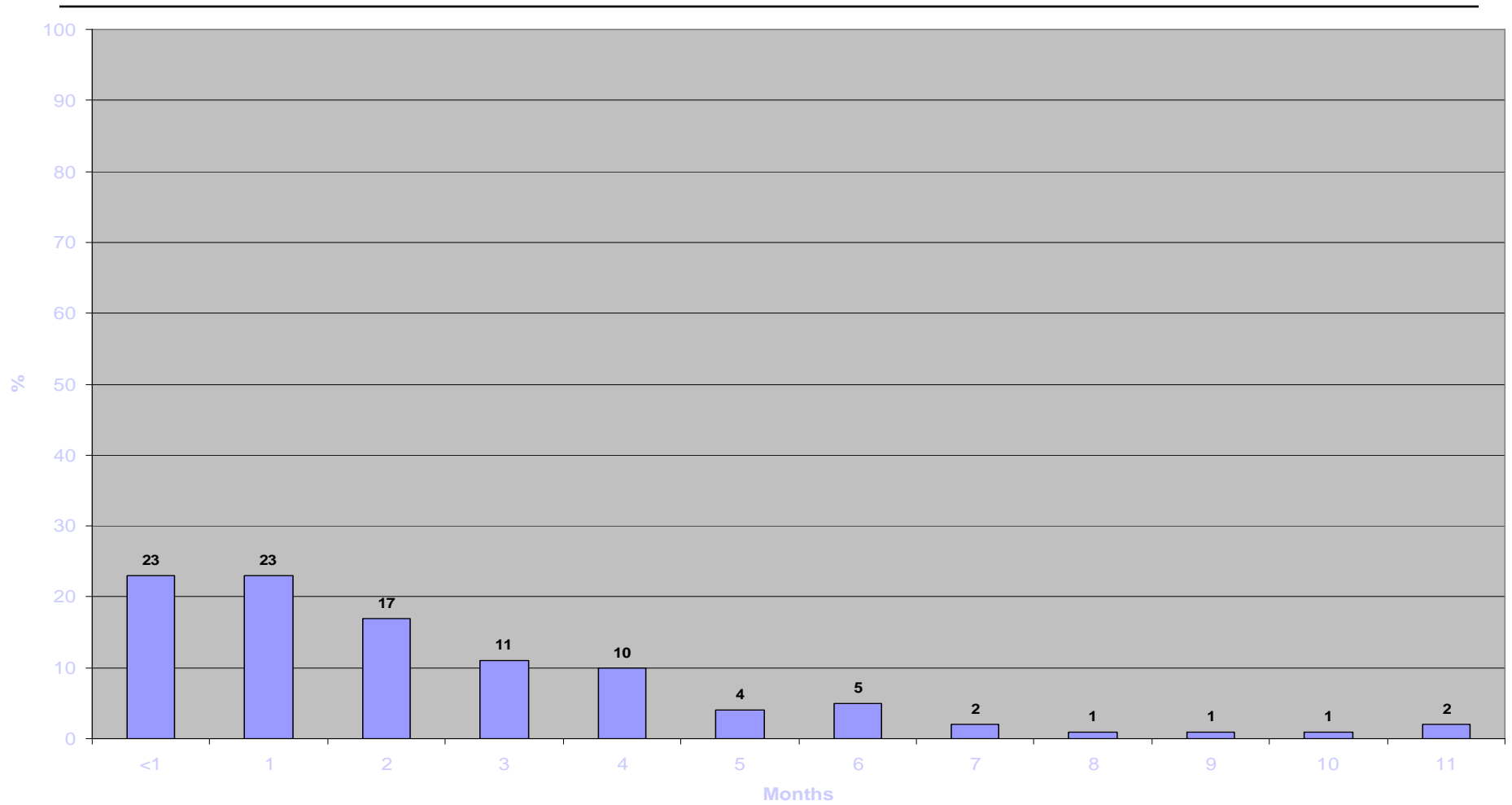
Status of Case

	DNE		DML		South		West		National	
	Freq	%	Freq	%	Freq	%	Freq	%	Freq	%
Open	207	60	126	59	268	40	205	82	806	54
Closed	130	37.5	84	39	383	57	39	16	636	43
Closed RIP	9	2.5	5	2	19	3	4	2	37	3
Total	346	100	215		670		248		1,479	

Outcome of Case

	DNE		DML		South		West		National	
	Freq	%	Freq	%	Freq	%	Freq	%	Freq	%
Substantiated	52	28	29	23	82	20	11	20	174	23
Not substantiated	72	38	23	19	127	32	15	27	237	31
Inconclusive	65	34	72	58	194	48	29	53	360	47
Total	189		124		403		55	100	771	

Average Case Length





THANK YOU!

Further Details

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Dedicated Officer Elder Abuse

HSE South

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