

PREVENTING AND RESPONDING TO RESIDENT-TO-RESIDENT MISTREATMENT

Date

Speaker name and contact

Learning Objectives

• Define resident-to-resident mistreatment (RRM),

Provide practical solutions to prevent incidents of RRM,

 Understand the importance of individualized, residentcentered care, and

Know how to report incidents of RRM.

What is Resident-to-Resident Mistreatment (RRM)?

Negative physical, sexual, or verbal interactions between long-term care residents that in a community setting would likely be construed as unwelcome and have high potential to cause physical or psychological distress in the recipient.

Source: A staff intervention targeting resident-to-resident elder mistreatment (*R-REM*) in long-term care increased staff knowledge, recognition and reporting: Results from a cluster randomized trial. Jeanne A. Teresi, Mildred Ramirez, Julie Ellis, Stephanie Silver, Gabriel Boratgis, Jian Kong, Joseph P. Eimicke, Karl Pillemer, and Mark S. Lachs. International Journal of Nursing Studies (2013), 644–656. <u>https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3677710/</u>

Examples of Resident-to-Resident Mistreatment (RRM)

 Incidents of resident-to-resident mistreatment include physical, verbal, and sexual abuse and are likely to cause emotional and/or physical harm.

 Not all incidents of RRM are considered "abuse," meaning the resident did not willfully intend to harm the other resident.

Examples of RRM include:	
Hitting, kicking, biting	Invading privacy and personal space
Screaming	Verbal threats and harassment
Cursing	Roommate conflicts
Pushing	 Unwanted sexual behavior
Throwing items	Destroying personal property

Have you witnessed, or heard about, an incident of resident-to-resident mistreatment?

If so, what did you do?

Impact of Resident-to-Resident Mistreatment

On Residents

- Loneliness
- Depression
- Anxiety
- Functional decline
- Injuries such as falls, fractures, lacerations, abrasions, and cuts
- Decreased quality of life (Ellis et al., 2014, Trompetter et al., 2011)

On Staff

- Injuries
- Discontent with the job (perhaps resulting in staff leaving)
- Anxiety about how to handle an active situation
- Negative attitude toward the aggressor

Facility Requirements

- Regardless of the type of long-term care facility, 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.
- All states require that residents be protected from abuse, neglect, and exploitation.

Facility Requirements – Assisted Living

- There are no federal regulations governing assisted living and similar facilities and requirements are different in each state.
- Assisted living and similar facilities that have a Medicaid contract have specific requirements as a Medicaid provider, including developing a person-centered service plan.
 - Plans describe the preferences and interests that make up a desired life and the supports (paid and unpaid) needed to achieve it.
 - Plans are directed by the person along with independent facilitation support as needed.

Federal Nursing Home Requirements

- § 483.10(a)(1) A facility must treat each resident with respect and dignity and care for each resident in a manner and in an environment that promotes maintenance or enhancement of his or her quality of life, recognizing each resident's individuality. The facility must protect and promote the rights of the resident. (F550)
- § 483.12 Freedom from Abuse, Neglect, and Exploitation The resident has the right to be free from abuse, neglect, misappropriation of resident property, and exploitation... (F600)
- § 483.21(b) Comprehensive Care Plans § 483.21(b)(1) The facility must develop and implement a comprehensive person-centered care plan for each resident... (F656)

Person-Centered Care

Federal Nursing Home Requirements

"Person-centered care means the facility focuses on the resident as the center of control and supports each resident in making his or her own choices. Person-centered care includes making an effort to understand what each resident is communicating, verbally and nonverbally, identifying what is important to each resident with regard to daily routines and preferred activities, and having an understanding of the resident's life before coming to reside in the nursing home."

- Staff should routinely read the care plans.
- The care plans should include interventions (if necessary).
- § 483.10(c)(2) The right to participate in the development and implementation of his or her person-centered plan of care (F553)
- Baseline Care Plans (F655)
- § 483.21(b) Comprehensive Care Plans (F656)

Nursing Home State Operations Manual - Appendix PP

Freedom from Abuse, Neglect, and Exploitation (F600)

"A resident to resident altercation should be reviewed as a potential situation of abuse."

This F-tag also addresses sexual abuse between residents

Facilities should complete a **resident assessment** and provide **care planning interventions.**

Free of Accident Hazards/Supervision/Devices (F689)

Determine if the facility ensured that the resident environment remains as free from accident hazards as is possible and each resident receives **adequate supervision** to prevent accidents related to resident-to-resident altercations where the resident's action is not willful.

As mentioned in the last slide, the SOM states that "redirection alone is not a sufficiently protective response."

What other interventions can you suggest?

Insert your state's information, if applicable

Risk Factors

Resident Characteristics

- Residents with significant cognitive impairments.
- Residents with behavioral symptoms related to their cognitive impairment (e.g., yelling, entering others' rooms).
- Residents with a history of aggressive behavior and/or negative interactions with others.

Information on slides 12 – 15 adapted from: Division of Geriatrics and Palliative Care, Weill Cornell Medical College, Cornell University and Research Division, Hebrew Home at Riverdale. Documentation of Resident to Resident Elder Mistreatment in Residential Care Facilities. Mark Lachs, Jeanne A. Teresi, Mildred Ramirez, Karl Pillemer, Joy Soloman, and Kimberly van Haitsma (March 28, 2014) and Eilon Caspi, Deaths as a Result of Resident-to-Resident Altercations in Dementia in Long-term Care Homes: A Needs for Research, Policy, and Intervention, Editorial, JAMDA (2016).

Risk Factors and Recommendations

Resident Characteristics

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Recommendations

- Identify residents with risk factors for RRM, care plan to meet their needs, and monitor.
- Identify root causes of behavioral symptoms and address them (e.g., pain, boredom, fear, sadness, hunger, changes in care needs).
 - Is this a new behavior? If so, conduct a full assessment.
- Develop comprehensive care plans.
- Provide individualized, person-centered care.

Risk Factors

Facility Characteristics (environmental and care)

- Excessive noise.
- Crowded common areas.
- Inadequate number of staff.
- Lack of staff training about individualized care in order to support residents' needs, capabilities, and rights.
- Lack of meaningful activities and engagement.

Risk Factors and Recommendations

Facility Characteristics (environmental and care)

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- Excessive noise.
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Recommendations from RRA research and CMS SOM Appendix PP. F323. Links to additional information, such as "Culture Change" and "Resident-Centered Care" is available in the "Resources" section. <u>http://ltcombudsman.org/uploads/files/library/som107ap_pp_guidelines_ltcf.pdf</u>

Recommendations

- Clear clutter, reduce noise and overcrowding.
- Provide areas for supervised, unrestricted, safe movement.
- Promote meaningful activities.
- Identify and change environmental influences on behavior.
- Implement consistent staffing assignments.
- Provide training regarding supporting needs of individuals with limited mental capacity and/or behavioral health needs.
- Ensure adequate staffing.

Investigating and Reporting Incidents

- Facility staff must report all incidents to their supervisor and/or facility administrator per facility policy and licensure requirements.
- Every incident of resident-to-resident mistreatment should be investigated, and an assessment of each resident must be made to determine:
 - · the impact on the residents involved,
 - care plan interventions to support each resident,
 - how future incidents can be prevented.
- Facilities must follow federal and/or state requirements regarding reporting incidents, such as reporting injuries of unknown source; potential abuse, neglect, or exploitation.
- Nursing homes receiving Medicaid/Medicare must report all suspected crime to local law enforcement and the state survey agency.

RESOURCES

Key Resources

- NORC Issue Page Resident-to-Resident Mistreatment http://ltcombudsman.org/issues/abuse-neglect-and-exploitation-in-long-term-care-facilities#resident-to-resident
- Resident-to-Resident Elder Mistreatment (RREM) A Training and Education Guide. Available for purchase from Research Division of The Hebrew Home At Riverdale. <u>http://research-hhar.org/</u>
- A staff intervention targeting resident-to-resident elder mistreatment (R-REM) in long-term care increased staff knowledge, recognition and reporting. <u>https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3677710/</u>
- Writing "I" Care Plans <u>http://www.vhca.net/wp-content/uploads/sites/7/2014/10/VTHCA-2014-I-Format-Care-Plan-Session.pdf</u>

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

http://theconsumervoice.org/uploads/files /issues/rrm-brochure-508-compliant.pdf (brochure)

http://theconsumervoice.org/uploads/files /issues/rrm-factsheet-large-font-508compliant.pdf (large font fact sheet)

What Is Resident Mistreatment?¹

Mistreatment is anything that causes physical, mental and/or emotional harm and includes abuse, neglect and exploitation.



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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.¹

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, cussing, 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.
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The facility is required to:

- Develop policies and procedures that prohibit abuse, neglect, and exploitation.
- · Investigate and report all allogations of

Consumer Voice Resources

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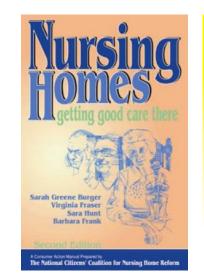
Fact Sheets

- Assessment and Care Planning
- Basics of Individualized Care
- Residents' Rights
- Guide to Choosing a Nursing Home
- Abuse and Neglect
- Emergency Preparedness
- Restraint Free Care

Resident and Family Council information

Guides

- Piecing Together Quality Long-Term Care: A Consumer's Guide to Choices and Advocacy
- Nursing Homes: Getting Good Care There



Piecing Together Quality Long-Term Care: A Consumer's Guide to Choices and Advocacy



Key Takeaways

- 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.
- Resident-to-resident mistreatment is a serious issue that has a significant negative impact on all residents involved, but incidents are often not reported and investigated.
- Behavior is often a form of communication and in order to provide appropriate, resident-centered care staff need to identify the root cause of the behavior and understand what the resident is trying to communicate.
- Providing individualized, resident-centered care and having an adequate number of well-trained staff are critical to ensuring all residents receive the care they need and are protected from mistreatment.

Three Barriers to Change

- Acceptance
- Ignorance
- Inaction



QUESTIONS?

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ombudcenter@theconsumervoice.org

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Insert your contact information