# AND FAMILY VIOLENCE PROTOCOL



**July 2015** 



# **Table of Contents**

Miss	ion, Visior	n, Objects, Values	3
Prog	rams		4
Princ	iples/Beli	efs Regarding Family Violence	4
		e Protocol	
1.0	•	٦	
2.0		g	
		pose of Screening	
		nsideration When Asking About Family Violence	
		ceptions to Screening	
3.0		re of Abuse by a Victim	7
4.0		re From a Person with Abusive Behaviour	
5.0		nagement Tools	
6.0		lans	
7.0		Process	
8.0		re from a Staff Member1	
9.0	Resource	es and Referrals – Appropriate Intervention1	2
10.0		ntation and Confidentiality1	
		iolence Training for Staff1	
	•	By Management1	
	- 3		
App	endices		
	endix A:	Intake Form	
	endix B:	Indicators Of Abuse And Neglect Of An Older Or Vulnerable Person	
	endix C:	Risk Management Tool for Older Adults	
	endix D:	Safety Plan for Older Adults	
	endix E:	Safety Plan A – Staying Safe While Living With The Abusive Person	
	endix F:	Safety Plan B – Going To A Safe Place Now	

Safety Plan C – Staying Safe When Being Stalked

Abuser Checklist

Resource Wheel

Resource Lists

Appendix G:

Appendix H:

Appendix I:

Appendix J:



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## **Vision**

A community where all seniors are valued and have the opportunity to live according to their beliefs, abilities and aspirations.

# Mission

Inspiring and supporting seniors to be the best they can be.

# **Objects**

The Objects for which the Seniors Association of Greater Edmonton (Sage) is established are to enhance the quality of life of older persons and their families through the work of staff and volunteers, and in collaboration with stakeholders, by providing:

- a. Services that promote socialization, intellectual stimulation, skill and information acquisition:
- b. Services that enhance the safety and well-being of older persons who are, or who may become, isolated, disadvantaged or at-risk in the community;
- c. Information and services that assist older persons to participate as active members of the community and to reside safely in accommodation that meets their needs; and
- d. Research and advocacy on issues affecting older persons.

# **Values**

Every person has value, obligations and rights, including:

- the right to be treated with dignity,
- the right to be treated fairly and equitably,
- the right to be comfortable, safe, and healthy,
- the right to make choices, insofar as the person is able,
- the right to accurate information,
- the right and obligation to contribute to society.



# **Programs**

Sage programs can be viewed at www.MySage.Ca

The program most relevant to this Elder Abuse Protocol is:

**Sage Seniors Safe House:** Provides safe housing, on a temporary basis, free of charge for men and women, 60 years of age and older, needing safety from an abusive situation. Other services provided while in Safe Housing include: furnished accommodation, meals and snack items, peer support, professional assistance, connections to community resources, and practical assistance.

# Principles/Beliefs Regarding Family Violence

Family Violence is a major health and social issue, which crosses all economic, cultural and age boundaries. As part of a community effort, family violence protocols/guidelines have been developed as a strategy to address this problem. This protocol provides procedures for early identification; assessment; intervention and referral with individuals and families affected by family violence and are based on the following principles:

- 1. Abuse is about power and control issues and can happen to anyone.
- 2. It is never the abused seniors fault.
- 3. Abuse to seniors can be perpetrated by anyone including a spouse, adult children, daughter or son-in-law, grandchildren, extended family member, friend/roommate, or unrelated caregiver.
- 4. All abused seniors must be treated in a respectful, supportive and objective manner. Every complaint is believed to legitimate.
- 5. Assistance will be provided regardless of gender, race, religion, culture, sexual orientation, sexual identity, ability, socioeconomic status or decision to report to police.
- 6. No action will be taken or care plan initiated without the consent and understanding of the abused senior. The abused senior has the right to refuse the services offered.
- 7. If an abused senior decides to return to the abusive situation, information about the issue of abuse, choices, and resource information will be made available. A safety plan will be developed with an applicable resource.
- 8. Though issues of abuse are similar, each case is unique and will be treated as such.
- 9. All seniors have the right to be safe. This being so, seniors experiencing abuse shall have the opportunity to have access to temporary, free, safe living accommodations while they are making decisions about their future.
- 10. Individuals working with seniors experiencing abuse must recognize the complexities and barriers involved.
- 11. It is important to understand the myths around aging that perpetuate abuse and not act in an ageist manner.
- 12. Persons in the position of management or governance will act as advocates on issues pertaining to abuse to seniors.



13. All information pertaining to the abused senior will be held in confidence unless it is deemed that by keeping this information confidential the senior's life will be at risk or that the law is being broken. In all other circumstances, if information is being shared, it will be done in such a way that the abused senior's identity is not revealed or the abused senior has signed a release of information form allowing release of information to the individual named on the form.

# **Family Violence Protocol**

#### 1.0 Definitions

# 1.1 Definition of Family Violence:

Family violence describes a systematic pattern of abusive behaviours within a relationship that is characterized by intimacy, dependency and/or trust. The abusive behaviours exist within a context where their purpose is to gain power, control and induce fear. Abusive behaviour can take many forms including verbal, emotional, physical, sexual, psychological (e.g. destruction of pets and property), spiritual, economic, violation of rights, and exploitation through neglect. All forms of abusive behaviour are ways in which one human being is trying to have control and/or exploit or have power over another.

(Community Initiatives Against Family Violence, Adopted October 9, 2001)

This definition recognizes many perspectives of family violence that include all members of society from children to seniors, in relationships that include dating, cohabitating, marital, child-parent, and care giving.

#### 1.2 Definition of Elder Abuse:

Elder abuse is any action or inaction by self or others that jeopardizes the health and wellbeing of an older adult. This includes the denial of an adult's fundamental rights according to the Charter of Rights and Freedom. The abusers are commonly family members and this type of abuse is termed family violence. Abuse occurring in a care facility is termed institutional abuse.

#### 1.3 Victim, Survivor:

The term victim recognizes the victimization that occurs in family violence and acknowledges the pain that is inflicted by violence. Another term that is used is survivor and this describes a person who has survived a relationship where family violence occurred. Survivor recognizes the strength required to live with, through and recover from family violence.

# 1.4 Offender, Abuser, Perpetrator:

All of these terms are used interchangeably. Different terms are associated with different service providers. The person who uses power and control to abuse another would be considered the offender, abuser or perpetrator.



#### 1.5 Others At Risk:

Sage realizes that even though a senior victim expresses concern about abuse, there may be other family members/individuals who are also at risk from the same abuser. Others at risk would include other seniors who have contact with the victim, any minor grandchildren, or dependent adults who rely on the victim and/or abuser for support.

#### 1.6 Family Violence, Domestic Violence, Domestic Abuse:

These terms are used interchangeably.

# 2.0 Screening for Family Violence

Family Violence is frequently difficult to identify. Indicators of violence alone are typically a poor way of determining the presence of family violence. All parties will be asked direct screening questions about family violence either as part of the intake process or as indicators of family violence present themselves (see Appendix A for Intake form). This lets all parties know that the door is open for further discussion and that there is help in this agency or from others in the community.

Universal Screening occurs when individuals are to be assessed for family violence regardless of the existence of any indicators.

Reactive Screening occurs when an individual discloses abuse, the staff sees indicators of abuse, or the volunteer reports abuse of a senior to staff.

# 2.1 Purpose of Screening

The purpose of screening for family violence is to:

- Raise awareness that family violence is a widespread problem affecting many families.
- To improve our capacity to identify and intervene in abusive relationships.
- To decrease the likelihood that individuals who are victims of family violence remain at risk.
- To decrease the likelihood that individuals will continue to use abusive behaviour.
- To decrease the likelihood that victims of abusive individuals will remain at risk.

# 2.2 Consideration When Asking About Family Violence

When screening for family violence, staff must consider the:

- Safety and privacy of the individual and possible consequences to disclosure.
- Limits of confidentiality (including situations of immediate danger to client, third parties or staff).
- Objectivity of interpreters if they are used.
- Ability to screen couples or family members individually.
- Use of direct and clear communication.
- Documentation of outcomes.
- Consultation with Child and Family Services if the safety of a minor child is of concern.



# 2.3 Exceptions to Screening:

Screening for family violence may be delayed in the following circumstances:

- The individual is intoxicated.
- The individual seems physically or mentally ill.
- A staff member is not able to communicate directly with the individual due to a language barrier, a disability, or a third party is speaking for the individual.
- The individual cannot be assured privacy.
- The individual is hostile or abusive.
- The individual requests brief service, e.g. information.
- The individual poses a safety risk to staff and others if they are confronted.

# 3.0 Disclosure of Abuse by a Victim.

Victims of family violence are often in crisis and may express a wide range of emotions such as fear, denial, guilt, self-blame and anger. It is important to help victims focus on themselves and the safety of 'others at risk' rather than on the abuser's actions (see Appendix B: Indicators Of Abuse And Neglect Of An Older Or Vulnerable Person).

#### Staff should:

- Remain calm.
- Determine the level of support the victim is receiving from other agencies.
- Encourage the victim not to blame herself or himself for the abuser's behaviour and to seek support.
- Offer to complete the Risk Management Tool for Older Adults (see Appendix C). The Safe House will complete the Risk Assessment if applicable.
- Offer to complete a Safety Plan (See Appendices D, E, F and G).
- Offer referrals to agencies for ongoing support if not already receiving service.
- Offer to call the referral agency and provide support.
- Consult with other staff in the office to debrief or develop an action plan.

#### 4.0 Disclosure of Abuse from a Person with Abusive Behaviour

People may respond to screening questions on abuse by indicating that they have concerns about their own behaviour and would like information on resources. A person who discloses that their relationship has been abusive may disclose feeling of victimization, anger, denial, blame, guilt, isolation, shame and a wide variety of other emotions. In other situations, staff may see or hear indicators of abusive behaviour or discord in a relationship that raises concern and necessitates reactive screening.



#### Staff should:

- Remain objective and non-judgemental.
- Acknowledge the courage required to take responsibility for abusive behaviour.
- Offer to complete the Sage Resource Wheel and the Sage Abuser Checklist.
- Offer referrals to services for those who are abusive in their relationships.
- Consult with other staff in the office to debrief or develop an action plan.

It is important to communicate to the person whose behaviour is abusive that they are responsible for their own behaviours and for taking action to stop the abuse.

It will be determined, on a case by case basis, whether the individual can continue to be engaged with Sage and in what context.

# 5.0 Risk Management Tools

The Risk Management Tool for Victims and Older Adults helps staff identify abusive behaviour and the risk factors that have been statistically linked to domestic homicide. The tool helps individuals increase their understanding of their danger and that of others at risk. The Risk Management Tools help the individual explore their options and provides staff with a course of action when risk factors have been identified. Any affirmative responses could indicate significant risk for the victim. It is important to help the victim be aware of the danger she/he is in and not to minimize it. (See Appendix C for Risk Management Tool For Older Adults and Risk Assessment and Appendix H for Abuser Checklist).

One needs to consider the physical, legal, economic, familial, social and emotional risks for the victim and others at risk. The goal of this intervention is to maximize safety and personal options.

The Risk Management Tool for Victims or Older Adults should be offered after a disclosure of abuse and as part of ongoing support to individuals in an abusive relationship, when there are safety concerns for the victim and others at risk.

The Risk Assessment Tool used by Senior's Safe Housing staff is on the Intake Form.

In all programs other than Senior's Safe House, the Coordinator will offer to work through the Risk Management Tool with the client and keep the Risk Management Tool in the individual's file or create a separate file if needed. If the individual is a victim, she/he will be given a copy of the Safety Plan (see Appendices D, E, F and G and Resource Wheel (see Appendix I) to take home unless it is unsafe to do so. If stalking is an issue, the individual will be given a copy of Tips for Stalking (see Appendix G).



While all abuse is serious, YES answers to any of questions 3 - 15 on the Risk Management Tool for Victims or Older Adults (Appendix C) and questions 7 - 12 on the Abuser Checklist (Appendix H) suggests that the victim may be in significant danger and the Coordinator is required to consult with a Manager or another Coordinator if a Manager is not available before the contact ends to determine appropriate action and referrals.

If a client discloses and her/his file contains information on more than one client, for example, guardianship applications, it is important that Risk Management Tools and other client information be kept in a separate file so that the safety of the victim is not compromised.

# 6.0 Safety Plans

A Safety Plan is a tool to help the victim develop a plan of action that may help keep her/him and others at risk safe. The danger of violence, including the risk of death, escalates when a victim attempts to leave a violent partner. It is also imperative that when helping to develop a safety plan that the victim participates fully. She/he must own the safety plan and see it as a useful tool or she/he will not use it. Safety Plans are developed specifically for the individual and others at risk for a specific period of time. Safety Plans should be reviewed and revised as the victim's situation changes.

Safety plans can be constructed for a variety of situations such as when:

- The victim chooses to stay in the relationship.
- The victim leaves the relationship: while the victim prepares to leave, if the victim announces that she/he are leaving and when the victim lives independently.
- A guardian of an adult child is the victim.
- The victim is receiving financial pressure from a family member, caregiver or roommate.
- When the abuser makes unwanted contact with the victim.
- When the victim has concerns about a pending court date.
- When the victim has concerns regarding other dependent people in the home.
- When the victim is being abused by a family member.

Specific safety plans for variety of situations are attached as Appendix D, E, F and G.

# 7.0 Agency Process

Each program has its own procedure as described below but in all cases when abusive behaviour is identified, the Coordinator will follow the directions under 3.0 and 4.0 as appropriate.

# 7.1 Universal Screening Question

"As part of the intake process, we ask a question so that we might provide some assistance and support to you and your family. Do you feel threatened or unsafe in any of your relationships?"



At Sage, the following two programs are required to conduct universal screening:

- **7.1a Sage Seniors' Safe House** Clients are screened for family violence as part of the intake process. A Coordinator will complete a risk assessment developed for Sage Seniors' Safe House as part of the intake process.
- **7.1b Long term Seniors' Social Work** The Seniors' Social Worker works with clients and volunteers to assess further needs, connect them to other service providers, and offer group education. Individuals will be asked screening questions on family violence during individual sessions and some pre-group sessions. If a client discloses to the Senior's Social Worker, she will follow the directions and under 3.0 and 4.0 as appropriate.

## 7.2 Reactive Screening

At Sage, the following programs are required to conduct reactive screening:

1.2a This Full House		
Ask the question in relation to the c	disclosure made or the behaviour	s witnessed.
•		
e.g. "I notice that you are	or "You said	and I am
wondering if you may be feeling thr	reatened or unsafe in any of your	relationships"

- **7.2b Community Presentations and Displays** Staff conduct presentations and provide displays in the community. Screening will not take place during presentations. If a disclosure occurs during or after a community presentation or at a display booth, the staff person will talk to the person privately, explore risk and immediacy, and offer referrals such as the Seniors Abuse HelpLine, as appropriate.
- **7.2c Guardianship Program** –Clients will be screened for family violence if there are indicators of family violence. If there is a disclosure of abuse, the Coordinator will follow the directions under 3.0 or 4.0 as appropriate.
- **7.2d Home Services** Screening for family violence does not occur in this program. If a volunteer or worker has concerns, she/he should report the incident to the Coordinator. The Coordinator will then screen. If family violence is an issue, the Coordinator will refer to Intake worker.
- **7.2e Housing Services** The Housing Program will use reactive screening. If a client discloses and she/he is looking for immediate housing, the Coordinator will refer the client to the Sage Seniors Safe House. If the client is not looking for immediate housing, the Coordinator will follow the directions under 3.0 or 4.0 as appropriate.
- **7.2f Home Relocation Services** The Housing Coordinator will screen reactively. If safety is an issue, the Coordinator will follow the directions under 3.0 or 4.0 as appropriate.



**7.2g** Intake – On Intake, reactive screening will be utilized. Sometimes clients call or drop in and are not sure what they need. Reactive screening will take place if there are indicators of family violence.

Intake person will follow the directions under 3.0 or 4.0 as appropriate:

Staff in other programs shall refer to Intake staff when:

- a client discloses to a coordinator in another program area and the Coordinator is not able to complete the Risk Management Tool with the client.
- a client discloses in Membership Services, Information Services, Sunshine Cafeteria or Volunteer Services.

# 7.3 Referrals for Screening

The following programs will refer to the Intake Coordinator for screening when:

- a client discloses to a coordinator in another program area and the Coordinator is not able to complete the Risk Management Tool with the client.
- a client discloses in Life Enrichment, Sunshine Café or Volunteer Services.
- **7.3a Life Enrichment Coordinator** –The Life Enrichment Coordinator will listen for indicators of abuse. If a disclosure occurs in Life Enrichment, the client will be referred to Intake.
- **7.3b** Sunshine Café Screening will not take place. Of a disclosure occurs, the Food Services staff in the café will direct the person to Intake.
- **7.3c Volunteer Coordinator** If the Volunteer Coordinator receives a disclosure, the Coordinator will refer the volunteer to Intake.

#### 8.0 Disclosure from a Staff Member

Employers have a responsibility to assist staff members in being safe. Sage is dedicated to assisting all people who are experiencing family violence, including staff.

Employees who are experiencing family violence are encouraged to share their concerns with their supervisor or a co-worker so that options can be explored and concerns addressed. Supervisors and co-workers will support the staff member in various ways including safety planning for home and work. Supervisors will also provide time off for moving and court attendance if required.



# 9.0 Resources and Referrals - Appropriate Interventions

**The Directory of Senior Services** is a publication of Sage and includes a section on elder abuse. The Directory can be accessed at www.MySage.ca

**The Support Network Directory** is a valuable resource. The directory is available online at <a href="http://www.211edmonton.com/search.html">http://www.211edmonton.com/search.html</a>.

**Elder Resource List** is included in this Protocol (see Appendix J).

# 10.0 Documentation and Confidentiality

Coordinators should be mindful of the following:

- Documentation should consider the safety of the victim and the possible consequences of disclosure.
- Documentation should be respectful to all who are involved.
- Documentation should be comprehensible to others.
- Documentation must be factual and clear. Documentation includes what is said or observed, not the opinion of the writer.
- Documentation that is complete allows for the best assessments and plans for safety.
- Release of information forms must be completed prior to contacting another professional about the individual.
- Victim information must be kept in a separate file from other family members.

All files are accessible through *The Freedom of Information and Protection of Privacy Act*. See the Board Privacy Policy.

# 11. Family Violence Training For Staff/Volunteers

Sage is committed to providing staff and volunteers with training on family violence and the use of the protocol and this shall be reviewed at least annually.

#### Staff Training

- 1. Basic training on family violence includes:
  - Definitions
  - Types of Violence Experienced By Seniors
  - Indicators of Abuse/Abusive Behaviours in Seniors
  - Root causes
  - Cycle of Violence
  - Barriers to Leaving
  - What To Do If an Individual Discloses Abuse



- 2. Protocol for Family Violence
  - Internal protocol and how it works at Sage
  - Boundaries/self care
- 3. Community Resources
  - Updated regularly

#### Volunteer Training:

- 1. Types of Violence Experienced By Seniors
- 2. Indictors of Abuse/Abusive Behaviours in Seniors
- 3. Barriers to Leaving
- 4. What To Do If an Individual Discloses Abuse

# 12. Sign-off By Management

This protocol has been developed by Sage in conjunction with Community Initiatives Against Family Violence. This protocol will be distributed to the staff members who are impacted by it. Sage is committed to ensuring staff members are well versed and trained in issues of family violence.

Signed on behalf of Sage by its authoriz	ed representative on
theday of	_, 201
Signed:	
Printed name:	
Printed title:	



# **APPENDIX A**

# Seniors' Safe House Intake Assessment Form

Date of call:
Move in date:
Move out date:
Nome
Name:
DOB:
Age:
Gender (circle): M F
Ethnic Origin (optional):
Preferred Language of Service:
i referred Edityddyc of Oct vice.
Marital Status (circle): Married C/L Single Divorced Separated Widowed Employment Status (circle): Employed Retired OtherSource of Income:
Referral Source (circle): Person In Need Relative EPS CSS SPP Hospital Community Agency Telecare Home Care Other
Type of Abuse (circle): Financial Physical Sexual Emotional Active Neglect Passive Neglect Medication
Relationship to Abuser(s) (circle): Spouse Mother Father Grandmother Grandfather Aunt Uncle Brother Sister Brother In-law Sister In-law Mother In-law Father In-law Friend Neighbour Other
Abuser's Name and description:
Cohabiting with the Abuser (circle): Yes No
Living Situation (circle): Alone W/Spouse W/Child W/Relative W/Others Other
Current Accommodation (circle): Apartment House own/rent Lodge Seniors Residence Nursing Home Shelter



Permanent Address:		<b>I</b>	•	ldress: _ -	dress Other	
Phone:	_ Cell:			<u>-</u>		_
Accommodation required	(circle): I	mmedi	ately W/ir	n 2 Days	W/in 1 Week	
Person In Need's depend 1=very dependent, 2=some				_	`	,
Companionship	1	2	3	4		
Property Maintenance	1	2	3	4		
Daily Needs	1	2	3	4		
Transportation	1	2	3	4		
Financial Management	1	2	3	4		
Financial Resources	1	2	3	4		
Provide a description of A	Abuser's h	nistory	of abuse/	violence	<b>)</b> :	
Does the Abuser have ac Description:	cess to we	eapons	s (circle):	Yes	No	
Is the Abuser in the empl Police Fire Dep		any o		wing (ci		
On a scale of 1-5, how lik	ely is it th	at the	Abuser wi	II pursu	e PIN once in S	afe House
1 (very likely) 2 (likely)	3 (not sur	e) 4	(unlikely)	5 (ver	/ unlikely)	



# Does Person In Need require assistance with any of the following activities (circle):

	Il prep Dressing Bathing Eating roperty Medication Household management
Financial management Persor	nal grooming Language interpreter
Tolleting Other (specify)	
Is there anyone who can assis (name/relationship/contact info)?	t Person In Need while at Safe House
Transportation requirements (	circle): ETS DATS Car Other (specify)
Which of the following equipm H=has, N=needs	ent is required by PIN (circle):
H N Cane	H N Walker
H N Hearing aid	H N Wheelchair
H N Incontinence aids	H N O2/respirator
H N Glasses	H N Toileting aids
H N Bath aids	H N Dressing aids
H N Eating aids	Α
H N Other (appliance (specify)	/)
H N Other (specify)	
If Person In Need admitted, ple	ease remove this page and place at front of file.
Health Care Number:	
Emergency Contact: Name:	
Relationsh	nip:
Phone Nu	mber:
Family Dr:	
Family Therapist:	
Any health concerns or allergi	es (please describe):



Name	Dosage	Amnt/day	Reason	(Rx) Prescription	(OTC) Over the counter

<b>Do you have a problem with addictions and if so what are they</b> (describe): Type of addiction, how often used, treatment sought?	
Does Person In Need have any visible signs of abuse (describe):	

**Describe Person In Need's emotional state:** 



Based on this interview, what is the Person In Need's suitability for the Safe House:				
1 (unsuitable) 2	(suitable)			
Reasons why the Safe House may be unmade:	nsuitable and in such case what referrals were			
Risk assessment completed by:				



# APPENDIX B INDICATORS OF ABUSE AND NEGLECT OF AN OLDER OR VULNERABLE PERSON

Elder abuse is any action or inaction by self or others that jeopardizes the health and wellbeing of an older adult. This includes the denial of an adult's financial rights according to the Charter of Rights and Freedom. The abusers are commonly family members and this type of abuse is termed family violence. Abuse occurring in a care facility is termed institutional abuse.

WHAT TO

	WHAT TO	Acknowledge Accumulate/doc	ume	nt evidence	9 0	f suspec	cted abuse.	
	DO 🗀	Barriers Address concerns of fear of retaliation, withdrawal of caregiver and family support						
	-	confidentiality.						
		<b>Urgency</b> Assess immediate risl	<b>gency</b> Assess immediate risk of physical harm or if basic necessities of life are provided.					
	₹,						necessities of life are provided.	
	CHECK	Empower Inform person of the						
		support this. Establish a safety						
	FOR	<b>Refer</b> Seek support or consulta			nro	ofession	als and offer the person	
		resources.			۲.、	310001011	allo aria orior trio porocii	
-	FINANCIAL ABUS		$\Rightarrow$	Indicators	s -	- Standa	ard of living not in keeping with	
	That theft or exploitation of a person's money, properly or assets (e.g.			income and assets, theft of property, unusual or inappropriate activity in bank accounts, forged				
	interference in mak						ial documents, coercion used in	
	decision, frequent						asing property overdue bills,	
		sign papers, forgery,					ess to their personal bank account.	
	misuse of Power.o			illilling se	71111	oi s acci	ess to their personal bank account.	
-	EMOTIONAL ABU		$\Box$	Indicators	_	foor o	nxiety, depression, withdrawal,	
			7					
	Any action or state						ness, fearful interaction with	
		, fears. Diminished self-					speaking on behalf of person and and physical signs of isolation (no	
		e.g. threats to do harm,						
	put-downs)	acy. belongings or pets,		phone, vis	SILC	)IS, I.V.	).	
-	PHYSICAL ABUS	_	1	la dia atau			sia ad inituria a /h mais a a hauma a a	
			⇧				ained injuries (bruises, burns or	
		uses physical discomfort,					es of healing) missing hair,	
				o from hair pulling, untreated medical history of injuries.				
				problems	an	ia nistor	y or injuries.	
-	and rough handling	3)					In Parton Halana	
	NEGLECT	de besis ou nouscal sous needs	/	f = = =l		$\Rightarrow$	Indicators – Unkempt	
		de basic or personal care needs					appearance, inappropriate or	
		iene, clothing, physical aids, exer					dirty clothing, poor personal	
		attention, supervision if required,	near	tncare,			hygiene, dehydration, unhealthy	
	and safer environm		1	- 6 -1011			living conditions (dangerous	
		- <u>unintentional</u> failure of a caregi					and/or in disrepair), lack of social	
		sponsibilities because of lack of l					contact, irregular medical	
		ty, or lack of awareness of comm	unity	y			appointments, lack of or poor	
	supports/resources			ien a ·			condition of dentures, glasses,	
		ntentional failure of the caregiver	to fu	uitili their			hearing aids.	
	care giving respons							
		sons' inability to provide for his/h	er o	wn				
-	essential needs .							
	SEXUAL ABUSE				>		ors – pain, bruises or bleeding in	
		ual behaviour including sexual					nital or chest area, STD's, recent	
		ve use of pornography, fondling of	or				sion, and recent incontinence of	
ļ	sexual assault.					stool or		
	MEDICATION ABI				>		ors – change in mental ability or	
		unintentional misuse of medication	ons				I activity and decline in general	
		such as withholding or providing					status including confusion, poor	
		odily harm or sedating or other					e, gait disturbance, falling, depression,	
adverse effects						recent in	continence and/or agitation.	



# **APPENDIX C**

# **RISK MANAGEMENT TOOL FOR OLDER ADULTS**

Individual's nam	peDate						
have some questions to explore with you that will help me better understand what is appening and may help you figure out what options may be best for you. You always are in control and can decide not to answer any question you feel uncomfortable answering.							
be made to Chil in your situation	efore we begin, I would just like to remind you that the law in Alberta requires that a report e made to Children's Services when a child is exposed to family violence. If that is the case your situation, you and I can work through that together and determine the best way to pproach Children's Services for help.						
Are you currentl	y living with the person who is abusing you? ☐ Yes ☐ No ☐ Sometimes						
Name of person	who is abusing you Relationship to abusive person						
Use the Abuse	r's name throughout the document when asking questions.						
	financially or emotionally dependent on you?  □ Sometimes						
•	ally or emotionally dependent on? □ Sometimes						
	: NOTE TO STAFF: Items that are answered in the positive should be d with the individual and comments recorded on the back of the page.						
<ol> <li>Are there an ☐ Sometime</li> </ol>	y dependent children or dependent adults living in the home? ☐ Yes ☐ No Relationship to you						
	of abuse are you experiencing now? Circle each one the individual is and add others.						
Physical	hitting, choking/strangulation, slapping, restraining, pushing, biting, threatening or destroying property, harming pets, etc.						
Emotional	name calling, yelling, isolating, bullying, bribing, denied access to visitors or telephone, denied privacy, etc.						
Financial	selling your items, forcing you to sign legal papers in their favour, abusing power of attorney, adults living off of their parent's income, putting all bills in your name, having no say in household finances, etc.						
Medication	over or under medicating, refusing to buy medication, selling medication on the street, etc						
Neglect	withholding food or fluids, inadequate medical attention, lack of necessary appliances such as walkers, etc.						



Sexual	unwanted touching, forced intercourse, sexual name calling, affairs, bringing home STD's, etc
Spiritual	criticizing or not allowing you to practice your faith, manipulating interpretation of religious scripture to control and isolate, etc.

		ent on? (Mobility, grocery shopping, n't Know	etc.)		
		crease in frequency or severity of the abuse? i't Know			
for a long	time?	nditions that are very serious or that you have had n't Know	d, or v	vill ha	ive,
•	_	ng or killing yourself? n't Know			
		remembering things or understanding new informa 't Know	ation?	•	
HIGH RISK F			Yes	No	Don't Know
8. Has there	been police invol	lvement?			
9. Are there	any court orders i	in place to protect you			
from	(Restraining	g Order, Emergency Protection Order,			
Queen's E	ench Order, Pea	ice Bond)?			
Have you	and	complied with the terms of the order since it			
was grant	ed?				
10. Are there	any upcoming co	urt dates? When?			
11.Has	threate	ened or harmed or killed a pet?			
12.Does	have a	access to weapons (guns, knives or tasers)			
13.Has		ned to hurt you with a weapon?			
14.Has	ever thr	reatened or used a weapon against someone			
else?					
15. Are drugs	alcohol or gamb	oling present in your relationship, if so how?			
		Abusive person			
		Abused person			
16. Have you		_ever attended a drug or alcohol, or gambling			
treatment	program?	Abusive person			
		Abused person			
17. Have you	congrated from	and are now in a new relationship?			
•	separateu nom _				
18.Has		reatened or attempted to commit suicide?			

19.Has



20. How safe do you feel?	
□ no concern	□ very concerned

Ask the individual, "No one deserves to be abused and we are concerned for your well-being and the well-being of those living in your home. Have you considered your options?"

Note to staff: While **all abuse is serious**, **YES** answers to **any** of questions 7-19 suggest that this person may be in significant danger and you may consider consulting with Bernice Sewell or one Safe House Staff before the individual leaves your office.

Move to Safety Plan for Older Adults- Appendix D, E, F or G



# APPENDIX D

# SAFETY PLAN FOR OLDER ADULTS

Copy to be kept on file, copy to be given to client (with safety considered)

ou need to pay attention to changes in mood and behaviour when those warnings signs pear and take action:
☐ The warning signs thatis likely to become abusive are:
☐ When I see those things happening I can:
☐ What are my personal limits? What would have to happen for me not to stay any longer or to have the abuser leave my home?
afety during violence. You cannot always avoid violent incidents; to reduce harm and the the following:
When an argument erupts I will move to a safe room (Try to avoid bathrooms, garage, kitchen, near weapons or in rooms without access to an outside exit)
If there are any non-abusive dependents living in the home, I can teach the person to get out of the room where the abuse is occurring and go to a safe room with a phone and preferably a lock on the door.
I will have a safe package or list already prepared and stored in a place that I can access easily and the abuser will not find.
evelop a Safety Plan that includes a Safe Package and an Escape Plan scape Plan - if I have to escape quickly I can:
If I want to go to friends or family:  • Safety issues if I go there.
How will I get there? Day vs. Night, weekend vs. weekday
How long can I stay there?
If I want to go to a shelter, the phone numbers are: Edmonton Seniors Safe House 780-702-1520 (male and female victims) Lurana Shelter 780-424-5875 WIN House 780-427-0059 Safe Place (Sherwood Park) 780-464-7233 Shelters will provide transportation for the individual.



Safe Pa		ly these are the things I should try to take with
☐ ID (fo	or me and my dependents) Age Security Card ty information ications or prescriptions info and house keys nge of clothes	<ul> <li>□ Treaty/Immigration papers</li> <li>□ AHC card</li> <li>□ Marriage license</li> <li>□ Income tax forms</li> <li>□ Cash, credit cards &amp; bank info.</li> <li>□ picture of the abusive person</li> <li>□ Copies of custody orders, EPO's, restraining orders</li> <li>□ Other items important to me</li> </ul>
Discuss find ther		rafety plan information so that the abuser does not
• A	ole I can call that I can talk to or h t church or senior's centre leighbour/friend	ave come over.
eme	rgency or the dispatch line at 780	esistance is required. I will call 911 if it is an -423-4567 to discuss my concern with a police isive person must be removed from your home.)
	contact the Seniors Abuse Helpl mation at 780-484–8888.	ine (available 24 hours a day) for support and
_	contact Elder Abuse Resource S someone to know my options and	Services at 780-477-2929 if I would like to consult resources.
	rehearse an escape plan, includ are also victims.	ing non-abusive family members living in the home
□ I can pers	, , ,	if I am living in my own home with the abusive
	put a lock on my mail box, have nome of someone I trust or to a po	cheques direct deposited or have mail redirected to ost office box.
□ I can	change the locks on the door or	change my phone number.



I can write down everything that happens when the abusive person has contact with me.
I can change my PIN number on my bank cards and store my credit cards in a safe place.
I can learn to erase phone numbers and history on my computer and the phone.
I can open a separate bank account and save as much as I can.
I will not be coerced into signing any legal documents by a family member.
I can avoid contact with the abusive person if they are agitated and are phoning or plan to come over.
I can have some money or bus tickets hidden away in case I need to leave in a hurry.
The places in my neighbourhood that are open 24 hours a day (convenience stores, gas stations) are (They can be a safe place to go to wait for help).
I can make sure the safety package contains only what I can carry.



#### APPENDIX E

#### SAFETY PLAN A: STAYING SAFE WHILE LIVING WITH THE ABUSIVE PERSON

You need to pay attention to changes in mood and behaviour when those warnings signs appear and take action: ☐ The warning signs that \_\_\_\_\_ is likely to become abusive are: ☐ When I see those things happening I can: ☐ What are my personal limits? What would have to happen for me not to stay any longer? Safety during violence. You cannot always avoid violent incidents. To reduce harm and get help consider the following: ☐ When an argument erupts I will move to a safe room (try to avoid bathrooms, garage, kitchen, near weapons or in rooms without access to an outside exit) ☐ I can teach the people I spend time with to get out of the room where the abuse is occurring. We can identify a safe room with a phone and preferably a lock on the door. ☐ I can teach them to call 911 out of the view of the abuser and leave the phone off the hook. Develop a Safety Plan that includes a Safe Package and an Escape Plan Escape Plan - if I have to escape quickly I can: ☐ If I go to friends or family: • Safety issues if I go there: • How will I get there? Day vs. Night, weekend vs. weekday • Where might any minor children be (i.e. would I need help getting them)? How long can I stay there? ☐ If I want to go to a shelter, the numbers are: Lurana Shelter 780-424-5875 WIN House 780-427-0059 Safe Place (Sherwood Park) 780-464-7233 SAGE Safe House 780-701-1520 Shelters will provide transportation from a safe location.



	kly these are the things I should try to take with
me if possible.  ID (me and my children)  Medications or prescriptions info Car and house keys Change of clothes Comfort for children Baby food, bottles & diapers Personal Phone book Treaty/Immigration papers	<ul> <li>□ AHC card</li> <li>□ Marriage License</li> <li>□ Income tax forms</li> <li>□ Cash, credit cards &amp; bank info.</li> <li>□ Picture of the abusive person</li> <li>□ Copies of custody orders, EPO's, restraining orders</li> <li>□ Other items important to me</li> </ul>
find them	safety plan information so that the abuser does not d in one room or area of the house
safe. I will let them know about any orders. I can instruct them exactly when the same of	sive relationship and discuss how they can help me be custody orders that exist as well as any no contact hat to do ifcomes around.
☐ The places in my neighbourhood that	and history on computers. and save as much as I can. ts hidden away in case I need to leave in a hurry. It are open 24 hours a day (convenience stores, gas I can go there to wait
<b>ENCOURAGE THE INDIVIDUAL TO CO</b>	E CONTACTED IF A CHILD IS INVOLVED.  ONTACT CHILD & FAMILY SERVICES  O PRIOR TO YOUR CALL. COMPLETE THE

REPORTING FORM. DOCUMENT THE OUTCOME OF YOUR DISCUSSION WITH CHILD &

**FAMILY SERVICES.** 



# Escape Plan (see extra space for alternate plans on back of page

If I	If I have to escape quickly I can go to (address)		
		Phone Phone	
	Safety precautions if I go there	<del></del> -	
Ш	I will get the kids by	if it during the day, At night I can go by	
	If individual wants to go to a shelte transportation for individual.	r, provide phone numbers. Shelters will provide	
	fe Package – if I have to leave que if possible.	ickly these are the things I should try to take with	
	ID (myself and the children)	☐ AHC card	
	Medications or prescriptions info	<del>_</del>	
	Car and house keys	☐ Income tax forms	
	Change of clothes	Cash, credit cards, bank info.	
	Comfort for children	☐ Picture of the abusive person	
	Baby food, bottles, diapers	□ Copies of custody orders, EPO's,	
	Personal Phone book	restraining orders	
	Treaty/Immigration papers	Other items important to me	
l w	rill keep these things		
	cape Plan (see extra space for all		
	navo to occupo quiotaj i can go		
_	Cofoty propositions if Los	Phone	
<b>_</b>	Safety precautions if I go		
	there	if it during the day, At night I can go by	
	I will get the kids by		
		r, provide phone numbers. Shelters will provide	
	transportation for individual.	-, p	



# Escape Plan

If I have to escape quickly I can go to (address)		
	Phone	
■ Safety precautions if I go there		
□ I will get there by	if it during the day, At night I can go by	
Escape Plan		
If I have to escape quickly I	can go to (address)	
	Phone	
■ Safety precautions if I go there		
	if it during the day, At night I can go by	



# **APPENDIX F**

# SAFETY PLAN B: GOING TO A SAFE PLACE NOW

Escape Plan –I want to go to:  I go to friends or family:  • Safety issues if I go there.	a Safe Package and an Escape Plan
How will I get there? Day vs. Nig	ht, weekend vs. weekday
Where might any minor children	be (i.e. would I need help getting them)?
<ul><li>How long can I stay there?</li></ul>	
<ul><li>☐ If I want to go to a shelter, the numb</li><li>☐ Shelters will provide transportation f</li></ul>	
<b>Safe Package –</b> What parts of the safe access easily without being put in dang	ty package does the person have available or can er?
<ul> <li>□ ID (me and my children)</li> <li>□ Medications or prescriptions info</li> <li>□ Car and house keys</li> <li>□ Change of clothes</li> <li>□ Comfort for children</li> <li>□ Baby food, bottles, diapers</li> <li>□ Personal Phone book</li> <li>□ Treaty/Immigration papers</li> </ul>	<ul> <li>□ AHC card</li> <li>□ Marriage License</li> <li>□ Income tax forms</li> <li>□ Cash, credit cards, bank info.</li> <li>□ Picture of the abusive person</li> <li>□ Copies of custody orders, EPO's, restraining orders</li> <li>□ Other items important to me</li> </ul>
Note to staff: Review <b>MAKING A REPO</b> determine if reporting is necessary.	ORT TO CHILD AND FAMILY SERVICES to
Note to staff: Stay with the person until	all arrangements are addressed. Notify



# **APPENDIX G**

# SAFETY PLAN C: STAYING SAFE WHEN BEING STALKED

#### IN THE EVENT THAT IT BECOMES UNSAFE TO STAY WHERE I AM:

Es	<ul> <li>cape Plan –I want to go to:</li> <li>I go to friends or family:</li> <li>Safety issues if I go there.</li> <li>How will I get there? Day vs. Nigl</li> </ul>	nt, weekend vs. weekday the (i.e. would I need help getting them)?
	If I want to go to a shelter, the number Shelters will provide transportation for	
	fe Package – What parts of the safet cess easily without being put in dange	ry package does the person have available or can er?
	ID (me and my children) Medications or prescriptions info Car and house keys Change of clothes Comfort for children Baby food, bottles, diapers Personal Phone book Treaty/Immigration papers	<ul> <li>□ AHC card</li> <li>□ Marriage license</li> <li>□ Income tax forms</li> <li>□ Cash, credit cards &amp; bank info.</li> <li>□ Picture of the abusive person</li> <li>□ Copies of custody orders, EPO's, restraining orders</li> <li>Other items important to me</li> </ul>
ST	EPS TO TAKE	
	make contact with you or anyone yo phone call) nor do you want anyone This is a dangerous time for you – m STOP ANY AND ALL CONTACT aft File for custody of the child or childred Inform the Police – file a statement of as possible, if you have any evidence to the Police Officer taking your comyou have one. (The Police officer carright to do so. Get the badge # of an complain to his/her supervisor – ask	en. detailing anything he/she has done so far – be specifice, make copies and attach to the statement or show it plaint. Take along a picture of the abusive person if nnot refuse to take your complaint. It is your legal y officer that refuses to take your complaint and Staff for assistance in doing so.)
	<b>Every time</b> the abusive person does copies of any evidence.	s something else, file a new statement and attach



	Get to know the Police Officers in your local community Police Station. Explain your situation and what the abuser has been doing to abuse you. Show them copies of any orders you have. Make them aware of any security concerns you have at your residence. Ask for their support and ideas to keep yourself safe. Keep their names, badge #'s and phone numbers handy.
	Apply for an Emergency Protection Order (EPO) –The Police may make the application on your behalf (24 hours a day) or you may apply directly to a Provincial Court Judge during courthouse hours. Applications are available at the Provincial Court Family and Youth Division. For assistance call (24 HRS) 780-422-9222 for information.
	Keep a copy of any orders (including custody orders in a safe place in your home. Give copies to the school or day care your children go to).
ВЕ	ECOME LESS ACCESSIBLE
	Change your phone number – both the land line and cell phone. Staff <b>may</b> be able to assist with getting an emergency phone or emergency security systems. Where possible, put it in another name, even a slightly altered version of your own name. Keep the old # and use an answering machine to record all calls coming to that #. Screen all your calls using an answering machine.
	Change your email address and give it only to people you absolutely trust but keep the original intact to collect any threats the abusive person may send.
	Change the PIN #'s and passwords on all bank accounts, etc.  Close credit card accounts and have the bank organize your debts and accounts under an
	altered name – perhaps using a middle initial to identify this new account from any others. Avoid using your SIN # unless absolutely necessary.
	If you have an SFI or CW file ask that the files be marked as High Security which means only your worker and a supervisor can access them.
	HOME
	Change the locks on your doors and add a deadbolt if there isn't one.
	Make sure your windows are secure.  If you have a lot of shrubs or trees in your yard explore the possibility of cutting them back and keep spaces around windows clear of plants.
	Do not leave tools, garden implements, picnic tables, ladders, etc outside – lock them in a shed or garage or ask a neighbour about storing them there.
	Install a motion detector outside at both the front and back doors and anywhere else there is power.
	Make sure curtains are drawn after dark.
	Put some inside lights on a timer so it is difficult to tell when you are home and when you are not.
	Avoid going anywhere alone and, if you must, plan ahead and arrange for trusted others to know where you are.
	Remove all critical personal information from your computer.
	Shred all mail and paper documents going into the garbage.



#### **GATHERING EVIDENCE**

Keep every letter, note, gift, card, etc (including envelopes and anything that is put inside)
that you receive from the abusive person (or someone representing him/her) in a safe
place. Make a copy to attach to your Police Statement. Make another copy to leave with a
trusted person. Date anything that does not have a date and initial it.
Keep every email from the abusive person (or someone representing him/her) and make
a printed copy – follow the directions for printed materials above.
Keep a camera by the door/window (one that dates the picture is perfect but any will do).
Take pictures of the abuser anytime your abuser is (or someone representing him/her)
hanging around – try to include some landmark in the picture that identifies the location.
Keep all answering messages from the abusive person (or someone representing
him/her). Again, make copies if possible and make it available to the Police.
Keep copies of every statement you make to the Police and the evidence you gave them,
or showed them, at the time. Record the Badge # of the police involved and any
instructions or comments.
Keep a diary of <b>every event</b> – date, time, location, others present, exactly what was said
or done and by whom.
Use *57 on calls from the abusive person (or someone representing him/her) and call
police immediately with the time of the call.
Gather information from old email addresses and answering machines as they are used
and pass them on to police each time.

Teach others – children, friends, and family - about the information above. Be cautious of others who align themselves with the abusive person and may share information with him/her.

NOTE TO STAFF: COPY THIS DOCUMENT FOR THE FILE AND GIVE ORIGINAL TO THE PERSON. CHILD & FAMILY SERVICES MUST BE MADE AWARE OF THE SITUATION.



# **APPENDIX H**

# **ABUSER CHECKLIST**

Individual's name				
Date Staff completing form (Position with Sage):				
Staff completing form (Position with Sage):				
This checklist is a tool used <b>AFTER THE INDIVIDUAL HAS ADMITTED TO USING ABUSIVE BEHAVIOUR</b> to briefly measure the potential for immediate harm to their victim Information gathered is then used to identify the next steps in assisting the abuser and the victim.				
1.	Please describe what happened?			
2.	Are you still in contact with (your victim)?			
3.	Is (your victim) safe from you or should they be concerned?			
4.	What are your triggers?			
5.	What do you do to stop yourself?			
6.	Are you aware of or have you sought help regarding your behaviour			
Then 7.	also consider: Is the abuser suicidal or homicidal?			
	ΠYes ΠNO			



ο.	has the abuser ever attempted to strangle the victim?				
	□Yes	□NO			
9.	Does the abuser have access to weapons? Is there evidence of past use of weapons or threats?				
	□Yes	□NO			
10.	Has the abuser stalked the victim?				
	□Yes	□NO			
11.	Has the frequency and severity of the abuse increased?				
	□Yes	□NO			
12.	Has the victim recently left, is planning to leave the relationship, or started a new relationship with someone else?				
	□Yes	□NO			
13.	What prevents the abuser from following through?				
<u> </u>	Offer approp Consider the considered a When there	at risk even when they are exposed is imminent risk of physical harm o	dividual to keep.  Children's Services. Note: a child is d to family violence. (1 800 387-5437) contact the victim re. potential risk and is in the best interest of the victim.		
Senio Invitat The F	ginal Consultii rs Abuse Hel <mark>t</mark>	nsibility (Edmonton John Howard)	780-454-8888		

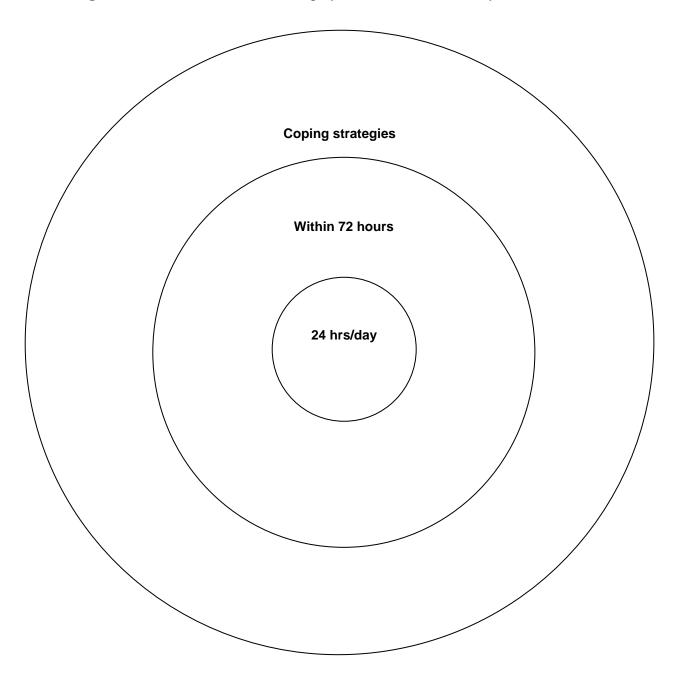
**Note to staff**: While **all abuse is serious**, **YES** answers to **any** of questions **6-11** suggest that the victim may be in significant danger and you are required to consult with a Supervisor or another Coordinator before the contact ends to determine appropriate action and referrals. *If question 12 reveals barriers the risk may be mitigated but consultation is still advised.* If it is felt that the victim may be at imminent risk of physical abuse, the victim will be contacted directly whenever possible or the police will be made aware of the situation.



#### **APPENDIX I**

#### **RESOURCE WHEEL**

In the inner circle, write the names and phone numbers of people and places you can call anytime, day or night, for help. E.g. close friends or family, 911, Seniors Abuse Helpline. In the middle circle, write the names and phone numbers of people or places you can call primarily daytime or weekdays. E.g. friends, family, counselling services, support groups. In the largest circle, write down the things you do to take care of yourself.





#### **APPENDIX J**

#### **ELDER ABUSE RESOURCE LIST**

This list has been compiled by the **Elder Abuse Intervention Team**. The resources selected for inclusion are those that may address abuse or neglect of older adults more directly, or that provide services often needed by the victim, the abuser, or other family members. For additional services, please see:

# The Directory of Senior Services

Published annually by the Seniors Association of Greater Edmonton (780) 423-5510 www.MySage.ca

# **The Directory of Community Services**

Published annually by the Support Network

211 (Community Connection) www.211edmonton.info

Resource	Service Offered	Phone Number
	•	
	•	