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ALTERNATIVE SOLUTIONS



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[Alternative Solutions in Long Term Care](#)

Recognizing Abuse and Neglect in the Home Setting

National Council of Certified Dementia Practitioners
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Most of us live in neighborhoods and come in contact with neighbors. How do you know when there is a case of Abuse or Neglect in the home? It's important to get to know your neighbors, especially your elderly neighbors. You can't be on the look out for situations if you have not even taken the time to get to know your neighbors.

Be aware of Care Giver burnout. Some of the warning signs are lack of sleep, depression, withdrawing from friends and social groups, resentful or guilty comments, alcohol and drug use, suicidal thoughts and short tempered.

Often times it's is situations related to stressful life events that can cause abuse or neglect such as alcoholism or drug addiction, isolation, no outside support, medical conditions and lack of financial resources.

If you are aware of a caregiver who is at the end of their rope, offer referral sources such as a support group, clergy involvement, Office on Aging, Division of Social Services and the Alzheimer's Association. Local churches can be a huge benefit in this area by offering a church volunteer or clergy visit. This can be very beneficial and relive some of the stress of feeling isolated. Other resources such as respite services during sermons, teen volunteer groups to assist the care giver in light house hold chores, support groups. Referring care givers to community resources such Office on Aging and the Salvation Army Senior Companion Program (NJ) senior centers, respite in Assisted Living or Nursing Home. Sometimes, a few days a week in an adult day care can be very beneficial for not only the care giver but the dementia family member.

Another great service is In Home Recreation. This provides an outlet for the dementia client and is soothing and stimulating. Generally In - Home Recreation Therapist allow the care giver to run errands during the visit. Organizations such as NAAP or ATRA may be able to offer referrals or suggestions for finding an Activity Professional or a Certified Therapeutic Recreation Specialist in your state.

One big mistake we all make is saying to a care giver, "Call me if you ever need anything." Care givers never call as they don't want to be a burden. Instead of saying that, the next time you are going to the grocery store, go over and ask for a list of items they need. Or if going to the same church, ask if you can give them a lift. Some times it's the simple things they need help with and will make all the difference.

Not every suspected situation is abuse or neglect, especially in the case of dementia. With the progression of dementia, providing care can be challenging. Some dementia clients may refuse to change their clothes, bath or eat. So it's important to evaluate the situation before jumping to conclusions. However, if your instincts are putting out loud alarm bells, listen to your instincts! Take the time to investigate.

It is important to understand the difference between Abuse and Neglect. Neglect "Is the failure to care for a person in a manner, which would avoid harm and pain, or the failure to react to a situation which may be harmful." "Neglect may or may not be intentional."

Abuse means causing intentional pain or harm and includes physical, mental, verbal Psychological, corporal punishment, unreasonable seclusion, intimidation and sexual abuse.

Abuse can result in one or more of the following conditions immobilization, incontinence, dehydration, weight loss, pressure sores and depression.

The following may be signs of abuse.

- Emotionally upset or agitated.
- Extremely withdrawn and non communicative
- Unusual behavior (sucking, biting or rocking)
- Humiliating, insulting, frightening behavior.
- Wanting to be isolated from others.
- Unwillingness to discuss problems.
- Fearful of care taker but anxious to please.
- Flinches when moving towards face.
- Injuries requiring emergency treatment or hospitalization.
- Incident involving broken bones. Especially a fractured hip.
- Any injury or death occurring during or shortly after an episode of wandering (including outside the facility) when the staff is not aware that the resident is missing for some period of time.
- Heavy medication or sedation
- Rapid weight loss or gain
- Unexplained death
- Frequently ill
- House very cold or very hot.
- No food or fresh food in the cabinets or refrigerator.

Sandra Stimson has experience as a corporate consultant, Corporate Trainer and National Speaker. Her experience is in long term care, as Activity Director, Director of Alzheimer's Units and Assistant Administrator of a 550 bed long term care county home. She is Co-founder of Pet Express Pet Therapy Club, is a Life Replay Specialist. Sandra implements dementia units nationwide. Sandra has written several books, Volunteer Management Essentials for Long Term Care and Pet Express Pet Therapy Program. Sandra has been a facilitator for Alzheimer's support groups and is the Awards Chair for the NJ Association of Activity Professionals. Sandra is the Executive Director of **National Council of Certified Dementia Practitioners**
<http://www.nccdp.org>

[Alternative Solutions in Long Term Care](#) offers resources for health care professionals in many areas of dementia care, care plans, Snoezelen products, dementia activity calendars, adult day care calendars, sensory calendars, reminisce videos for dementia, activity books, and dates to remember, party supplies, resources and links.



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LINDA'S Amazon.com Store for Activity Directors
Serious Products for Serious Minded Activity Professionals



The Activity Director Community is a gathering place for LTC Activity Professionals. Feel free to express yourself and respond to submissions from other AD's. This is an important community and you need to be part of it. *Membership is FREE so [Join Today](#).*

This site is moderated by Robert & Linda Lucas, Owners of The Activity Director website.



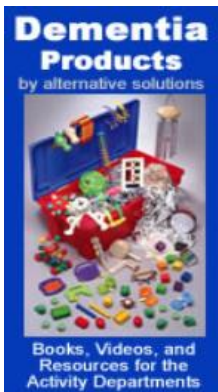
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 become a certified dementia practitioner



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- Clothes dirty
- Bed linen stained and home filthy.
- Care giver can not adequately explain condition
- Open wounds, cuts, bruises, welts
- Elder reports being slapped or mistreated.
- Slapping pushing, shaking or beating
- Has "imprint injuries" bruises that retain their shape of traumatizing object. Inner Arm and thigh bruises, also head, face and scalp

Sometimes neglect may be unintentional due to lack of training and education such as over medicating, or not knowing proper body mechanics. At other times neglect may be intentional.

Be on the look out that the Dementia client may be the abuser. Often times care givers never report this because of isolation, shame, embarrassment and lack of awareness of outside resources or unsure who can help them. The Dementia resident may abuse in many of the same ways listed above, such as sexually aggressive, physically abusive, violent outbursts, demanding and verbally abusive. At times it may be due to loss of cognition, medication changes, pain, paranoia, confusion and or the well spouse is no longer recognized

If you suspect elderly abuse you can contact several reporting agencies or resources such as Adult Protective Services, Law Enforcement, Social Services, Alzheimer's Association for contact numbers and Referral, Hospice Services and County Office on Aging for referral. Alternative Solutions in Long Term Care www.activitytherapy.com has a fantastic power point presentation called "Recognizing Abuse and Neglect in the Home" and is a great in-service for clergy, law enforcement, EMT's, home health workers and the general public.

Often time's caregivers are reluctant to take away a family members car keys even though they have a diagnosis of dementia and clearly are at a point in their lives that they need care and supervision. It is negligent to allow them to drive. One care giver stated, "I write out clear directions to the airport because once he is gone, it's the only time I can get rest. He always comes back!"

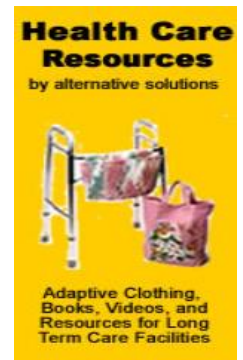
Be on the look out for anyone you see driving erratically, too slow, suddenly stopping weaving or exhibiting road rage. In many states, law enforcement can issue a ticket and force the driver to retake the driving test before he is issued a new drivers license. But be aware that sometimes, there may be a medical condition other than dementia that may be causing this behavior such as stroke. Law enforcement are trained to look for medical conditions that may be causing confusion. Sometimes, it is simply that they don't have the adaptive devices to drive safely or are not positioned correctly in the car. If you do see an elderly person who is driving unsafe, it's a good idea for their safety to notify law enforcement.

There are many great web sites for resources on driving and safety tips for the elderly. such as:

- Alzheimer's Association www.alz.org Free Fact Sheets
- National Council of Certified Dementia Practitioners www.nccdp.org
- Law Enforcement Alzheimer's & Dementia Training
- New York State Office for the Aging
"When You're Concerned" A handbook for families friends and caregivers worried about the safety of an aging driver.
<http://www.aging.state.ny.us/caring/concerned/>
- "Law Enforcement and the Older Driver: A lack of policies, procedures and resources" by National Older Driver Research Training Center
http://driving.phhp.ufl.edu/publications/icadi_6pdf
- Live Well - Live Long Web site has resources Materials to help older drivers plan for change. "Road Map to Driving Wellness" Screening Cues & Questions.
http://www.asaging.org/cdc/module4/phase3/phase3_2c.cfm
- The Beverly Foundation
http://www.beverlyfoundation.org/senior_transportation_resource_store/snapshots.html
- Senior Drivers <http://www.seniordrivers.org/home/>
Older but Wiser Self Test
AAA 55 Plus Self Test
<http://www.aaafoundation.org/quizzes/index.cfm>
- NHTSA Older Driver Safety
<http://www.nhtsa.dot.gov/people/injury/olddrive/>
- NHTSA Law Enforcement Older Drivers Programs by State
<http://www.nhtsa.dot.gov/people/injury/olddrive/LawEnforcementOlderDriver03/introduction.html>

and cues for Law Enforcement see
<http://www.nhtsa.dot.gov/people/injury/olddrive/lawcues.html>

- The Hart Ford Alzheimer's Brochure
Dementia and Driving
<http://www.thehartford.com/alzheimers/brochure.html>
- Alternative Solutions in Long Term Care "Power Point Presentation"
www.activitytherapy.com



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