

**South Fraser CRN Regional Community Protocols
(Delta, Surrey, White Rock)**

**Part One: (December 5, 2003)
Background Information**

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1. Community Response Network (CRN) Roles and Relationships

The Adult Guardianship Act Part Three empowers the Public Guardian and Trustee of BC to support the development of networks, now known as Community Response Networks. (CRNs). A Community Response Network is a group of representatives from community agencies, designated agencies, (Health Authority and Ministry for Children and Family Development), concerned individuals, including adults experiencing or at risk of experiencing abuse, neglect and self neglect as well as local businesses. The CRN is primarily involved in public education and community development about issues of adult abuse, neglect and self-neglect. The CRN may also provide collateral information for investigations and support to the client. Throughout the province, CRNs are involved in activities that include:

- Outreach to involve a broad cross-section of the community
- Education, awareness and prevention
- Understanding the current response to abuse, neglect and self-neglect
- Team building and relationship building
- Supporting advocacy and taking on an advocacy role
- Developing a coordinated community response to adult abuse, neglect and self neglect

2. Relationship of the CRN to the Adult Guardianship Legislation

The Adult Guardianship Act Part Three also empowers the Public Guardian and Trustee of BC to designate certain agencies, providing them with a mandate to look into situations of abuse or neglect. The designated agencies are regional Health Authorities, Ministry of Children and Family Development including Community Living Services

Like other individuals and organizations in the community, designated agencies are integral members of CRNs because they care about the issue of adult abuse and neglect, and have a contribution to make to the community's coordinated response. CRN participants believe that a collaborative approach increases the effectiveness of the community's ability to respond to and support adults experiencing abuse and neglect.

While the legislation applies to adults in certain circumstances, the role of CRNs is not limited to those circumstances. CRNs are intended to promote a coordinated response so that support and assistance is offered to any adult in the community who is experiencing, or is at risk of experiencing, abuse or neglect.

a.) Organizations, agencies and individuals who have been responding to situations of adult abuse and neglect will continue to offer support to any adult in the community who is experiencing abuse or neglect. For example, any member of the CRN may hear about a situation of abuse or neglect – either from the adult themselves, or from a concerned supporter. Depending on the circumstances, the CRN member hearing about a situation of abuse or neglect may:

- 1.) Ask the adult how they would like to be assisted,
- 2.) Offer support and assistance to the adult, or
- 3.) Offer to refer the adult to someone else who can help.
- 4.) Refer the adult to the appropriate designated agency if the adult is /has been abused, neglected or self-neglecting and thought to be unable to seek support and assistance on their own.

- b.) The following examples are situations in which the designated agency will not need to become involved:
- 1.) When informal support is enough
 - 2.) When supports or services are offered by other community agencies, and are accepted by the adult
 - 3.) When the adult doesn't agree to accept the supports or services, but is capable of deciding

3. The Purpose of the Legislation

The legislation applies to adults who are abused or neglected and who are unable to seek support and assistance because of:

- a.) Physical Restraint – for example:
- 1.) The adult is locked in a room
 - 2.) Another person is restricting the adult's access to the telephone, or other people.
- b.) Anything that limits their ability to seek help – for example
- 1.) Requires someone to push his/her wheelchair for mobility
 - 2.) Confined to bed, apartment, etc
 - 3.) Unable to communicate verbally, use the telephone, etc.
- c.) An illness, disease, injury, language/cultural barrier, or other conditions that affects their ability to make decisions about the abuse or neglect – for example:
- 1.) Chronic or acute conditions (e.g. Alzheimer's disease, delirium)
 - 2.) Mental illness affecting decision-making ability or judgement
 - 3.) Acquired brain injury
 - 4.) Use of chemical restraint by caregiver (giving too much, or withholding medication)

4. A Community Response Network

A Community Response Network (CRN) is a network of individuals, groups and agencies that work together at the community level to promote a coordinated community response to adult abuse, neglect, and self-neglect.

- a.) A collaborative approach to coordinate the community's response results in:
- 1.) Increased community and professional awareness of adult abuse and neglect
 - 2.) Increased commitment to address abuse and neglect as:
 - an issue that affects individuals, and
 - an issue that affects communities
 - 3.) Increased understanding of the dynamics of abuse and neglect
 - 4.) Increased understanding of how to prevent, reduce and respond to abuse and neglect
 - 5.) Increased understanding of the legislated mandate of designated agencies, new tools for intervening, and offering support and assistance
 - 6.) Stronger relationships between the people and organizations that can provide support

- 7.) Better communication and coordination of supports and services, so fewer people 'fall through the cracks.'
- 8.) Increase accessibility to marginalized or otherwise hard to reach individuals and groups

5. Mission Statement

The Mission of the South Fraser Region CRN, which currently consists of the Delta, Surrey and White Rock CRN, is to assist the community in recognition, prevention, and elimination of abuse, neglect, and self-neglect of vulnerable adults.

6. Values

The South Fraser Region CRN seeks to fulfill its mission consistent with the following values;

- 1.) The people involved in developing a coordinated community response include all of the people affected by the issue of adult abuse and neglect and the people who are able to provide support
- 2.) The needs, interests and participation of those adults the CRN is intended to support lead the planning and implementation process
- 3.) Participation is meaningful for all participants, as defined by the participants themselves
- 4.) The skills and knowledge of all participants are recognized
- 5.) Activities for participation are varied and flexible, to meet the specific needs and wishes of a wide variety of participants
- 6.) Accept and respect the right of an adult to choose to live at risk, provided that they do not infringe upon the right and safety of others
- 7.) All participants endeavour to work together as equal partners in the planning and implementation process. Efforts are made to decrease the power imbalances where they exist, and to build the capacity of all adults to participate on an equal basis with others
- 8.) To improve accessibility to marginalized or otherwise hard to reach individuals and groups
- 9.) Professionals transform their practice from 'doing for' to 'doing with' to enable full participation

7. Statement of Principles

a.) All adults have the right to:

- 1.) The basic requirements of life – food, clothing, shelter, social contact and medical attention
- 2.) Protection from physical, emotional, financial, sexual and medication abuse; from violation of civil and legal rights
- 3.) Information about their civil and legal rights

- b.)** All adults have the right to self-determination, for example:
 - 1.) To live their lives as they wish, provided they do not infringe upon the rights and safety of others
 - 2.) To be active participants in, and well-informed about, decisions about themselves in accordance with their ability to do so
To be regarded as competent and capable unless otherwise determined by a fair process
 - 3.) To refuse assistance and intervention
- c.)** All adults have the right to privacy – to share only that which they wish to share.
- d.)** All adults have the right to confidentiality – whatever information they choose to share or whatever becomes known about them will remain confidential to the extent that is possible, within the requirements of agency practices and the law.
- e.)** All adults have the right to access community support to maximize the quality of life.
- f.)** All adults should receive the most effective, but least restrictive and intrusive, form of support, assistance and protection when they are unable to care for themselves and their assets.
- g.)** The court should not be asked to appoint, and should not appoint, decision-makers or guardians unless alternatives, such as provision of support and assistance, have been tried or carefully considered.
- h.)** The Community Response Network will educate, assist and respond to situations of abuse, neglect and self neglect in a manner that:
 - 1.) Increases the awareness of the nature of abuse, neglect and self-neglect and the community's responsibility
 - 2.) Respects the adult's wishes, promotes their safety and establishes trust
 - 3.) Recognizes that each situation of suspected abuse or neglect is unique and requires an individualized response
 - 4.) Ensures confidentiality of the individual or family, and includes maintaining confidentiality with regards to the alleged abuser.
 - 5.) Demonstrates commitment to collaboration with individuals and organizations that support the Statement of Principles
 - 6.) Give appropriate supports to provide for the safety and security of the individual and is the least intrusive
 - 7.) Respects and facilitates the use of diverse forms of communication (e.g. language of choice and alternate communication methods for people unable to communicate verbally)
 - 8.) Offers a range of options that respect an individual's right to choose

8. Recognizing Abuse Neglect and Self-Neglect: Definitions, Indicators and Dynamics

The Adult Guardianship Act Part Three defines abuse, neglect and self-neglect.

a.) **Abuse** means deliberate mistreatment of an adult that causes the adult:

- physical, mental or emotional harm, or
- damage to or loss of assets,
- intimidation, humiliation, physical assault, sexual assault, over medication, withholding needed medication, censoring mail, invasion or denial of privacy or denial of access to visitors.

Abuse can take many forms. Some examples are:

- 1.) **physical abuse:** acts of violence or rough treatment, including slapping, shaking, punching, and rough handling
- 2.) **mental or emotional abuse:** (also referred to as psychological abuse): severe and continuing intimidation, humiliation, isolation, and exclusion from event activities, and decision making
- 3.) **spiritual abuse:** any intimidation or exclusion from religious – spiritual practises
- 4.) **sexual abuse:** any unwanted touching or exploitative sexual behaviour, including harassment, assault, or using adults for sexual purposes without their consent
- 5.) **financial abuse:** misuse of an adult's money and property, including taking an adult's money, property, or possessions by coercion; influencing the making of a Will; cashing cheques without authorization; unauthorized use of bank accounts; or misuse of a Power of Attorney or Representation Agreement.
- 6.) **medication abuse:** withholding medication the adult needs, or giving too much or too little medication.
- 7.) **violation of entitlements:** mail censorship, invasion or denial of privacy, denial of access to visitors, restricting the movement of an adult or withholding information to which the adult is entitled.

b) **Neglect** means any failure to provide necessary care, assistance, guidance or attention to an adult that is reasonably likely to cause within a short time or causes;

- serious physical, mental, or emotional harm, or
- substantial damage to or loss of assets, and includes self-neglect.

Neglect may or may not be deliberate. It can be, for example, the intentional withholding of food and personal care. Or it can be unintentionally caused by lack of experience, information, knowledge or support.

Self-neglect means any failure of an adult to take care of himself or herself that causes, or is reasonably likely to cause within a short time either

- serious physical or mental harm, or
- substantial damage to or loss of assets, and includes:
 - 1.) living in grossly unsanitary conditions
 - 2.) suffering from an untreated illness, disease or injury
 - 3.) suffering from malnutrition to such an extent that, without intervention, the adult's physical or mental life is likely to be severely impaired
 - 4.) creating a hazardous situation that will likely cause serious physical harm to the adult or to others or cause substantial damage to or loss of assets
 - 5.) suffering from an illness, disease or injury that results in the adult dealing with his or her assets in a manner that is likely to cause substantial damage to or loss of the assets.

When the Act uses the word neglect', it includes self-neglect.

d.) Indicators of Abuse, Neglect and Self-Neglect:

Experience has revealed that the following indicators do not necessarily signify abuse or neglect but may indicate a need for further assessment:

- | | |
|---|---|
| Physical Abuse: | <ul style="list-style-type: none">• unexplained injuries such as bruises, burns, swelling• injuries in various stages of healing• injuries incompatible with medical history or explanation of cause of injury• delay in seeking treatment• untreated injuries• patterned or clustering of injuries which may indicate gripping or shaking |
| Psychological/
Emotional &
Spiritual Abuse | <ul style="list-style-type: none">• fear• low self-esteem• refusal to eat or change in eating patterns• substance abuse• withdrawal, passivity• apathy and depression• signs of anxiety• reluctance to participate in decision-making• nightmares |
| Sexual Abuse | <ul style="list-style-type: none">• pain, bruising, lacerations, bleeding or abnormal discharge in genital area• bloody or torn clothing• difficulty walking or sitting |
| Medication Abuse | <ul style="list-style-type: none">• hyperactivity or depression• non-compliance with prescriptions• lack of appropriate response to medication• reduced physical/mental activity in the absence of a disease or illness |

**Financial Abuse/
Exploitation**

- unexplained discrepancy between known income and standard of living
- the signing of documents without basic understanding
- missing possessions
- unusual bank account activity by persons in positions of trust

**Violation of Civil/
Human Rights**

- difficulty in contacting the individual
- making excuses for social isolation
- loss of self-determination
- reluctance to participate in decision-making

Neglect

- malnourishment, dehydration
- absence of aids such as hearing aid, glasses, dentures, prosthesis, walking aids
- lack of supervision or attention for long periods of time
- unwarranted use of restraints
- lack of attention to personal hygiene
- dirty or inappropriate clothing
- untreated medical conditions

e.) Dynamics of Abuse, Neglect and Self-Neglect

Abuse, neglect and self-neglect are complex phenomena. Each differs from the other and may require a different response.

Many stereotypes exist about people of advanced age and people with disabilities. These stereotypes can detract from our dealings with these adults. People responding to abuse and neglect need an understanding and knowledge of the factors that come into play.

f.) When is abuse or neglect a crime?

The following forms of abuse or neglect are examples of offenses under the Criminal Code:

- 1.) assault
- 2.) assault causing bodily harm,
- 3.) threats, intimidation, stalking or harassment
- 4.) theft
- 5.) misuse of a power of attorney
- 6.) forgery, fraud, extortion
- 7.) failure to provide the necessities of life to a person under one's charge

9. Relationship of the CRN to the Adult Guardian Legislation

When looking into situations of abuse or neglect, designated agencies must involve the adult as much as possible, and report criminal offences to the police. Having this mandate gives designated agencies access to some useful new legal tools such as new ways of gaining access when access has been denied, restraining orders and support and assistance orders.

While the legislation applies to adults in certain circumstances, the role of CRNs is not limited to those circumstances. CRNs are intended to promote a coordinated response so that support and assistance is offered to any adult in the community who is experiencing, or is at risk of experiencing, abuse or neglect.

Organizations, agencies and individuals who have been responding to situations of abuse and neglect will continue to offer support to any adult in the community who is experiencing abuse or neglect. For example, any member of the CRN may hear about a situation of abuse or neglect – either from the adult themselves, or from a concerned supporter. Depending on the circumstances, the CRN member hearing about a situation of abuse or neglect may:

- Ask the adult how they would like to be assisted,
- Offer support and assistance to the adult, or
- Offer to refer the adult to someone else who can help.
- Refer the adult to the appropriate designated agency if the adult is apparently abused, neglected or self-neglecting and thought to be unable to seek support and assistance on their own.

These are some of the situations in which the designated agency will not need to become involved:

- When informal support is enough
- When supports or services are offered by other community agencies, and are accepted by the adult
- When the adult doesn't agree to accept the supports or services, but is capable of deciding

10. Role of Designated Agencies

Designated agency(s) will work in close cooperation with emergency response agencies, advocates and support and assistance agencies locally and with the Office of the Public Guardian and Trustee in Vancouver. The designated agency will be part of the CRN and may share responsibility for coordinating and facilitating the activities of the CRN.

a.) When a designated agency receives a report of abuse or neglect, it must:

- 1.) Investigate the situation
- 2.) Involve the adult as much as possible
- 3.) Report the facts to the police if they have reason to believe that a criminal offence has been committed against an adult who is abused or neglected and not able to seek support on their own.

b.) In addition, a designated agency may do any of the following as appropriate to the situation:

- 1.) Take no further action
- 2.) Gain access to an adult in an emergency or urgent situation
- 3.) Report the situation to the Public Guardian and Trustee, or another agency
- 4.) Assist an adult in accessing various support services
- 5.) Assist an adult in obtaining a representative
- 6.) Check further into situations in which an adult is refusing help and may be incapable
- 7.) Apply to the court for an interim order to keep an abuser away
- 8.) Develop a plan outlining ways to support an adult
- 9.) Request an assessment of incapability
- 10.) Apply to the court for a Support and Assistance Order

c.) Emergency Responders

Emergency Responders (i.e. police, fire and ambulance) will be available for extended hours beyond regular office hours of a Designated Agency and will be responsible for making a referral to the Designated Agency as soon as possible for follow-up. The Emergency Responder will intercede in cases where:

- an adult has been physically hurt
- physical danger is likely to occur if protection is not provided
- an offense has occurred
- an adult is at risk of hurting him/herself or someone else.

d.) Role of the Police

The police will

- Investigate alleged criminal offences (i.e.; forgery, fraud and extortion)
- Keep the peace
- Collaborate with designated agencies to ensure the safety and well-being of the adult

11. CRN Responsibilities

a.) Support and Assistance

Some members of the CRN will take on support and assistance roles through the provision of front line services to adults. Services provided by these agencies may include, but are not limited to:

- 1.) Home support or visitation
- 2.) Emotional support and support groups
- 3.) Information and informational brochures
- 4.) Legal information and assistance
- 5.) Counseling
- 6.) Short term physical shelter
- 7.) Advocacy assistance and referral

b.) Advocacy

Some individuals or agencies will take on Advocacy roles in the CRN. Advocacy is the vigorous and systematic representation of the views and special needs of adults to those in authority. Anyone who acts on behalf of or with another person is an advocate. An advocate may be a family member, friend, peer counselor, or member of a community organization. A person can also be a self-advocate if s/he is able to stand up for her/himself. In some cases, the support of family, friends and advocates may need to be supplemented by legal advocacy to protect the legal rights of an abused or neglected adult. It is always up to the abused or neglected adult to determine the advocacy desired.

An advocate may offer support with:

- exploring options
- identifying resources that may be of benefit
- explaining the support being offered to the adult
- keeping track of whether the services being provided really benefit the adult.

Advocacy may include participation in activities related to the elimination of abuse, neglect and self-neglect, such as community development, lobbying, education and prevention.

12. Contact Information

The following agencies, central intake phone numbers, and website addresses can be accessed to obtain assistance with regards to issues associated with Abuse, Neglect or Self-neglect.

**South Fraser Region Ministry of Children and Family Development
Central Intake Phone Number- 604-501-3139**

**South Fraser Health Region for Delta, Ladner, Langley, Surrey and White Rock
Central Intake Phone Number- 604 592-4950**

Burnaby Health Region	Central Intake Phone Number	604 918-7402
New Westminster Health Region	Central Intake Phone Number	604 777-6700
TriCities Health Region	Central Intake Phone Number	604 777-7300
Maple Ridge West Health Region	Central Intake Phone Number	604 476-7800
Maple Ridge East Health Region	Central Intake Phone Number	604 476 7100
Abbotsford Health Region	Central Intake Phone Number	604 556-5000
Chilliwack Health Region	Central Intake Phone Number	604 702-4800
Mission Health Region	Central Intake Phone Number	604 814-5520
Hope Health Region	Central Intake Phone Number	604 860-7747

The Public Guardian and Trustee's Website Address contains helpful publications and information on the adult guardianship legislation, as well as suggestions for assisting an adult to get support, and for reporting abuse. The website can be found at <http://www.trustee.bc.ca/adultgua.htm>.

The Provincial CRN Website Address offers information on Community Response Networks around the province, as well as helpful resources to support CRN work and the development of protocols. The provincial Community Response Network website can be found at <http://www.bccrns.ca>.