Development of an e-learning on recognition of neglect or domestic abuse in vulnerable elderly

Sivera Berben PhD
Sivera.Berben@han.nl

Charlotte Minkhorst-Otten RN BSc, Karin Landsbergen PhD, Josien Caris MSc, Marian Adriaansen PhD RN, Lilan Vloet PhD RN
Conflict of Interest Disclosure

**Speaker:** Sivera Berben PhD  
**Title:** Development of an e-learning for ambulance EMS and ED nurses to recognize neglect or domestic abuse in vulnerable elderly

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<th>Member of a scientific committee</th>
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<td>If so: European Academy of Nursing Science</td>
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Introduction

- Domestic abuse & neglect = a global problem
- Exponential growth elderly people
- Maltreatment in community is high (3%), even higher in elderly with high support needs (25%) \( (\text{WHO}, 2011. \text{European report on preventing elder maltreatment. WHO Regional Office for Europe}) \)
Definition WHO

The WHO [1] defines elder abuse as

• ‘a single or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person’. (WHO, 2002. World report on violence and health. WHO, Geneva) [Comijs et al, 1996]
Netherlands

- Yearly 200,000 elderly suffer from domestic abuse
- Physical, psychosocial & economic / financial harm
- 2432 reports ‘Safety at Home’ in 2014 [SCP, 2015]
- Many victims leave ambulance Emergency Medical Services (EMS) and the Emergency Department (ED) unnoticed
- 2014 Start action program of Dutch Ministry of Health (Professional code to report domestic violence & child abuse)
1st descriptive study 2014

Insight in:

- Frequency of recognition of neglect or abuse of elderly
- Interventions undertaken (such as reporting)
- Specific protocol for elderly neglect or abuse in ED
- Required competences of ED nurses
- Students BscN: Terra Aarsman & Maartje van Dijk

Sivera.Berben@han.nl
Methods 1<sup>st</sup> study

- **Sample** included n=173 ED nurses
- **Measurement** Online survey (expert panel, pretested)
- **Data collection** Self reported data from the perspective of ED nurses
Recognition of neglect or abuse in ED

- Domestic abuse or neglect was seldom/never recognized (n=154, 89%)
- Number of elderly suspected of domestic abuse or neglect at ED level was unknown
- No registry in ED and/or not communicated
- Intuitively recognition (n=144, 83%)
- No validated screenings instrument in use
Interventions & competences

• Consultation of a colleague or (emergency physician) (n=154, 89%)
• No specific protocol in use (general policy for domestic abuse was neither used)
• Need for validated screenings instrument (n=150, 87%)
• Lack of competences in knowledge and awareness
• However, nurses found themselves competent in communication
Discussion

• Under-report of domestic neglect or abuse of elderly in the ED
• Also other emergency care providers struggle with this issue (general practitioner out-of-hours, ambulance EMS)
• How to provide feedback after report of domestic neglect or abuse?
Discussion

- Under-report of domestic neglect or abuse in the ED
- Also other emergency care providers struggle with this issue (general practitioner out-of-hours, ambulance EMS)
- How to provide feedback after report of domestic neglect or abuse?
- How to provide continuity of care for these vulnerable patients?

Sivera.Berben@han.nl
Start study project recognition elderly abuse in chain of emergency care

Charlotte Minkhorts-Otten RN, MSc

Karin Landsbergen PhD

Josien Caris MSc
Aims current study (2 years)

• To identify reliable/valid instruments for EMS and ED
• To identify best practices on elderly abuse in EMS-ED in NL
• To develop/adapt an **instrument and protocol** tailored for the emergency care setting
• To develop an **e-learning** for ambulance & emergency nurses including forensic issues
• To test these 3 products in a pilot in EMS and ED
Multi methods study (1)

**Phase 1**
- Literature review
- Survey, consultation of the field
- Focus groups (ambulance & ED nurses)

**Phase 2**
- Expert group
- Iterative development of screenings instrument, protocol, tailoring of e-learning, pre-tests e-learning
Multi methods study (2)

Phase 3 (September 15th – November 15th 2016)
- Education of knowledge and awareness through e-learning
- Blended learning concept with implementation and feedback in a pilot study

Phase 4 (November 15th – February 15th 2017)
- Evaluated the feasibility of screenings instrument and protocol
- Pre- post test analysis on self efficacy e-learning
Screeningsinstrument

- Do you suspect (in any form or in any way) elderly abuse or neglect? Yes / No

If yes.......

- Is the interaction right?
- Are the signs and symptoms of the injury/ illness consistent to provided explanations?
- Is there a delay in time?
- Are there any other observations?
E-learning: ‘Elderly in safe hands’

- Previously developed for nursing homes and hospitals
- Takes 1 hour, 1 accreditation point
- Additional forensic aspects
- Tailored to the field of emergency care
- For bachelor level emergency nurses (not yet for physicians, ambulance drivers and nurse assistants)
- Video, photo’s and sound bites together with exercises.
Aims e-learning

• To have knowledge on elder abuse
• To be familiar with 5 steps of professional code of conduct to report domestic abuse and neglect
• To have insight in dilemma’s in communication
• To know your professional responsibility and tasks
• To be motivated and to be able to adequately act in case of suspected elder abuse
Content e-learning

A. Introduction: welcome, relevance, awareness

B. Elder abuse: definition, numbers, forms, risk factors, prevention

C. How to handle: 5 steps of the reporting code

1. Assessment and child check
2. Consult a colleague and/or ‘Safety at Home’
3. If possible: communicate with elderly
4. If necessary: consult other professionals
5. Monitoring or report to ‘Safety at Home’
Example: awareness

- The wife is daily cursing and swearing to her chronic ill husband (78 years), sometimes she withholding him his care.

- A man (82 years) cannot take care of his ill wife (75 years), he leaves her in bed for days.

- The wife helps her male neighbour (85 years) with the household. She is bossy and he loses his social contacts.

- A mother (82 years) is living with her daughter. The mother is often alone and falls. The daughter does not adequately dress the wounds.
What is elderly abuse: the definition ..

The ambulance nurse arrives on scene with optical and acoustic signals. There is a fire in the house of two elderly (71 and 79 years old). The patients don’t need to be transported to the hospital. The man explains that he was baking spring roles for his wife when the fire started.

The fireman asks the nurse to inspect the interior of the house. She finds the house crowded with furniture and other stuff, it is very unhygienic and it hardly seems liveable. The nurse starts a conversation with the elderly couple regarding her concerns. However, they feel personally attacked by her and find her observations very offensive.
1st outcome measurements e-learning


- 18 items, currently pre- and post-test is running 15-10-’16

- A previous SES test ‘Elderly in Safe Hands’ (Caris et al, 2016) has shown a significant improvement between the SES at baseline and post test. Six months later, no effect.
To be continued

- Evaluation e-learning?
- Fine tuning e-learning
- Potential interest for e-learning at national level: GPs, triage assistants, ambulance drivers, ED physicians and medical specialists.
- NVSHV and NVSHA participate in development in e-learning for (emergency) physicians and nurses?

Sivera.Berben@han.nl