

Advocacy meeting report, Finland

Meeting 1: 17 January 2018, Helsinki Vocational College

Participants:

Health care teachers (3), Helsinki Vocational College, Unit of Welfare
Director, Syystie Comprehensive Service Centre
Senior Supervisor, Kustaankartano Comprehensive Service Centre, leisure activities
Head Nurse, Kustaankartano Comprehensive Service Centre, Respite Care unit and Day Care
Head Nurse, Kustaankartano Comprehensive Service Centre, Crisis unit
Home Care Manager, Social and Health Services of Northern District, Helsinki city
Senior Social Worker, Gerontological elderly care, Helsinki city

Chair: MSc Sirkka Perttu, Daphne/Whosefva -project

The aim of the meeting was to assess current situation of the basic education and continuing training of the social and health care professionals regarding international and European recommendations and regulations.

Discussion:

Training of the professionals: The main theme of discussion was the vocational training of nurses and paramedics, especially in gerontology and elder abuse. Nurses can specialize in gerontology in Helsinki Vocational College. Part of the training is practicing elderly care in the units of Comprehensive Service Centre, among other institutions. Paramedics meet older persons in emergency situations. Both professionals would need knowledge on elder abuse but there are just short voluntary courses on the issue. All the three teachers thought elder abuse should be a subject of compulsory training in vocational education. According to the Madrid International Plan of Action on Ageing (MIPAA), primary health care workers and social workers should be trained in basic gerontology and geriatrics.

Compulsory reporting: From the beginning of 2016, based on the Social Welfare Act (No. 1301/2014), it has been compulsory for workers in social and health care services to report elder abuse or concerns of the safety of an older person confidentiality provisions notwithstanding to the municipal authority responsible for the service. The Social Welfare Act meets Recommendation CM/Rec(2014)2 of the Committee of Ministers: Member States should implement sufficient measures aimed at raising awareness among medical staff, care workers, informal carers or other persons who provide services to older persons to detect violence or abuse in all settings, to advise them on which measures to take if they suspect that abuse has taken place and in particular to encourage them to report abuses to competent authorities. Member States should take measures to protect persons reporting abuses from any form of retaliation. (Recommendation CM/Rec(2014)2 of the Committee of Ministers: IV. Protection from violence and abuse, 18). This means however that training on elder abuse in vocational education and as a continuing training is even more important than earlier.

Training on elder abuse due to dementia: VoiVa sent a questionnaire in December 2017 to the supervisors responsible of different elderly care services in Northern District of Helsinki city social and health care services asking what the most important training needs of their employees are. One of the most important training needs, among the many other themes mentioned, was elder abuse in dementia cases. Dementia raises risk for abuse, perpetrated not only by the informal or formal caregiver, but also by the care recipient. In many cases developing dementia causes aggressive behaviour and sometimes over-sexual behaviour. Informal caregivers should be given support and information where to get help. They should also receive training, in line with the Recommendation CM/Rec(2014)2 of the Committee of Ministers (VI. Care. A. General Principles, 34: Care givers should receive sufficient training and support to adequately

ensure the quality of the services provided. Where older persons are being cared for at home by informal carers, the latter should likewise receive sufficient training and support to ensure that they are able to deliver the care needed.

Older women as informal caregivers: Most of the informal caregivers are women. Their needs should be taken into account by a special consideration. Older women might be sexually abused by care recipients. Often their financial resources are also limited due to small pension. Older women's needs as informal caregivers should be taken into account in professionals' training. Older women's situation is mentioned in the Madrid International Plan (2002) (C. Priority direction III: Ensuring enabling supportive environments. Objective 2: Support the caregiving role of older persons, particularly older women. (b) Identify how to assist older persons, in particular older women, in caregiving and address their specific social, economic and psychological needs).

Meeting 2: 12 March 2018, Malmi hospital, Helsinki city

Participants:

Public prosecutors (2), Prosecutor's Office of Helsinki
Chief Inspector, Helsinki Police Department
Senior Ward Physicians (2) (Geriatrics and First Aid)
Deputy Chief Physician (emergency)
Nurse Managers (2)
Head Nurse of emergency
Home Care Manager, Northern Service District, Helsinki city
Senior Social Worker, Northern Service District, Helsinki city

Chair: MSc Sirkka Perttu, Daphne/Whosefva -project

The aim of the meeting was to review the current situation of Best Practice Protocols used in hospital's emergency and assess the future development needed regarding older victims of violence.

PAKE: The Deputy Chief Physician (emergency) introduced the medical examination protocol (PAKE) which has been in use since 2002 in Malmi hospital's ER. The protocol is well known for the meeting participants. However very little is known about how suitable PAKE is for older people because most of the battered patients are younger victims. The staff of emergency and short-term units have been receiving training on elder abuse in Whosefva –project for familiarizing themselves to recognize elder abuse and treat older victims of violence in a respectful way.

EASI: MSc Sirkka Perttu introduced EASI (Elder Abuse Suspicion Index © (EASI) tool and how it was implemented in emergency and short-term units of Malmi hospital in January 2018. 24 patients in total were interviewed by using the tool. Four of them may have been victims of violence, based on the EASI results.

It was stated that recognition of elder abuse in different social and health care services is a challenge. There are many forms of violence varying from physical violence to neglect. Deputy Chief Physician brought up institutional neglect in which professionals do not identify violence due to their lacking knowledge or busy pace of work. This can lead to a decrease in the quality of care.

The meeting participants concluded that the EASI tool is a good and worthy tool to use in their services. It is important to notice that interviewing by using EASI should be done with all older patients to avoid

misinterpretations. If the tool is used only in suspected cases it can be insulting for the patient: am I asked only because of my culture, appearance etc.

There are currently no screening programmes for older people in use in hospital settings. Screening of elder abuse is however acknowledged in the Madrid International Plan of Action on Ageing (MIPAA, April 2002):

67. Objective 2: Development of policies to prevent ill-health among older persons. (c) Ensure that gender-specific primary prevention and screening programmes are available and affordable to older persons.

It was decided that:

- EASI tool would be piloted in home care as well
- The amount of the so called "notes of concern" made by different services would be documented
- the service and help processes of the Malmi hospital will be checked and up-dated and material needed will be developed
- EASI tool will be piloted again in the near future

The next experts' meeting will be on Wednesday 26 September 2018 10-12.

Meeting 3: 1.6.2018, Kustaankartano Comprehensive Service Centre

Participants:

Health care teacher, Helsinki Vocational College, Unit of Welfare

Home Care Manager, Social and Health Services of Northern District, Helsinki city

Supervisor, Kustaankartano Comprehensive Service Centre, leisure activities

Senior supervisor, Activity Centre for Informal Caregivers, Northern Northern District, Helsinki city

Chair: McS Sirkka Perttu, Daphne/Whosefva -project

The aim of the meeting was to discuss recommendations on elderly care and elder abuse, developed in Daphne/Whosefva –project from the Finnish perspective.

RECOMMENDATION 1:

The topic of violence against older women, specifically the recognising, risk assessment and support of older female victims, should be included in the basic and advanced vocational training of social and health care professionals.

Rationale:

- The Istanbul convention, 2011 (Finland ratified 1 August 2015)
 - Article 15 Training of professionals
 - Article 23 Shelters (Finnish Ministry of Health and Social Affairs/THL: As part of the general development of shelter services, the knowledge and skills of shelter staff shall be increased regarding family violence as a phenomenon, crisis and trauma work as well as work with children, disabled and older persons in shelter settings).
- CM/Rec(2014)2 of the Council of Ministers – Protection from violence and abuse, Paragraph 18 (training recommendation)
- Obligation to notify increases the need for training
 - Act on Supporting the Functional Capacity of the Older Population and on Social and Health Services for Older Persons 980/2012 (25§ Informing of an older person's service needs) and

Social Welfare Act 1301/2014 (48 § The obligatory informing duty of staff, starting from 01.1.2016)

- The informing duty is also included in the Local Action Strategy of Ageing 2002 (MIPAA/RIS) (Madrid International Plan of Action on Ageing).

- Training events of the Daphne project (autumn 2017 – January 2018 hospitals of Malmi ja Suursuo):
 - 134 employees participated in total, evaluation completed by 109 participants.
 - 89% of the participants (n=96) were health care professionals.
 - 66% of all the participants (n=72) and 81% of the health care professionals had never received training on elder abuse.

- Training events (4) in April 2018:
 - 58 participants in total
 - 64% (n=34) had never received training on elder abuse, 36% (n=19) had received some (1 person did not answer.).

RECOMMENDATION 2:

Data on elder abuse should be systematically collected in social and health care services.

Rationale:

- Local Plan of Action on Ageing 2002 (MIPAA/RIS) (Madrid International Plan of Action on Ageing): Paragraph 19 states that *Member States shall carry out an effective investigation into credible claims that violence or abuse against an older person has occurred, or when the authorities have reasonable grounds to suspect that such ill-treatment has occurred (no investigation when no suspicion raised)*

- Is Finland the safest country of the world for everyone? Report:
 - The report is part of the 100 Equality Acts programme of the National Council of Women of Finland and the Council for Gender Equality.
 - The Ministry of Interior Affairs published 31 May 2018 the following statement: Elder abuse perpetrated by those close to the elderly victims is believed to stay unknown to authorities due to shame, among other issues. The majority of homicides with female victims occur in relationships.
 - Violence perpetrated by those close to the victim is often hidden due to shame experienced by the victim. This concerns both women and older people.

RECOMMENDATION 3:

The situation of older women and particularly their risk of experiencing violence should be taken into account in the every-day work of authorities.

Rationale:

- The Local Plan of Action on Ageing 2002 (MIPAA/RIS) (Madrid International Plan of Action on Ageing): Minimize the risks to older women of all forms of neglect, abuse and violence by increasing public awareness of, and protecting older women from, such as neglect, abuse and violence, especially in emergency situations.

- Report: Is Finland the safest county in the world for all?
 - the report (KPMG Oy Ab & WoM Oy 25.5.2018) studied safety from the point of view of different population groups in Finland

- conclusion: older people, especially those with limited income and pensions create a particularly vulnerable group of citizens. Hence the safety of older people must be considered better in the future.
 - Specific issues noticed: The poverty and living alone of older women
- National Institute for Health and Welfare (THL) Statistical report 42/2017: The majority of clients requiring regular home care are older women:

65+	%	75+	%	85+	%
men	32,7	men	29,5	men	25,1
women	67,3	women	70,5	women	74,9

RECOMMENDATION 4:

Self-monitoring schemes should take into account the prevention of elder abuse and neglect by providing instructions on how to deal with suspected and real cases of elder abuse.

Rationale:

- The report of The National Supervisory Authority for Welfare and Health (Valvira): Abuse as noticed by employees working in units providing 24-hour elderly care, 2016:
 - The most common forms of abuse are failure to provide outdoor exercise, use of coarse, inappropriate or childish language, as well as bossiness, punishment or criticism. Also physical or sexual abuse was detected. It is mostly another employee and/or another resident who was named as the abuser.
 - In cases where a unit has developed an action model for elder abuse, the detected cases were dealt with more efficiency.
 - Shared instructions and rules known by all of staff make the prevention of and intervening in elder abuse easier.