

# Lunch and Learn Webinar Series

The information and opinions expressed here today are not necessarily those of the Government of Ontario



Elder Abuse Ontario

Stop Abuse - Restore Respect

## FINANCIAL ABUSE OF OLDER ADULTS

**November 30, 2018**

### **Presenters:**

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# Welcome to EAO's Webinar!

- All attendees will be muted during the webinar. This session is being recorded and will be posted on EAO website.
- If you are experiencing issues, please type into the CHAT/QUESTION BOX and send message to Mary Mead/Candielya Jackson.
- There will be 15-20 minutes allocated at the end presentation for QUESTIONS AND ANSWERS.
- You will be prompted to fill out an EVALUATION FORM once the session has ended. Please fill out the form as your feedback will guide us for our future webinars. You will also receive an email link to the evaluation after the session.
- Speaker CONTACT INFORMATION will be provided at the end of the presentation to connect directly if you have further questions.

# Learning Objectives

After reviewing this module, participants will:

1. Easily recognize the warning signs of financial abuse;
2. Understand the guiding principles, interview strategy, and safety planning when dealing with financial abuse;
3. Understand current legislation;
4. Recognize reporting obligations;
5. Understand the definition of capacity
6. Understand the role of the Power of Attorney;
7. Understand the process of revoking Power of Attorney
8. Understand the role of Office of the Public Guardian and Trustee and the guardianship process.



# Elder Abuse Ontario (EAO)

- ✓ Not-for-profit charitable organization
- ✓ Established in 2002
- ✓ Funded by the Province of Ontario, under the Ministry for Seniors and Accessibility

**Mission:** Create an Ontario where all seniors are free from abuse through awareness, education, training, collaboration, service co-ordination and advocacy.

## **EAO oversees the Implementation of Ontario's Strategy to Combat Elder Abuse**

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# Ontario's Strategy to Combat Elder Abuse

Comprised of 4 Major Priorities



Community  
Coordination &  
Response

Training

Public  
Awareness



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# Elder Abuse Ontario (EAO)

*EAO has seven Regional Consultants serving the province of Ontario, offering organizations customized training and education for their staff. Regional Consultants also perform outreach activities for seniors' groups and further the cause of abuse prevention at conferences and events.*

- **7 Regional Consultants in Ontario** (office locations: Thunder Bay, Sudbury, Woodstock, Toronto, Peterborough and Ottawa)
- Francophone (East and North East Consultants)
- Key resources for providing consultation on elder abuse cases to review options and resources for intervention.
- Consultants DO NOT act as case managers for cases of abuse.
- Support over 40 local Elder Abuse Committees/Networks
- Strengthen partnerships between these committees and other health/social service agencies to enhance the response to elder abuse.
- Develop and implement training materials, tools and resources for elder abuse prevention and intervention.



# Let's Talk about Abuse



# What is Elder Abuse?

***Elder Abuse can take various forms. Learning about Elder Abuse is the first step in prevention.***

World Health Organization (WHO, 2004) defines elder abuse as:

“a single or repeated act, or lack of appropriate action, occurring in any relationship where there is an expectation of trust that causes harm or distress to an older person”.

***Despite what many think, elder abuse is more than hitting a senior. It is a multi-faceted problem and very complex. It encompasses a broad range of behaviours, events and circumstances.***

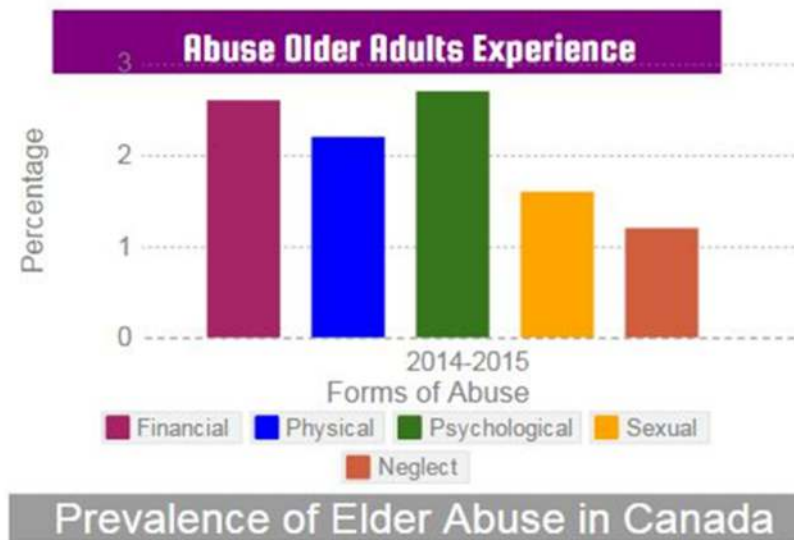
# Types of Elder Abuse

- ✓ **Physical**
- ✓ **Sexual**
- ✓ **Psychological**
- ✓ **Financial**
- ✓ **Neglect**
- ✓ **Systemic**



# Elder Abuse Statistics

- 8,163 older Canadians completed the survey
- largest study of the prevalence of elder abuse ever in Canada
- **8.2%, prevalence**
- The most common form of abuse was **psychological or emotional abuse**



Source : National Initiative For the Care of the Elderly, 2016 Canadian National Survey on the Mistreatment of Older Adults in Canada.

# What Is Ageism?

Ageism is a factor in abuse.

Ageism happens when you make up your mind about what a group of people are like because of their age.

We all have ageist attitudes.

# What do we know?

Ageism the most tolerated form of social prejudice

- 6 in 10 (63%) of seniors say they have been treated unfairly / differently because of age
- 8 in 10 (79%) agree seniors are seen as less important
- 1 in 5 (21%) see older Canadians as a burden



# Who Is at Risk of Abuse?

Abuse can happen at any age to any person.



# Why Are Some People More at Risk?

Some of the most common risk factors  
2015 Canadian study

Depression

Previous abuse as a child,  
youth or adult

Being female



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# Why Are Some People More at Risk?

## Intersections of discrimination

LGBTQ seniors may face social discrimination due to their age as well as their sexual orientation or gender identity

20% of Trans seniors have been physically or sexually abused for being Trans

women with disabilities are 4x more likely to be sexually assaulted

Ongoing legacy of residential schools and colonization - places Indigenous people more at risk



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# Who behaves abusively toward older adults?



Most often, it is family members  
...adult children or grandchildren.

In LTC or Retirement Homes resident  
to resident abuse is also common.

People who behave abusively can  
also be other relatives or friends,  
paid/unpaid caregivers, landlords,  
financial advisors or anyone in a  
position of power, authority or trust.

Stats Canada

# Financial Abuse of Older Adults



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# Defining Financial Abuse

Any improper conduct, done with or without the informed consent of the older adult that results in a monetary or personal gain to the abuser and/or monetary or personal loss for the older adult and it may include:

- Misusing an older adult's property and/or funds,
- Theft, forgery, fraud or scams
- Misusing Power of Attorney
- Sharing the older adult's home without paying a fair share of the expenses.
- Unexplained disappearance of personal belongings
- Unduly pressuring an older adult to:
  - Move from, sell, or relinquish his or her home or other personal property
  - Sign legal documents that they do not fully understand
  - Give money to relatives or caregivers

# Recognizing Abusers

Abuser may:

- Have substance abuse, gambling, or financial problems.
- Stand to inherit and feel justified in taking what they believe is "almost" or "rightfully" theirs.
- Fear that their older family member will get sick and use up their savings, depriving the abuser of an inheritance.
- Have negative feelings toward siblings or other family members whom they want to prevent from acquiring or inheriting the older person's assets
- Dependence on older adult for money and/or shelter

# Recognizing Elder Financial Abuse

## Banking /Legal

- Large sums of money go missing from the older adult's bank account
- Suspicious or forged signatures on cheques or other documents
- Older adult is in debt with no known cause
- Older adult is asked to sign documents without understanding them or really wanting to proceed
- Transfer or withdrawal of funds without prior permission
- Denial to access or control finances such as credit cards, cheques

# Recognizing Elder Financial Abuse

## Living Status

- Personal belongings go missing
- Notice of eviction or discontinuation of utilities
- Older adult is unable to pay bills, buy food or pay rent
- Standard of living not in keeping with the senior's income or assets
- Unexpected sale of the home or changes made to their will
- Isolation from family or friends
- Power of Attorney refuses to consider moving an older adult to Long-Term Care or Retirement Home in order to gain or retain access to their finances
- The older person seems nervous or worried when discussing money
- New 'best friends'

# Risk Factors for Financial Abuse

Having poor physical or emotional health, impaired mobility, or both.



- Slower completion of financial tasks.
- Decline in everyday math skills.
- Difficulty assessing risk in money-making opportunities.
- Memory loss, cognitive conditions such as dementia and Alzheimer's.
- Stroke victims experience the greatest amount of financial loss -the change is sudden so less time to prepare than in cases of dementia or Alzheimer's.

May be more trusting than younger generations plus a sincere desire to help out.

Being financially sophisticated and well educated might give older adults a sense of overconfidence in their own ability to manage money



Someone described as "extremely friendly" is likely to experience four times the financial losses of someone with a more typical level of friendliness.

Isolation, loneliness and family situation



Older adults who are alone or isolated; however, some research suggests that living with a relative is a risk factor for financial abuse.

Having family members who are unemployed and/or have substance abusers problems.

# Power of Attorney

**Power of Attorney (POA):** Legal document that gives someone else (one or more person) the legal right to act on the **Grantor's** behalf.

Grantor must be **mentally capable** at the time they sign any type of Power of Attorney for it to be valid. To be mentally capable means that the person is able to understand and appreciate financial and legal decisions and understands the consequences of making these decisions.

**Grantor:** Person appointing the attorney for property or personal care.

**Attorney:** Person or persons you have chosen to act on the grantor's behalf. He or she does not have to be a lawyer.

# Types of Power of Attorney in Ontario

## General POA for Property

- Lets the Attorney manage finances and property only while Grantor is mentally capable.
- If Grantor becomes mentally *incapable* of managing property, the General POA for Property ends and the Attorney can no longer act on their behalf.

## Continuing POA for Property

- Lets Attorney go on acting for Grantor if he/she becomes mentally incapable of managing their property.
- To be valid, the document must either be called a Continuing POA, or state that it gives the Attorney the power to continue acting if the Grantor becomes mentally incapable.

## POA for Personal Care

- Only comes into effect when the Grantor becomes incapable.
- Deals only with personal care decisions.

Gives your attorney the power to make decisions about your finances, home, and possessions

### Duties of the Attorney

The person given POA (the Attorney) has a duty to act in the Grantor's best interest. The Grantor can set out in the POA document the types of transactions that they want the Attorney to do for them or insert restrictions as to what they should not do. The Attorney is required to keep detailed records of the transactions they complete on the Grantor's behalf.

### What can the Attorney do?

Unless the Grantor limits their Attorney's authority, they can do almost everything with their finances and property that the Grantor could do. If they don't have any limitations in their POA document, their attorney can do their banking, sign cheques, buy or sell real state in your name, and buy consumer goods.

Their attorney does not become the owner of any of their money or property. He or she only has authority to manage it on the older adult's behalf.

### Can the Grantor still make decisions?

As long as they are mentally capable, they can continue to make their own decisions about their finances after granting a POA.

# Power of Attorney Theft

The abuse of powers by an appointed attorney acting as POA is not civil; it's criminal

## **Theft by Person(s) Holding Power of Attorney: Section (331) of the Criminal Code of Canada:**

Everyone commits theft who, being entrusted, whether solely or jointly with another person, with a power of attorney for the sale, mortgage, pledge or other disposition of real or personal property, fraudulently sells, mortgages, pledges or otherwise disposes of the property or any part of it, or fraudulently converts the proceeds of a sale, mortgage, pledge or other disposition of the property, or any part of the proceeds, to a purpose other than that for which he was entrusted by the power of attorney.

# Revoking a POA when the Grantor is still Capable

A Grantor can revoke an existing POA and appoint a new Attorney at any time. The Grantor might want to do this if:

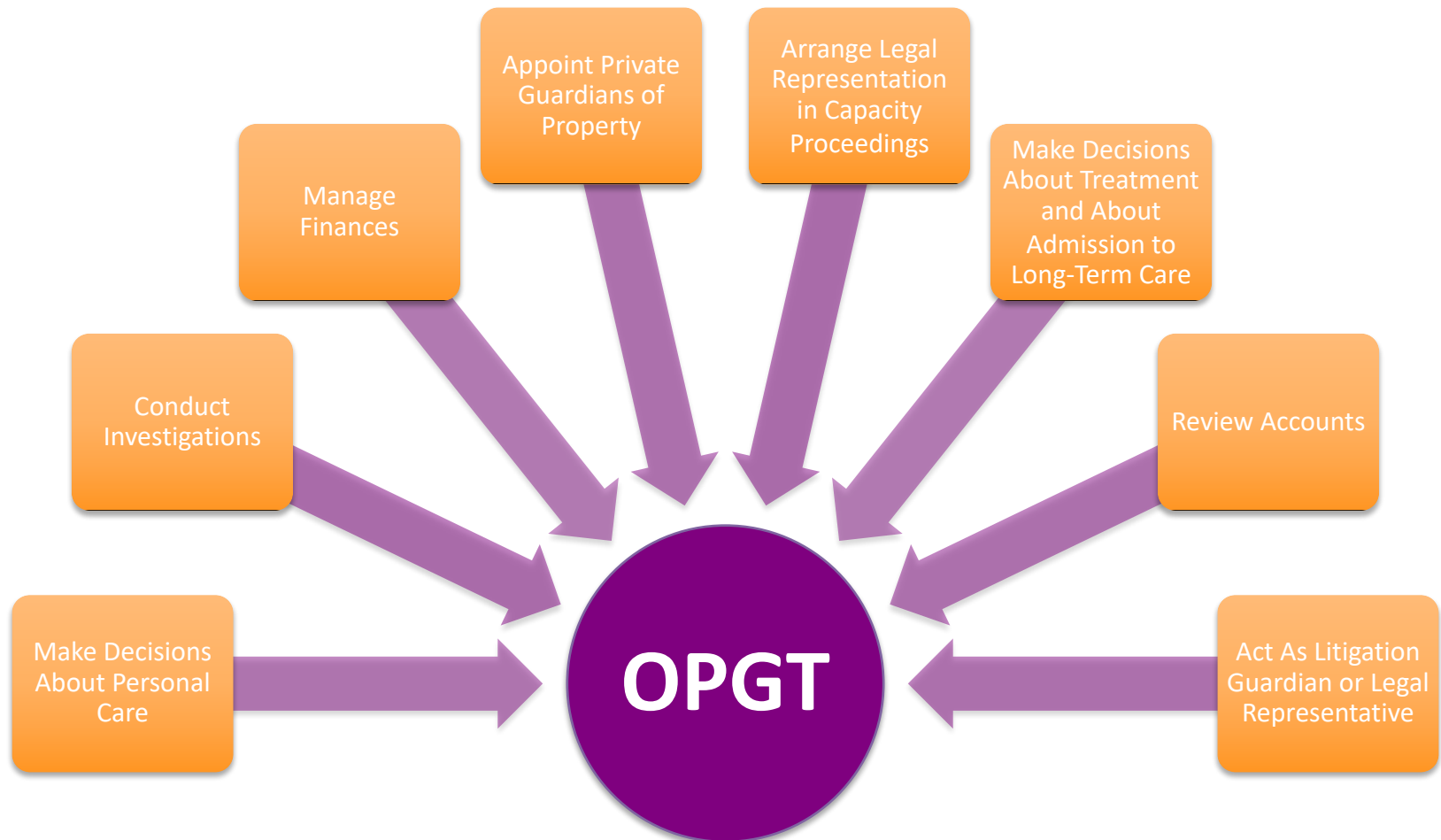
- They have concerns about the way their Attorney is acting for them.
- Their situation changes and they think the person who is currently their Attorney is no longer suitable.
- The current Attorney may no longer be available to act for them.
- The Grantor moves to a different province or territory or outside of Canada as their existing POA may not be recognized in that new location.

# Steps for revoking a POA



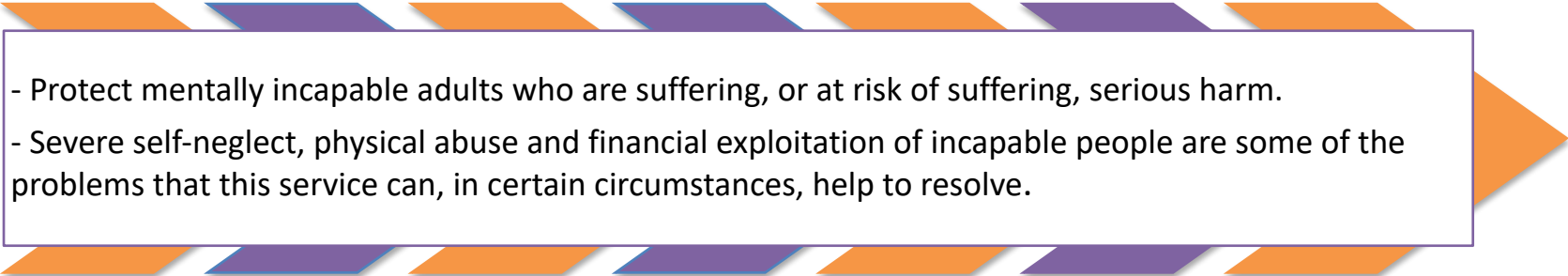
# Office of the Public Guardian and Trustee (OPGT)

## Protecting the Rights and Interests of Mentally Incapable Adults

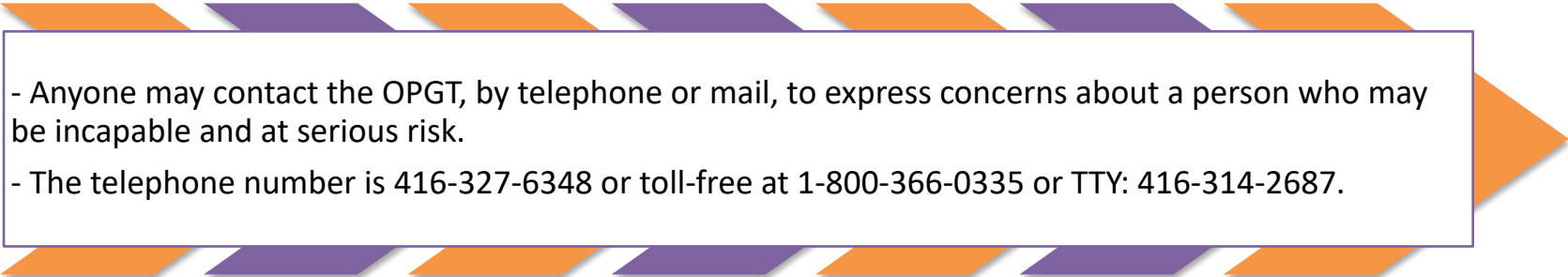




## **What is the purpose of the OPGT's guardianship investigation service?**

- 
- Protect mentally incapable adults who are suffering, or at risk of suffering, serious harm.
  - Severe self-neglect, physical abuse and financial exploitation of incapable people are some of the problems that this service can, in certain circumstances, help to resolve.

## **How does the OPGT become aware of these situations?**

- 
- Anyone may contact the OPGT, by telephone or mail, to express concerns about a person who may be incapable and at serious risk.
  - The telephone number is 416-327-6348 or toll-free at 1-800-366-0335 or TTY: 416-314-2687.

## **Aren't people entitled to choose how they live, even if it involves risk?**

- Personal autonomy and the right to make individual choices – even “bad” choices – are fundamental values in our society. But some people — due to illness, injury or other causes — lack the mental capacity to make their own choices. As a result, they are extremely vulnerable to neglect, abuse and exploitation.
- The key is finding the balance between respecting the rights of capable adults while protecting those who cannot protect themselves.
- The law has safeguards, including a court process, to ensure that people’s decision-making rights are not altered without careful consideration and due process.

## **When is a person considered to be “mentally incapable”?**

A person is mentally incapable of managing property if he or she cannot understand relevant information or cannot appreciate what may happen as a result of decisions they make, or do not make, about their finances.

## **What level of harm must be alleged before an investigation can be initiated?**

The law requires the OPGT to investigate if a person is alleged to be incapable and suffering, or at risk of suffering, “serious adverse effects” of a financial or personal nature as a result.

With respect to finances, “serious adverse effects” includes “loss of a significant part of one’s property or failure to provide the necessities of life for oneself or dependents”. Incapacity may, for example, lead a person to give large sums of money away to strangers or to face loss of his or her home for failure to pay taxes. An incapable person may face starvation or eviction if he/she cannot pay rent or buy food.

## Is a guardianship investigation and application to court the only solution to these problems?

No. There are often other solutions that are more appropriate in particular situations. If there are concerns that a guardian or a person handling a power of attorney is mismanaging an incapable person's money, anyone can ask the court to review the matter. This is usually the most appropriate course of action when there is a dispute among family members about how one member is handling a power of attorney for an incapable relative.

If an incapable person needs a guardian of property, this can sometimes be accomplished through a **capacity assessment process** without the need for an investigation.

## What does the "Capacity Assessment Office" do?

The Capacity Assessment Office is operated by the Ministry of the Attorney General and it trains eligible health professionals to be capacity assessors in accordance with the Substitute Decisions Act. It also:

- Maintains a current roster of qualified capacity assessors
- Provides on-going education and consultation services to assessors
- Operates a Financial Assistance Plan to assist individuals who wish to request an assessment but who cannot afford the costs
- Answers inquiries about capacity assessment; and
- Can assist in locating assessors with other language facility when needed

## What is a 'capacity assessor'?

A 'capacity assessor' is someone who is qualified and designated to determine whether an individual is mentally incapable of certain types of decision-making as described in the Substitute Decisions Act. In some circumstances, the Substitute Decisions Act gives capacity assessors the exclusive authority to make such determinations.

# RESPONDING TO ALLEGED/SUSPECTED ABUSE



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# Mandatory Reporting

In Ontario, the law says that the abuse of an older adult living in a **long-term care home** or **retirement home** must be **reported immediately** by anyone who has reasonable grounds to suspect that a resident has been harmed or will be harmed.

Retirement Home Act s.75. (1) and Long-Term Care Homes Act, 2007 s.24(1)

**Ministry of Health and Long-Term Care**

**1-866-434-0144**

**Retirement Home Regulatory Authority**

**1-855-275-7472**

Police can also be used when there is a violation of the criminal code:  
Assault, threats, theft, criminal negligence, murder, harassment etc.  
If you want to call the police anonymously, call

**Crime Stoppers**

**1-800-222-TIPS**

# Professional Responsibility To Report Financial Abuse

## Personal Health Information Protection Act 2004 (Provincial Legislation)

A health information custodian may *disclose personal health information* without consent where the custodian believes on **reasonable grounds** that that the *disclosure* is necessary to eliminate or reduce a significant risk of bodily harm to one or more *persons*.

### Concerns about Privacy and consent

A health information custodian may disclose personal health information about an individual:

- (a) For the purpose of determining, assessing or confirming capacity under the *Health Care Consent Act, 1996*, the *Substitute Decisions Act, 1992* or this Act; ....
- (e) To the Public Guardian and Trustee, ...so that they can carry out their statutory functions.

# Professional Responsibility To Report Financial Abuse

## **P.I.P.E.D.A. Personal Information Protection and Electronic Documents Act (Federal Legislation)**

PIPEDA requires private-sector organizations to collect, use or disclose people's personal information by fair and lawful means, with their consent, and only for purposes that are stated and reasonable.

PIPEDA provides relief under section 7(3) for the disclosure of client information to the police in the event you suspect criminal activity. This disclosure is voluntary.

PIPEDA is applicable in all provinces and territories except Quebec, BC and Alberta, which have passed similar legislation. Since Ontario has passed privacy legislation with respect to *health information* that is similar to PIPEDA, PIPEDA only applies to *non-health information* in Ontario.

# Response

1. Confirm suspicions (screen, document and evaluate)
2. Report incident to MOHLTC, RHRA, and Police, if necessary
3. Intervention / Inform supervisor and care team
4. Follow up with the patient or client

# Questions that will steer your response

1. Is the older adult in imminent danger? Does the situation require immediate response?
2. What is the nature and extent of the abuse?
3. What is the level of risk?
4. Is the person able to make decisions about his or her care? Are they able to ask for help? Can they consent?
5. Are there any caregivers, SDMs or POAs?
6. Do I need to report to the MOHLTC, RHRA or the Police? Does the OPGT need to be involved?
7. What measures are needed to prevent future abuse and ensure well being of older adult?

# Client Assessment

**If you suspect abuse is happening, try to determine if:**

1. The older adult feels safe in their home
2. They are well cared for by their caregiver
3. They have enough to eat
4. They are taking their medications as prescribed
5. They are assisted as needed with bathing and personal care
6. They are able to ask for help when they need it

**Do not interview an older adult in the presence of the caregiver, family members or suspected abusers, as it could cause an immediate and potentially dangerous conflict. It could also lead the patient to refuse referrals or the caregiver who has power of attorney for healthcare decisions to decline referrals.**

# Tools and Resources



**National Initiative for the Care of the Elderly (NICE) - [nicenset.ca](http://nicenset.ca)**

Elder Abuse Suspicion Index (EASI) screening tool, Brief Abuse Screen for the Elderly (BASE), and IN HAND: An Ethical Decision-Making Framework

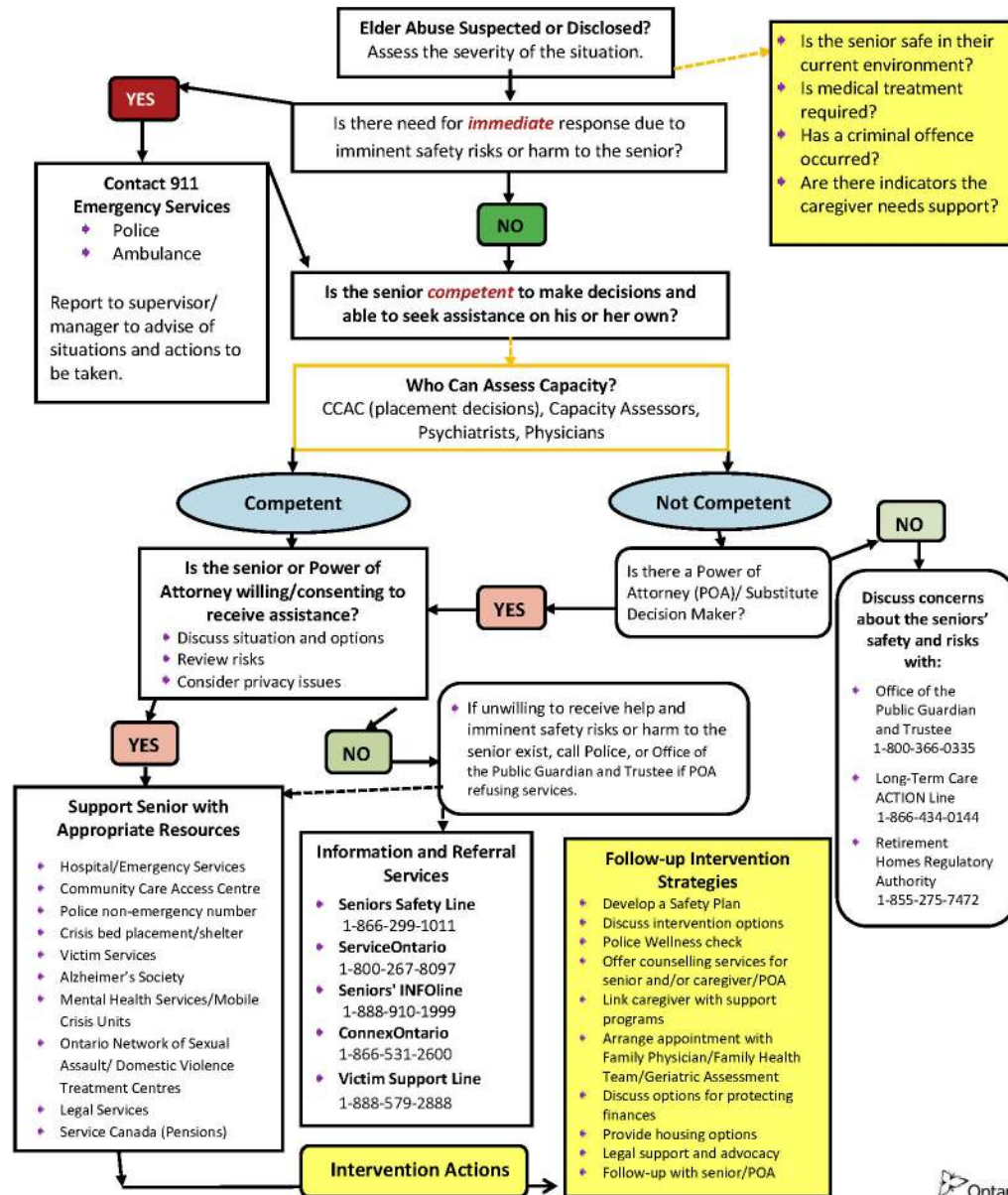
**Registered Nurses' Association of Ontario (RNAO) - [rnao.ca](http://rnao.ca)**

Preventing Abuse and Neglect of Older Adults (best practices) and a variety of other tools. Just type '*preventing abuse*' in the search bar.

**Elder Abuse Ontario (EAO) - [elderabuseontario.com](http://elderabuseontario.com)**

Modules addressing different types of abuse; tools for various occupations; educational materials for seniors and the general public; decision-making trees and assessment guides

## Elder Abuse Screening, Intervention and Response Guide for Health Care Providers



## ELDER ABUSE ASSESSMENT & INTERVENTION – REFERENCE GUIDE

ADAPTED FROM HALTON ELDER ABUSE PREVENTION COMMITTEE

### INTERVIEW STRATEGY

1. **Develop trust and be sensitive to person's culture, religion, comfort level and timing in obtaining disclosure:** Interview alone, listen, be patient, non-threatening and non-judgmental, validate feelings and offer emotional support, avoid premature assumptions and suggestions. Some cultures may require a family member to be present during the interview or it may be necessary to negotiate in order to interview someone alone.
2. **Note suspicious histories:** Explanation vague, bizarre or incongruent with type or degree of injury, denial of obvious injury, long delay between injury and treatment, history of "doctor shopping".
3. **Be alert to person's wishes and assess ability to understand.** Try to assess whether the person "understands" and "appreciates" what is happening and what their needs are.
4. **Identify what information is missing:** Frequency, duration, urgency, need for physical examination.
5. **Be aware of interdependent relationships / power differences:** Be cautious of involvement of third party who may be the abuser; note conflicting histories. Where appropriate, interview family members but remember it's key to TALK TO THE SENIOR even if family are available.

### POSSIBLE INTERVIEW QUESTIONS

- Is there something that you would like to share with me?
- Has there been a recent incident causing you concern?
- Has anyone ever pressured or forced you to do things you didn't want to do?
- Has anyone ever tried to take advantage of you?
- Has anyone ever failed to help you take care of yourself when you needed help?
- Have you ever signed any documents that you didn't understand or didn't want to sign?
- Do you make decisions for yourself or does someone else make decisions about your life, like how or where you should live?
- Are you afraid of anyone?
- Would you like some help with...?
- It must be hard for you to look after...?

### POSSIBLE INTERVENTIONS

Consider **impact** on the persons, their wishes, and their ability to recognize that they may be a victim of abuse. Note their understanding and appreciation of the consequences of their decisions. Understand that often before a person will seek or agree to accept help, they need to be able to trust you and know that you will follow through with the help you offer to give. Your role could be singular or part of a team of service providers that could support the person to be healthy and safe. Be aware of appropriate resources or know how to link with broader community. Follow your professional standards in obtaining client consent. If client does not consent maintain contact to initiate A and/or B. (See Below)

#### A. EDUCATION

Provide information and support according to the interests expressed by the person. Be aware of services outside the health care system which are specific to the needs of any older adult or specific to the needs of the older persons who are being victimized or are at risk, including social services, legal services, financial assistance, housing options and the faith community.

#### B. SAFETY PLAN

The plan may include a change to an element of their environment or their relationship which could result in the elimination of the role of the abuser or context of the abuse. Consider:

- Home visits, telephone contact, contact with other family and friends, regular appointments.
- Secure assets e.g. Hide emergency money (coins for pay phone) somewhere outside home.
- Give copies of important documents and keys to trusted friends or family members.
- Plan escape by packing a bag of extra clothing, medicine and personal aids (e.g. glasses, hearing aids).
- Keep phone numbers of friends, relatives, shelters or other trusted individuals handy.

#### C. COORDINATION AND CONSULTATION HELP HUMBERS

Some of these organizations will provide direct assistance and others will refer callers to local organizations to get information or assistance. This is not an exhaustive list. It is important to develop your own list of local contacts.

Advocacy Centre for the Elderly	1-416-598-2656
Association of Local Public Health Agencies	1-416-595-0006
Alzheimer Society of Ontario	1-416-967-5900
Canadian Anti-Fraud Centre	1-888-495-8501
Elder Abuse Ontario	1-416-916-6728
Ministry of Government Services — Consumer Services Bureau	1-800-889-9768
Ministry of Health - Tele Health Line	1-888-797-0000
Ministry of Health and Long-Term Care ACTION Line	1-888-434-0144
Office of the Public Guardian and Trustee	1-800-368-0335
Ontario Association of Community Care Access Centres	1-416-750-1720
Ontario Rental Housing Tribunal	1-888-332-3234
Ontario Seniors' Secretariat Info Line	1-888-910-1999
Retirement Home Regulatory Authority	1-855-275-7472
Senior Crime Stoppers	1-800-222-8477
Victim Support Line	1-888-579-2888

ADAPTED BY ADVOCACY CENTRE FOR THE ELDERLY

# Sample Assessment Questions

In considering using these questions, follow your professional standards in investigative interviewing and in obtaining client consent:

- Is there something that you would like to share with me?
- Has there been a recent incident causing you concern?
- Do you make decisions for yourself or does someone else make them for you?
- Does your caregiver depend on you for shelter or financial support?
- Have you ever felt taken advantage of?
- Do you have any concerns about your money/belongings/property/valuables?

# Sample Assessment Questions

Continued...

- Has anyone ever asked you to sign papers that you did not understand?
- Does anyone ever take things from you or use your money without your permission?
- Do you manage your own money?
- Has anyone taken anything from your purse/wallet?
- Has anyone taken money from your bank account?
- Have you been pressured to change your Power of Attorney?
- Has anyone pressured you to change your Will?
- Would you like some help with \_\_\_\_\_?

# Effective Strategies

- **Create a therapeutic environment:** Comfortable and private environment. Minimize the chance of being overheard or interrupted by anyone.
- **Be empathetic:** Believe their story. Make sure your concern is felt. Avoid victim-blaming. Be aware of interdependent relationships and power differentials.
- **Be respectful :** Consider their needs, lifestyle choices, and preferences. Reflect on their desire for autonomy and respect their right to make their own decisions.
- **Document:** Dates and times of incidences. Write things down verbatim; only facts. Note suspicious histories. Take note of environmental factors, changes in behavior and appearance. Note the size, location and stage of healing of injuries.
- **Explain options & their consequences clearly:** Inform them about abuse. Explain severity of situation and possible outcomes of actions / inactions. Tell them about resources for help (Seniors Safety Line, local elder abuse service etc). Discuss options for intervention. Obtain permission / consent. Inform client of your obligations to your employer and Professional College, if you belong to a regulated profession. Develop safety plan/prevent future abuse.

# Preventative measures

Educate Older Adults in your care about different preventative actions they can take such as:

- Not lending their bank card or giving their PIN number to anyone
- Using direct deposit for all cheques that they receive,
- Having bills automatically paid from their bank account
- Not signing any documents they do not understand or are under pressure to sign from anyone
- Not being guilt-tripped into doing something you are not in agreement with

# Preventative measures [Continued]

- Updating their Will and Power of Attorney documents yearly or as relationships change
- Only granting an attorney (Continuing Power of Attorney for Property and/or a Power of Attorney for Personal Care) to a person(s) that they know, trust, and whom you know will respect their wishes
- Writing into their Continuing Power of Attorney for Property instructions regarding when it is to come into effect
- Seeking independent advice from someone they trust before signing any documents.

# Preventative measures [Continued]

- Reading all legal documents carefully, including the fine print
- Not lending money without a formal payback schedule...unless it's a gift
- Being careful when co-signing loans or signing over ownership of their home
- Keeping their home secure and not leaving valuables or large amounts of cash lying around
- Being informed about financial affairs

# Case study

Li Wei and Cheng

Li Wei appreciated her grandson helping her to run errands. Since her husband's death a few months ago, simple things like getting groceries, medicines or getting to the bank had become difficult for her. In addition, her deteriorating physical health and limited mobility made things even more difficult for her. Her grandson, Cheng, had offered to help and for a while it seemed like the perfect arrangement. He would take her to the bank, the supermarket, drugstore, etc.

Li Wei was recently discharged from the hospital and as part of her discharge plan she receives a couple of hours of PSW support twice a week. As winter approached Cheng told Li Wei it would be much easier if he just ran the errands for her. Because he had been so helpful for so many months, Li Wei thought nothing of making arrangements to have her grandson added to her personal bank account. It would make things much easier for her, she thought.

Meanwhile, you started noticing that Cheng wasn't visiting Li Wei as often as before and started to take longer and longer to bring her medicines and groceries. You also noticed that occasionally, Li Wei did not have enough groceries at home and she would spend days without taking her medicine. It wasn't until a cheque she had written to cover her insurance had bounced that Li Wei realized her grandson had been helping himself to her pension.

Li Wei seems very upset and worried but she doesn't seem to take any action.

**Who is the Abuser?**

Li Wei's grandson Cheng (joint account holder and caregiver). Cheng might have financial problems and might be experiencing caregiver stress.

**Types of Abuse?**

Financial abuse and neglect

**Risk Factors for Victim?**

- Impaired health and limited mobility
- Dependency on grandson
- Widower (social isolation = changes in social activity)

**Warning Signs?**

- Joint bank account (insufficient funds when Li Wei transacts)
- Little to no food in the house
- Disruptions in medication routine (irregular medication intake)
- Social isolation (Cheng not visiting Li Wei as often as before)
- Emotional stress/worry/anxiety

**Risk Assessment**

Non-imminent

**Capacity?**

Capable    Incapable    Fluctuating

\*Nothing in the scenario seems to indicate incapacity.

**Response and intervention**

- Assessment of client/patient and level of risk involved
- Document (date and time of incident, physical injuries and other pertinent details)
- Obtain consent, explain your duties and responsibilities
- If she does not consent, provide Li Wei with a list of local and regional resources and follow up.
- If she does consent, consider possible referrals, establish an intervention team (key players: social worker, case manager etc.), and explore options for LiWei.
- Report to superiors as per internal policies and procedures set-out by your employer.
- Monitor and follow-up with senior

## **Li Wei's options:**

- Going to the bank to remove her grandson from her joint account, changing her pin number, having bills automatically paid and having cheques automatically deposited.
- Groceries and meals: look into grocery delivery, meals on wheels or ordering frozen meals.
- Consider transportation options eg: accessible transportation (community service programs), learn how to take public transportation, red cross etc.
- Contact pharmacy to have medications delivered and automatically paid from her account
- Social life: Look into options for socialization (seniors' groups, clubs, and programs)
- Inform Lei Wei that she can notify the police and discuss criminal charges should she want to do that
- Refer to family counselling or elder mediation for her and Cheng
- Inform Li Wei that there are some caregiver respite services available for Cheng
- Develop a safety plan

## **Referral and Resources:**

*If capacity is in doubt:*

- Capacity assessment / OPGT

Seniors Safety Line

Local elder abuse service or network (case management)

Li Wei's bank manager

Li Wei's pharmacy

LHIN Home and Community Care coordinator

In-home community services

Social worker

Police

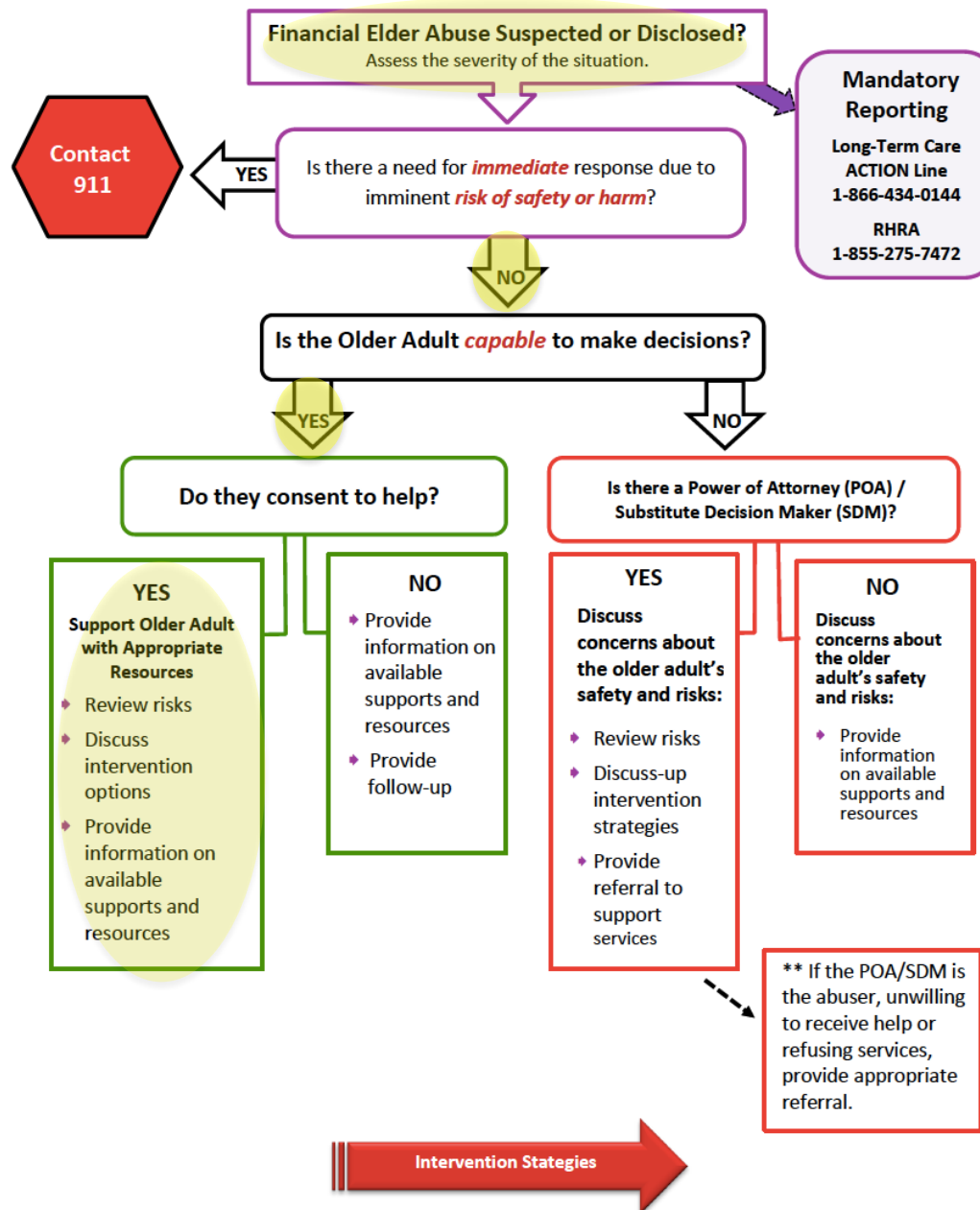
Education on prevention



Elder Abuse Ontario

Stop Abuse - Restore Respect

## Financial Abuse Decision Tree



# Coordinated community response

- Elder abuse service
- Local Health Integration Network (LHIN)
- Geriatric Emergency Management Nurse (GEM)
- Social Workers in community, LTC/RH and hospitals
- Alzheimer's Society/MS Society/Parkinson Society
- CMHA/CAMHS
- VAW sector
- Transitional housing and shelters
- Municipality / Housing
- Financial / banking institutions
- Local Community / Family Services or Elder Mediation
- Behavioural Supports Ontario (BSO)
- Law enforcement and Victim services
- Legal services

# Seniors Safety Line – Ligne Aînés Sécurité

**Get Help  
Now**

**Call the Seniors Safety Line**

**1-866-299-1011**

Free to call  
Confidential  
24 hours a day  
7 days a week



**Elder Abuse Ontario**  
Stop Abuse - Restore Respect

Funded by:



# Provincial Information and Support

## **Elder Abuse Ontario**

[www.elderabuseontario.com/](http://www.elderabuseontario.com/)

(416) 916-6728

## **Ontario Provincial Police**

[www.opp.ca](http://www.opp.ca)

1-800-310-1122

## **Ministry of Health LTC-Action Line**

1-866-434-0144

[www.ontario.ca/page/long-term-care-home-complaint-process](http://www.ontario.ca/page/long-term-care-home-complaint-process)

## **Retirement Homes Regulatory Authority**

[www.rhra.ca/en/](http://www.rhra.ca/en/)

1-855-275-7472

## **Senior's Safety Line**

1-866-299-1011

## **Senior Crime Stoppers**

<http://ontariocrimestoppers.ca>

1-800-222-TIPS (8477)

## **Office of the Public Guardian and Trustee**

[www.attorneygeneral.jus.gov.on.ca](http://www.attorneygeneral.jus.gov.on.ca)

1-800-366-0335

## **Canadian Anti-Fraud Centre**

<http://www.antifraudcentre-centreantifraude.ca>

1-888-495-8501

# Provincial Information and Support

## **Consent and Capacity Board**

[www.ccboard.on.ca](http://www.ccboard.on.ca)

1-866-777-7391

## **Alzheimer Society of Ontario**

[www.alzheimer.ca/en/on](http://www.alzheimer.ca/en/on)

1-800-879-4226

## **Behaviour Support Ontario (BSO)**

[www.behaviouralsupportontario.ca/](http://www.behaviouralsupportontario.ca/)

1-855-276-6313

## **Victim Support Line**

[www.attorneygeneral.jus.gov.on.ca/english/about/vw/vsl.asp](http://www.attorneygeneral.jus.gov.on.ca/english/about/vw/vsl.asp)

1-888-579-2888

## **Ontario Network of Sexual Assault/ Domestic Violence Treatment Centres**

[www.satcontario.com/en/home.php](http://www.satcontario.com/en/home.php)

(416) 323-7518

## **Ontario Coalition of Rape Crisis Centres**

[www.sexualassaultsupport.ca/](http://www.sexualassaultsupport.ca/)

## **Assaulted Women's Helpline**

[www.awhl.org](http://www.awhl.org)

1-866-863-0511

## **Fem'aide**

[www.femaide.ca/](http://www.femaide.ca/)

1-877-336-2433

# Provincial Information and Support

## **Support Services for Male Survivors of Sexual Abuse**

[http://www.attorneygeneral.jus.gov.on.ca/english/ovss/male\\_support\\_services/](http://www.attorneygeneral.jus.gov.on.ca/english/ovss/male_support_services/)

1-866-887-0015

## **TALK4HEALING**

<http://www.talk4healing.com/>

1-855-554-HEAL (4325)

## **Rainbow Health Ontario**

[www.rainbowhealthontario.ca/](http://www.rainbowhealthontario.ca/)

(416) 324-4262

## **LHIN Home and Community Care**

<http://healthcareathome.ca/>

310-2222

## **Advocacy Centre for the Elderly**

[www.advocacycentreelderly.org](http://www.advocacycentreelderly.org)

1-855-598-2656

## **Legal Aid Ontario**

<https://www.legalaid.on.ca>

## **Law Society Referral Service**

[www.lsuc.on.ca/lrs/](http://www.lsuc.on.ca/lrs/)

1-855-947-5255

# www.elderabuseontario.com

[Home](#)[Elder Abuse](#)[About Us](#)[In the News](#)[Links](#)

Call the Seniors Safety Line  
**1-866-299-1011**

Free to call  
Confidential  
24 hours a day  
7 days a week



New to this site?

Guide to using the new  
Elder Abuse Ontario website

For a tutorial, [click here](#)



## We Can Help

**Need Help Now?**  
**Call the SENIORS SAFETY LINE**  
**1-866-299-1011**

Elder Abuse Networks in Ontario

Directory of Programs & Services

Educational materials for seniors

## Training & Education

Upcoming Professional  
Development

Training

Intervention Tools

Directory of Tools & Resources

## Connect With Us



To learn more about Elder  
Abuse call **416-916-6728**

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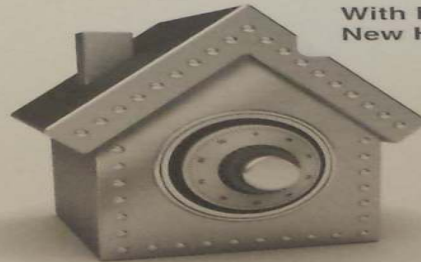
# Safe & Sound

A tool to help guard your financial security



Elder Abuse Ontario

Stop Abuse - Restore Respect



With Financial Support from  
New Horizons

[www.elderabuseontario.com](http://www.elderabuseontario.com)

**FINANCIAL ABUSE**

**BANK SAFELY**

**CHOOSING A POWER OF ATTORNEY**

**BENEFITS AND RISKS OF POWERS OF ATTORNEY**

**INTERNET SMARTS**

**FRAUDS AND SCAMS**

**THINGS TO WATCH OUT FOR**

**STAYING SAFE**

## ELDER ABUSE AND KNOWING YOUR LEGAL RIGHTS

This booklet, "*Elder Abuse and Knowing Your Legal Rights*" contains legal information presented in plain language, about some of the tools available to deal with situations of elder abuse:

- Revoking a Continuing Power of Attorney for Property
- Reporting Elder Abuse to the Police
- Guardianship Investigations
- Statutory Guardianships
- Court Appointed Guardians
- Representatives Appointed by the Consent and Capacity Board
- Civil Actions for the Recovery of Property
- Important Provincial Resources

*This booklet contains legal information for educational purposes only and is not to be construed as legal advice. For legal advice, speak with a lawyer/legal professional.*



### WHAT IS ELDER ABUSE?

**Financial abuse** is defined as any improper conduct, done with or without the informed consent of the senior that results in a monetary or personal gain to the abuser and/or a monetary or personal loss to the senior.

**Neglect** is not meeting the basic needs of the older person.

Active (intentional) neglect is the deliberate withholding of care or the basic necessities of life.

Passive (intentional) neglect is the failure to provide proper care to an older adult, usually due to the lack of knowledge and/or experience.

Emotional or Psychological abuse is any action, verbal or non-verbal, that lessens a person's sense of identity, dignity and self-worth.

Sexual abuse includes any unwanted sexual touching, remarks or coercing a person through force, trickery or threats into sexual activity without their consent. Sexual abuse includes inducing sexual activity with a person who is not mentally capable of giving active informed consent throughout the entire duration of the sexual activity.

Physical abuse is any act of violence or rough handling that may or may not result in physical injury but causes physical discomfort or pain.

# QUESTIONS?



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Please fill out the EVALUATION FORM as your feedback will guide us for our future webinars. You will receive an email link to the evaluation after the session.

# Contact Elder Abuse Ontario

## Connect With Us



To learn more about Elder Abuse Call  
416-916-6728

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Toronto, ON M9B 6E1

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Website: [www. elderabuseontario.com](http://www.elderabuseontario.com)

## Regional Consultant Offices

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Stéphanie Cadieux (East)

Tel: 613-406-6025

Email: [east@elderabuseontario.com](mailto:east@elderabuseontario.com)



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