

Ethics of care : Video 2

Transcript

- You're working in a group home where there are five residents with various cognitive and other impairments.
- Recently, one of the residents, Marcia, has been behaving badly and disrupting the home quite regularly.
- On one shift you notice that she has taken a particular dislike to another worker who works a few shifts each week in the house.
- He tries to brush it off but it's very clear that Marcia wants nothing to do with him and that she seems to be afraid of him.
- So firstly we would have to take into consideration is everyone safe? Coz if she's lashing out then we want to ensure the safety of the other residents in situations like that. Then after that we can get into why she is actually behaving that way and we can explore what actually is happening.
- When behavior goes from how you've been expecting it to what we call challenging behaviors, behaviors of concern, it is usually a communication of some form, and so the person may be non verbal, they may not have the means to be able to talk about what's effecting them so as soon as a behavior changes you can be sure that there's something going on that's triggered that and then it's a matter of really watching the environment that she is in to see when her behavior does change. Is it changed all the time? Is it always like that? Or is she lashing out? Does there appear to be a trigger for the behavior? Is it the time of the day perhaps? You start recording what you see and making notes about how you see the behavior changing, when it's changing, and what changes have occurred in the environment, perhaps there's a new staff member present, perhaps there's somebody coming into the house to visit someone and she's having a reaction to that but you don't quite know what that is yet.
- I think it's a really interesting one because sometimes I think the people we support are quite afraid of new people coming in -
- That's true.
- Some of them like to have regulars coming on board. And it's easy to jump to abuse but I think you should always have that there at the back of your mind and then look at the bigger picture.
- Yep, and I noticed that you did say that she has various cognitive impairments. I'm just wondering what it is because it could be dependent on what type of cognitive impairment could be paranoia, you mentioned she may just be scared, old age, could be scared, new environment.
- So the issue for me would be around how do we get that information from her, what is it that's actually worrying her because if she's got cognitive and other impairments and it could be just communicating

concerns because I think a lot of people we support are not good at communicating their concerns, they're quite disempowered so it's how do we get that information from her?

- Mmm. Do you think we can also ask the people or the other residents around her as well, their opinion, because it's good to have a broader image of everyone and their perspective as well to piece it all together to have a thorough understanding.

- I think that's a really good idea. Because is it just her and she's the one telling us in her own form of communication, or is it general.

- Yeah.

- And they may have seen something happening too, so I think it's really important to get as big a picture as you can. We have a responsibility to make sure that everything's fair when we're doing an investigation.

- And I think it is very good as a personal support worker to be very observant cos observation makes a lot of difference to realizing those actual actions taking place because always there's an underlying reason for whatever behavior is taking place as you already said and just being more observant and taking notes and putting into records this is what is happening and there could be so many triggers to this and we don't know yet what the actual trigger is.

- I don't know, she might have a personal problem with the worker, it might not be something that's a bad thing but she just might not like him. But then it can range to another thing, he might have done something to upset her, or there's something shifty going on, who knows.

- Yeah so obviously you can't jump to conclusions that something horrible is happening to Marcia but at the same time sometimes you know in a residential home setting I'm guessing you have multiple staff members so there might be other staff members who work similar shifts that maybe have observed some things and it might be worthwhile to have a bit of a talk to them as well. So we've got the second part of this which is, when you asked a worker about why Marcia is acting out around him -

- He brushes it off saying that a few weeks ago he didn't do what she asked him to do and that she's had it in for him ever since.

- Hmm, just brushing it off, sounds a bit fishy, looks like there's something going on, because if a resident is doing that towards you obviously you should take that into serious consideration, it's not something you'd just brush off, and if I was in the situation like this where I had to confront another carer to be like this is what is happening I see a lot of tension between you two what is actually happening, I think I would appreciate for you to actually get the time to explain what is happening so we can get to the depth of what is happening.

- Yeah, it's concerning that if you notice there's a complete difference with Marcia when this person is present in the room, and then when you've raised it to them and they've brushed it off like that I think it's an indicator that something could be being covered up. Also mentioning it to the manager is a good idea early on that you have concerns. It's around creating safety for everyone. Because we don't know what's going on, we don't know if it's true or not but there's indicators there that say something could be going

on. I had a fellow I was working with who was in a wheelchair and I'd noticed signs of marks and things on him and I knew there was only one worker that worked with him between the times I did, so I asked that worker had he noticed the bruising and he said he hadn't noticed any bruising whatsoever, and as a result of me finding that out and raising it as a point because of the culture in that workplace that client became more abused the next time I saw them they had more signs of abuse on them of physical marks on them, and in fact when I asked the client they told me they'd been put out in their wheelchair in the rain for having let me see the marks on their body so the first thing is to make sure the client is safe, to report to your organization, then it's a matter of how the organization's gonna handle your reporting to go from there.

- And sometimes it can be a one-off thing, a one-off behavior, and one of the experiences I've had there's been times where I go to a residential home and there's a particular resident that just doesn't like me being around and normally for the fact that there's been times where I've actually gone in to help a resident, like assisting them with the shower, and they be like don't touch me, don't touch me you're filthy hands, I want you out of my room, and I think they can be to a certain extent racial discrimination to that happens, and I feel most people don't like to talk about it, but it is actually something that happens and I've experienced it a couple of times where a resident sees you and they just don't want you near them for the fact of the color of your skin.

- It can also be the background of the person you're working with, they may not be comfortable around males, male workers.

- Yep true.

- And sometimes that's a reaction that can happen to really be quite verbal and asking you to stay away from them when in fact they've had experiences in the past that don't make them feel safe with males. So it's good not to assume the response that's coming from the person and just to think that there could be something else going on here that I'm not aware of.

- I always get concerned when they say she asked me to do something and I didn't do it, and she got upset. It is their home.

- Mmm.

- How fair was why didn't you do it? So I think when he comes up with a comment like that I think there's a lot then to look at and the alarm bells sometimes go off for me when I hear that comment made by workers. Because why didn't he do it? What was it she was asking for? Was it reasonable et cetera? It is a concerning comment to me. What do we do to actually find out and make sure that she's heard fairly. Because often I think people with disabilities or with cognitive impairments, they're not actually heard.

- Obviously you'd ask what was it that she wanted you to do and why didn't you do it? You'd ask the reason for it.

- Yeah, and I think also ask Marcia if that's the case.

- Mm, absolutely.

- Maybe he's misinterpreted something as actually it's something else completely, or in worst case scenario it could just be him trying to throw you off a trail of something bad that's actually happening.
- Absolutely, yep. I guess you have to get both sides of the story.
- And if Marcia has family or friends who look out for her, it might be time to start including them in the conversation as well and seeing if Marcia has told them anything that she's not quite comfortable telling other staff members yet.
- Yeah.
- Yeah.
- So continuing on, you take Marcia aside and ask her what the matter is but she simply says she's unhappy and doesn't like living here anymore.
- You have no hard evidence but you fear that the relationship between Marcia and the worker might be abusive.
- How will you address the situation.
- Well I think it's about creating a safe environment where she can actually open up. In regards to abuse normally there is a shame, I don't want to be, you know the shame of coming out and saying I've been sexually abused or financially abused.
- Building trust is very important with a person, that's the best way to get them to be more open and share whatever's been happening to them and again you as a worker need support so you need to probably let your senior worker, team leader, your manager know what's going on and just make sure that you've got support to deal with this, because if you're encouraging someone to share what's happening to them it's better to have someone else present as well so that it's not just something that's told to you that you can't actually give evidence about.
- And even the fact that you're even suspecting that there might be an abusive relationship that even calls into attention that you have to immediately let your supervisor or management know about it.
- Yeah.
- So they can investigate it more.
- Yeah.
- And even if it gets to a point where she opens up a bit more and she says oh I was hit or I was pushed or I was abused immediately you have to do your incident reports that document it and if you have to get management involved you should.

- Mmm, yeah. It's good to have management involved because it's a big responsibility for one worker to take on by themselves.
- Yeah.
- So you need to make sure that you've got support in order to do that.
- Yeah, definitely true.
- I really wanna get a big picture of it and I also want to know the patterns, was this once off, could it be an accident, is this frequent, does it happen to all the other residents as well or is it just Marcia, yeah I really want to know that before going in and asking and finding strategies to help.
- Well I think it's interesting, she's not happy to live there anymore, so for me that says she was happy living there before so what's happened, and is it this worker coming in, so I think it is looking at all those issues you raised, you have to be fair to both people, so I think you have to listen to what the worker is saying, but I think for me, I would be listening very closely to what other staff are saying. How happy has she been? How has she coped? Has this ever happened before? And the other residents, are any of them feeling the same?
- Yeah.
- Because sometimes if it's abusive they target one person, sometimes it's general because the worker just doesn't have the skills and doesn't know what they're doing. The investigation has to be fairly thorough. Your point about how do we get that communication hopefully there's good communication aides for her and the staff know how to get that. You'd have to work out who's the best person to talk to Marcia, who is she most comfortable with.
- Yeah.
- If it was a DHHS house we would certainly need to be looking at that in terms of CIMS and reporting. You report it and then you do the investigation. And unfortunately I've had to stand people down while the investigation is happening. So they're stood down with pay, so the investigation has to be fairly quick too, you can't take too long a time because for Marcia she needs it resolved quickly, but certainly there's DHHS requirements and it will be under NDIS too, the requirements.
- Oh okay.
- The requirements to report if she's saying she's abused.
- I was with my client at an art class and there were other people who had supports there, and me and the art teacher noticed that one of the supports, we were going to do things with glue, and the support worker had glue on his hands, and he just wiped it on the client.
- Yeah, right.

- Which we thought was shocking and we thought you know he's doing this in public, around a whole group of other people, what's going on when they're alone. So the art teacher actually ended up giving this person's house a call, investigating a bit further into it and she's actually changed support workers now. This particular lady, she had physical disabilities but also she was non verbal so she was very very vulnerable because she couldn't always communicate things that were going wrong. And it doesn't always have to be something that's outright illegal, you don't always have to witness someone physically hurting someone, it could just be small things like that that make you question it.

- Absolutely.

- Have the deeper conversation about it, yeah.