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Against Violence in Elderly Care (AVEC)

Project ERASMUS+

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1st NATIONAL FOCUS GROUP

ONLINE MEETING OF OCTOBER 30th 2020

MINUTES

Attending the Focus Group

- **FNAQPA, AVEC Pilot in France :**
 - Didier SAPY, Executive Director
 - Sébastien BOURBON, Project Manager
 - Anne-Marie JARNIEUX, Main Researcher
 - Lizzie CLAVEREAU, Researcher, Psychologist, Trainer
 - Christian MARTIN, Researcher, Psychologist, Trainer
 - Clémence LACOUR, Lawyer

- **LA MAISON D'ANNIE, CARE HOME IN SAINT-VICTOR-SUR-LOIRE**
 - Florence VICHI, Director
 - Christel ARNAUD, Care Manager
 - Isabelle GIVEROL, Coordinator of Social Life
 - Sophie MINIER, Manager for Communication, Quality and Training

- **LA MAISON FLEURIE, CARE HOME IN FEYZIN**
 - Hélène JARROUSSE, Director
 - Rachida CHABILI, Deputy Director
 - Pascale BOUQUIN, Psychologist

- **TREMA, HOME CARE SERVICE IN LA ROCHELLE**
 - Pascale CAPRARO, Director

Introduction

Manifestations of violence in the elderly care can take several forms. Because of different and current situations, facilities are working in a way to decrease violence in the ageing sector. Because of the sanitary crisis, the subject takes more and more importance in professional practices.

About the semantic

“Violence” is very few used in France, maybe wrongly, in benefits of words as benevolence or bad-treatment. So we have to share our point of view about semantic and to choose the right words.

First of all, it’s necessary to name what violence is and to identify who is responsible of violence. For example, dementia can be responsible of violence, so this word can help to make a good analyse. As dementia creates violence, it can be necessary to work and care about it. It aims at identifying where violence come, in order to analyze associated mechanism (aggressiveness can be considered as an answer to violence).

Secondly, on a legal point of view, violence is the right word to use. In fact bad-treatment is a particular form of violence, without legal bases (French law). In order to sanction bad-treatment, it must be qualified as violence. About benevolence, it can be considered as a go back. Nowadays resident is considered by the law as an actor, and well-treatment focuses on caregivers and not on resident as an actor. Moreover because of the willing of hiding violence, well-treatment can be considered as a pressure for workforce because everything rests on workforce’s attitude and not on violence causes.

Nevertheless benevolence and well treatment can be considered as methods to struggle violence. It can also be considered as a positive approach for workforce. But it doesn’t prevent of thinking about violence.

Violence has a largest analysis versus bad-treatment which aims at caregivers only. Besides, bad-treatment doesn’t analyse the reason of violence on a psychological approach.

As a consequence we can consider that violence is the right word but it has to be explained on a pedagogical point of view. It can be interesting to suggest violence at plural.

The fields to work on:

We have to think about 3 parts: modalities of prevention of violence, risk factors, tools and means to struggle violence (Workforce strategy collective and individual)

About the risk factors

In each situation the absence of thinking and questioning represents a risk. We have noticed different ideas about risk factors. About the notion of violence, we want to have a global approach. In fact, we want to point the difference between violence on a legal approach and violence feeling not sanctionnable but felt like this by the person (for example: some risks can be considered as a form of violence but not punished by the law).

- The workforce :
 - Lack of staff or absenteeism (this risk is higher in the actual crisis situation)
 - Lack of knowledge and training
 - Repetitive acts in care
- Absence of institutional project / care project or unsuitable project
- Dementia trouble : in two ways, violence is a syndrome of dementia and dementia people are statistically more victims of violence
- Institutionalization risk
 - lack of workforce during the crisis : one of the consequences is the risk of a repetitive act in care, without time to think about care)
 - Lack of participation of the clients
 - Absence of care philosophy
 - Analysis between community life and individual approach (risks, ethics)
 - Institutional frame and focus on a collective approach : it can be violent if the organization is not based on an individual approach (for example : imposed schedules for lunch or breakfast)

About institutionalization risks : according to a national study, risks are more important at home because workforce is alone to face complicated situations. Besides, people at home are alone and isolated. In a way, institutionalization can be a kind of guarantee. Nevertheless institutionalization can cause kinds of bad-treatments but workforce uses tools and keep track of violence incidences in their organization.

- Failing management
- Lack of tools and lack of keeping track of violence incidences
- Relationships with families and violence of family member towards client and/or employee
- Violence in home care services : unsuitable housing and isolation of the person. Isolation prevents from alerting violence. Moreover, isolation of the workforce is a very important factor because isolation prevents from analysing, thinking and taking hard the good decision to make in care.

About prevention and strategy to struggle violence

As opposed to the risks factors, each time we have said “lack of”, the “presence of” is a way of prevention. We think that it is very important to think about liberty of choice and make a difference between care and protect, needs and desires. Nevertheless we want to add some particular points :

- Individual project (biography) as a mediation tool because it is built with professional, families and client
- Institutional frame and multidisciplinary workforce and skills
- The way of thinking and questioning

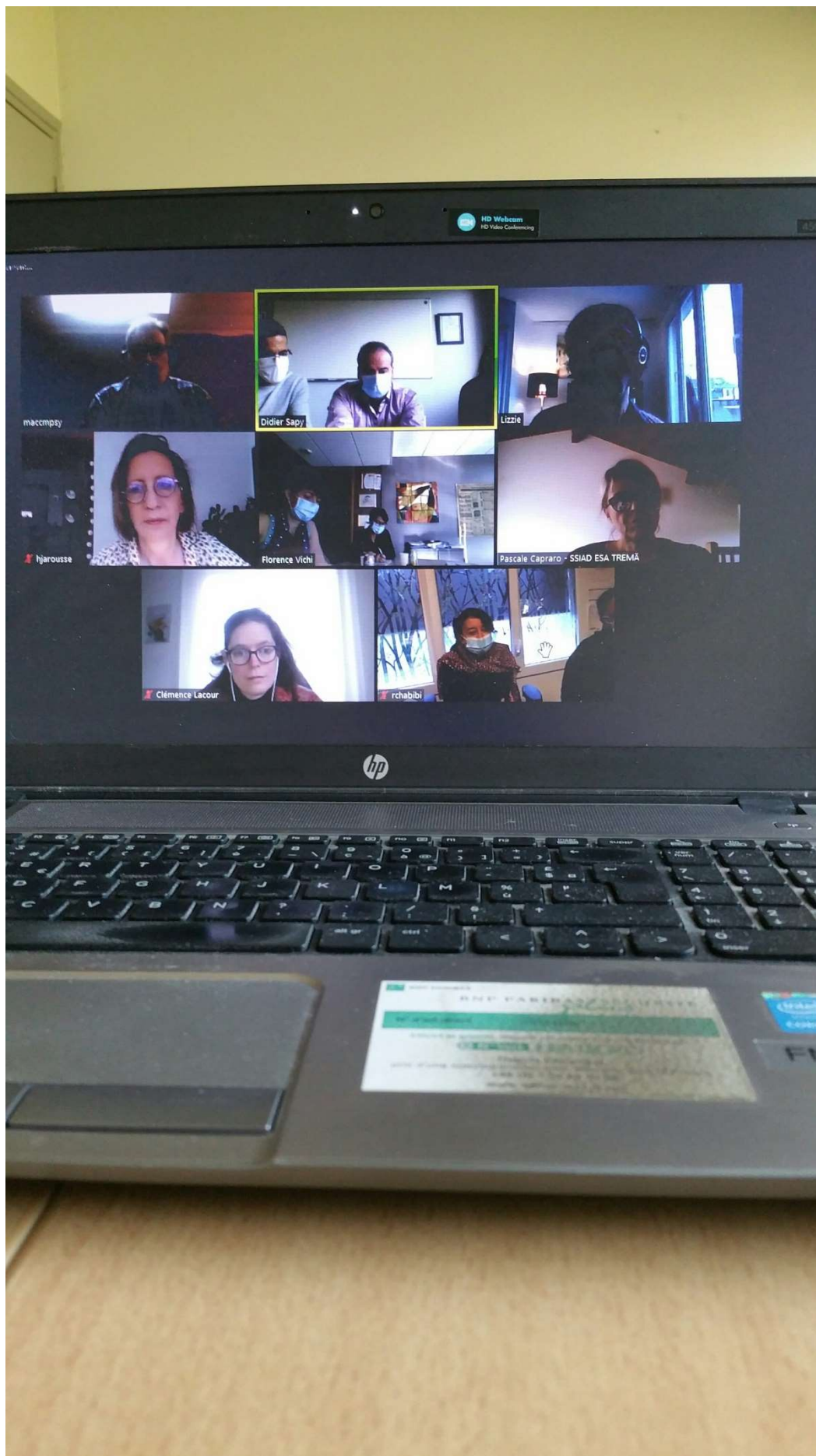
- Analyse between community life and individual approach
- Humor
- Communication strategy
- National tools introduced by the law
- Nevertheless it is very important to make the link between tools and institutional values. Beyond tools, values have to be thought in link with acts. In fact, it has to be a mark for workforce and has to give meaning to action for workforce (particularly facing the sanitary crisis).
- To be able to make the right evaluation / questioning between benefits / risks (particularly facing the sanitary crisis).

About the strategy

- To work on meaning and values
- To facilitate team building and collective reflexion
- To communicate

Agenda

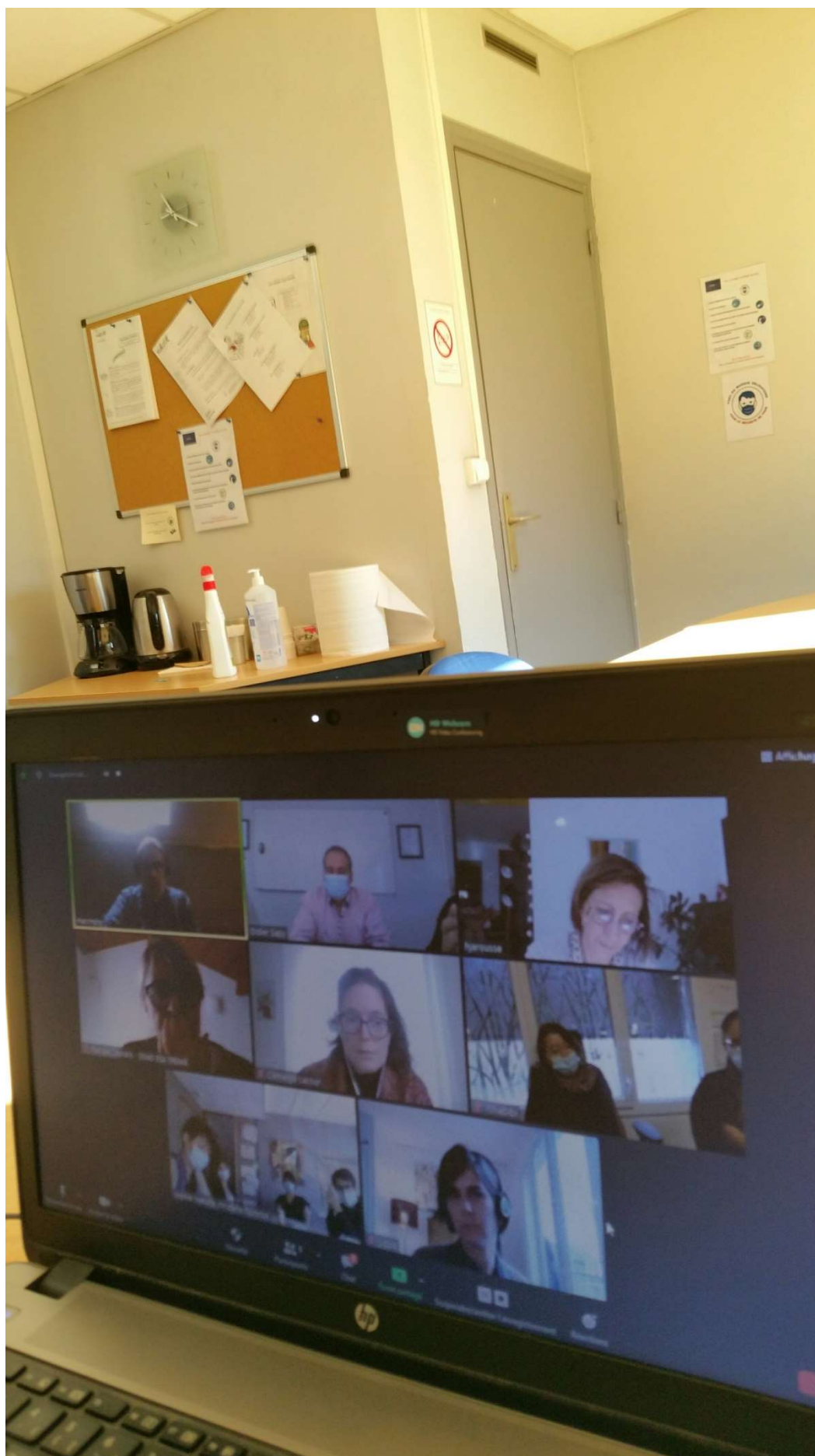
From now, each participant will think about the possible content of an ideal training program and send its contribution to FNAQPA by the end of November.



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