<u>Disciplining a Nursing Home Senior – May 19, 2005</u>

My father was in the Rocky Mountain House Continuing Care Facility where we had many issues of overdose, neglect, and abuse. He would be so overdosed with medication that it got to the point that he was unable to function. The pharmacist on the premises confirmed that he was in fact overdosed. We were persistent with his doctor and his medications were reduced. His quality of life did improve but the facility didn't like us asking questions, so we became targets.

One time my father was so constipated that you could actually smell the feces on his breath. I had to demand that he be given a fleet enema and told them that I would not leave until they had given him one. There were many other



issues but I will tell you of the one where we filed a complaint with the persons in care act. We arrived at the facility and found him in his room with the door closed, lights out and crying to us "mean,"

mean". He was confined to a huge oxygen tank with no oxygen going through. I asked why and was told that nobody knew why. I noted that his small portable tank was still on and that he was not hooked up to it. We filed a complaint to the persons in care act and an investigation was carried out. The recommendations read:

 That while both incidents occurred and the resident received harm in relation to the oxygen tank incident, the allegation of intentionally causing emotional harm be

- dismissed due to insufficient evidence of the intent to cause harm
- The facility would evaluate the effectiveness of the new communication method and that other alternate steps be taken, in consultation with the resident's family, to ensure effective and useful communication between the resident's family and staff.

The only thing that came out of this investigation was to scrutinize the family and the resident, not the staff that had caused the problem.

My father then moved into the Clearwater Center in March 2004. The Clearwater Center is a non-profit, Lutheran faith based organization, which is run by the Good Samaritan Society. We thought that it would be an excellent facility and our loved ones would finally receive the care they had so long been deprived of. However the chaos didn't disappear, it became worse.

One evening we came into the Clearwater Center to find my father not at the supper table. We immediately thought that something drastic had happened to him but we were told that he had been punished and taken to his room because he was a bad boy at the table. He had swore and spilt his milk. I then asked for another plate of food so I could feed him and was told that his supper was thrown out and that there was no more food. I told them that I would run uptown and get him something to eat, as he was not going to be left with no food for 20 hours. That would have been from 12 o'clock noon to 8 o'clock the next morning. Can you imagine - here is a person with dementia, requiring total care, being punished by not feeding him and putting him confinement?

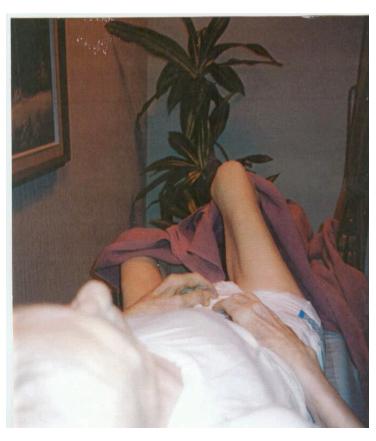
It was at this point that I decided to go feed my father twice a day, breakfast and supper. I filed a complaint with the Client Service Manager, who did an internal investigation with the staff on duty. Her investigation states the staff's actions are appropriate and a plan on my dad's behavior was written up. The focus once again became the resident and family not the facility. I have a copy of the investigation here with me today.

The facility would tell us that my father had eaten, but we were told by another resident that he was missing quite a few of his meals. They actually moved the other resident from my father's table and put them back to back so my father couldn't be seen by the other resident. When I asked the R.N. to monitor my father's eating habits so I could see them, she told me that they only document when the resident absolutely doesn't eat or drink for the whole day.

I witnessed on several occasions residents sitting with their food in front of them long after mealtime was over and a lot of the times their food was simply thrown out. The residents were not assisted and the staff appeared overwhelmed because there didn't seem to be enough of them to feed them.

Going into the facility twice a day made me a thorn in the Managers side and I became a target. Other residents would ask me to help them, take them to their room; they needed to go to the bathroom. Upon assisting them I'd find their bells tied to the bottom rail of their beds making it impossible for them to access them. I'd take their bells and put them where they could access them. Residents would be yelling to me "help me, help me" but no staff would come to help them. I eventually was reprimanded in a letter written by The Good Samaritan Society, David Thompson Health Region and the

Client Service Manager of which I have with me here today. It became so stressful for me seeing and watching this insane, inhuman abuse and neglect that I only came in the evenings to visit my father and would feed him as much as I could with food from home.



Because I was not his personal directive my sister notified was and ı received another letter from the Client Service Manager The and Samaritan Good Society; of which I have with me here today. I was told that I was too over possessive with my fathers care and was told by staff that I didn't have any authority over my

dad's care and that their hands were tied. I thought of it as love for my father and knew he had to have someone stand up and speak for him. This was Aug 9, 2004. From this time on my father started to loose weight rapidly and I saw him transform from a healthy, robust man into a frail, malnourished human being. I started taking pictures of his excessive weight loss and I have brought the pictures with me today.

The floor in his shower stall was so filthy that when I went to clean it the dead skin on the base of it was unbelievable. The dust and dirt under his bed, dresser and closet was so disgusting that you would have to see it to believe it. His garbage can in his room would sometimes be left unemptied for days at a time. We'd come in and find him in his room, sitting in the dark with the door closed crying. Because of his dementia he spoke very few words but did enjoy sitting and listening; the facility loved taking this away from him.

We find it difficult in believing that any Christian faith would agree with these practices, so we went and asked. We spoke to the Emmanuel Lutheran church in Rocky and were told by them that they believe in the scripture and do not agree with the policies of the Good Samaritan Society. They do not stand behind them.

During his final hours of life I noticed my father's mouth was full of yellow pussy sores, he had a fever and diarrhea. He had several bouts of thrush in the facility that I felt was due to neglect from them not keeping his hygiene up. When my family asked for a doctor to come and look at him we were told that no doctor would be coming to see him. The agony and pain he went through was extreme and unbearable until morphine was prescribed for him over the phone. My sister in law who also works at a continuing care facility in eastern Alberta could not believe the care that was given to him while he was dying. They would only come and reposition him when I would ask them to. Upon his death we never saw a physician or medical examiner come to pronounce his death. On his death certificate it states that he passed away because of the dementia.

They were crushing arthritis Tylenol 8 long acting tablets 2 at a time three times a day. I called several pharmacies about the crushing of this medication and was told by all of them that this medication should not be crushed and given to anyone, let alone the elderly.

When I contacted the pharmacy in Edmonton that supplied the medications to the Clearwater Center he also said the same thing until I told him why I was concerned, he then told me: how else are you to get this tablet into these people? They actually overdosed my father with this medication and I had to go get the doctor to come and identify the fact he was overdosed.

Family members and residents at the Clearwater Center tell me they are afraid to speak out about what is happening for fear of themselves and their loved ones care. Employees are being reprimanded for trying to speak out and are leaving their jobs because they know it is wrong. The families are told that their loved one can receive an extra bath if the family is willing to pay for it. There seems to be enough staff for this if they pay extra for them. The air circulation in the facility was faulty right after it opened and the Health Inspector from Rocky was notified, but the situation did not improve. Family members tell me that as of today this problem has not been fixed and residents continue to suffer when temperatures are hot outside.

I feel that our governments have let our seniors and elderly down. Health authorities are responsible for inspecting facilities, addressing deficiencies and dealing with complaints from families and their clients. Their prime directive is to balance their budgets and not the care of our frail seniors. We need a powerful health advocate that can receive

complaints and hold health authorities accountable. Family members need someone that they can confide in and not become a target. This is a huge issue throughout the whole province of Alberta and it is the people, like you and I, that must band together to put a stop to this outrageous abuse and neglect. I urge you to call or write letters to Premier Ralph Klein, Health Minister Iris Evans and your local MLA's to let them know that something must be done now about the abuse that is taking place as we speak toward our loved ones in continuing care and Designated Living facilities.

-Audrey Johnston Rocky Mountain House

May 19, 2005

