REMINDERS

POLICY TO COMBAT THE MISTREATMENT OF ELDERS AND ADULTS LIVING IN VULNERABLE SITUATIONS DEREIVED FROM ACT 6.3

Definition of Mistreatment according to Act 6.3: « Mistreatment is a single or repeated act, or a failure to take appropriate action, occurring in a relationship where there should be trust, and which causes harm or distress to a person, whether intentionally or not.».

SEVEN TYPES OF MISTREATMENT

- Physical mistreatment
- Sexual mistreatment
- Psychological mistreatment
- Material or financial mistreatment
- Ageism
- Organizational mistreatment
- Violation of rights

MANDATORY REPORTING

Under the Act, health and social services providers, as well as all professionals, are required to report to the Service Quality and Complaints Commissioner any situation where there are reasonable grounds to believe that mistreatment is occurring involving individuals in the following situations:

- Residents of private seniors' residences (RPA) who are in a vulnerable situation
- Users living in RI/RTF
- Persons deemed incapable following a medical assessment
- Persons under a protective supervision or representation measure



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WHO TO REPORT TO AND HOW

A reporting pathway for situations of mistreatment has been developed to support all witnesses in the reporting process, whether reporting is mandatory or voluntary.

Reminder: Key Steps in Managing Mistreatment Situations

- Identification of the situation
- Assessment of the person's needs and capacities
- Complaint or report
- Verification of facts
- Actions taken and follow-up





Concerted Intervention Process (CIP – Katujjiqatigiinnikkut)

The CIP is used when an intervenor suspects mistreatment, believes it may involve a criminal or penal offence, and determines that intersectoral collaboration is necessary to stop the situation.

➞Refer to the intervenors designated by your establishment.

POSSIBLE PENAL SANCTIONS

When a situation is reported, the MSSS has the authority to evaluate, inspect, and investigate the application of the Act. If warranted, penal sanctions may be imposed for:

- Section 21: Failure to report a case of mistreatment
- Section 21.1: Committing an act of mistreatment against a person in a CHSLD, RPA, RI, RTF, or at home
- Section 22.2: Threatening, intimidating, or retaliating against a person who files a complaint or report in good faith
- Section 22.8: Obstructing or attempting to obstruct an inspector or investigator
- **Note**: No person may be prosecuted for having, in good faith, filed a complaint, made a report, or cooperated in an investigation, regardless of the outcome

Fines range from:

- $2,000 to $125,000 for individuals
- $10,000 to $250,000 in other cases

CONSENT: A FUNDAMENTAL PRINCIPLE

Respecting consent is essential in all situations involving mistreatment. Depending on the circumstances, the mistreated person or their legal representative must be involved.

When care, interventions, or services are required, consent rules must be strictly applied. However, exceptions include:

- Mandatory reporting under the Act: Consent is sought when possible but is not required to proceed.
- Legal representative suspected of mistreatment: Special measures must be taken.
- Serious and urgent risk: If there is a serious risk of death or serious physical or psychological harm and an urgent situation exists, interventions may occur without consent.

In all cases, professionals must exercise sound judgment, document decisions, and ensure the rights and safety of the mistreated person remain central.

Resources available to the service provider

- Immediate supervisor or Clinical Activities Specialist (CAS)
- Designated service provider
- Adult and Elder Abuse Helpline (LAMAA): 1-888-489-ABUS (2287)
- Website: lignemaltraitance.ca (professional consultation)
- Service Quality and Complaints Commissioner (CPQS) of your institution

