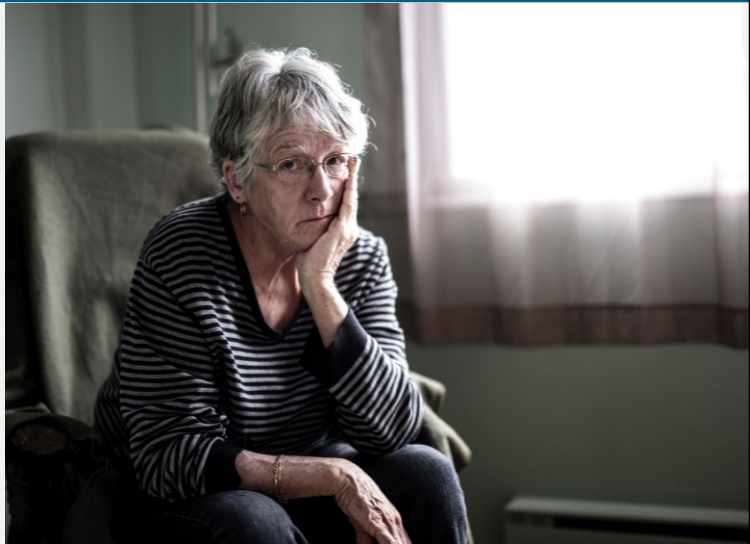


# Addressing Resident Complaints and Escalating Behaviors

**For Indirect Caregivers**

Provided by Wolters Kluwer

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## Disclosures

The planners have no financial relationships related to this educational activity.



## Instructions

**To obtain a certificate of earned contact hours for this continuing education activity:**

1. View the entire program.
2. Take the post-test. If you pass, you will be able to print your certificate of earned contact hours and an answer key. If you fail, you have the option of taking the test again at no additional cost. The passing grade is 70%.
3. Complete the evaluation form.



## Purpose

Residents and their family members who exhibit aggressive behavior pose challenges to staff and other residents. While there are many causes of aggressive behavior in residents, such as underlying medical, psychological, or social conditions, implementing staff education and training can reduce outbursts and complaints. The purpose of this course is to provide staff with education to enable them to handle these types of complaints through proactive interventions, learning what matters to escalate, and what matters require incident reports.

## Learning Objectives

After viewing this presentation and taking the post-test, you should be able to:

1. Identify signs of escalating behavior and how to intervene early to avoid or reduce complaints.
2. Identify environmental factors that can contribute to escalating behaviors and complaints.
3. Identify strategies for managing escalating behaviors and complaints.



## Angry Residents: What Do They Say?

- ☉ “I don’t like how you did this.”
- ☉ “You are too rough when you help me shower!”
- ☉ “I pay you a lot of money! Do what I say!”
- ☉ “I am going to report you for abuse!”
- ☉ “Do you even know what you are doing?”
- ☉ “Leave me alone! I don’t need your help!”



“I don’t like how you did this. I am going to report you to your supervisor!”

“You are too rough. I am going to report you for abuse!”

“I pay you a lot of money! You have to do what I say!”

“Do you even know what you are doing?”

“Leave me alone! I don’t need your help! I can take care of myself!”

These are angry statements made by residents. At one time or another, all staff members hear accusatory words, sometimes in a sarcastic, loud, or belligerent manner. Why are the residents so angry? Are they angry at you personally? When you hear angry comments or actions, it is important to identify the cause.



## What do Indirect Caregivers have to do With Resident Anger?

- ⊙ They are often the front-line workers
- ⊙ They should know how to maintain safety
- ⊙ They should be trained on anger management



What do indirect caregivers have to do with resident anger? They come into close contact with residents. Whether you are a housekeeper, a driver, a food service worker, or a guard, you may face resident anger. Any staff member may be on the front line when a resident has an outburst.

For safety, you should know how to handle these situations. Attend trainings on how to resolve conflict. Know how to deal with anger.

## Managing Angry Residents

- ⊙ Recognize anger before it grows out of control
- ⊙ Understand why some residents easily become angry
- ⊙ React appropriately
- ⊙ Respect residents at all times



A resident can direct their anger at an indirect caregiver just as they would to a direct caregiver.

Be able to recognize when a resident is becoming upset and angry. That is your first step in addressing the problem.

Residents who are new to long-term care are coping with the loss of their independence. They are nervous and anxious. Many may have dementia. They may be having side effects from medications.

All of these things put the resident at risk for strong emotions. These include anger and aggression. Learn to recognize anger before it grows out of control. Understand why some residents are easily angered. Then react appropriately. Respecting residents at all time is essential.

## What do you do when a Resident is Angry?

- ⊙ Make your first response count
- ⊙ Stay calm
- ⊙ Know policy and procedure



What do you do when a resident is angry? Your first reaction to an angry resident or family member is key. It can set the course of the entire exchange.

This first reaction can mean the difference between a good resolution and an escalation. Aim to be respectful. Respond to anger calmly.

There are actions you can take to manage these situations successfully. Your supervisors and your facility's policies should outline clear actions for you to take. They explain where to turn for support. They also give information on how to report events.

## Angry Residents: Why are they Angry?

- ⊙ Life changes
- ⊙ Medical conditions
- ⊙ Memory loss
- ⊙ Money problems
- ⊙ Loss of a family member or other loved one



All residents can become angry or upset at times. People often misplace their anger. As a result, it may surface suddenly. An ordinary situation may trigger an angry response due to underlying issues.

Moving into long-term care is a major life change. The stress can easily create anxiety and lead to emotional responses such as lashing out or anger. Many new residents face other stressors, such as the loss of a loved one or money problems.

Medical conditions such as urinary tract infections, joint pain, loss of hearing and vision may lead to confusion and behavioral changes. Some may have neurological changes, too. Memory problems and issues with impulse control can stem from a stroke. All of these can make residents more prone to anger.

## Other Reasons for Feelings of Anger

- ⊙ Social problems
- ⊙ Isolation
- ⊙ New living arrangements
- ⊙ Personality changes
- ⊙ Frustration
- ⊙ Loss of independence
- ⊙ Unable to make choices for themselves



Causes of anger can include social problems, anxiety, or feelings of isolation. They can include adjusting to new living arrangements.

Residents can have changes in personality. These can stem from many issues. They may come from side effects from medications. They may come from frustration. Physical impairments, such as loss of vision or hearing, can also lead to anger.

Most seniors are losing the ability to care for themselves. This can cause feelings of resentment toward those trying to assist. Residents may feel they have no say in their own care. They may feel that they cannot choose what they would like to wear, or to eat, or what time they go to bed. Allowing personal decisions can greatly reduce agitation and anger.

## How can Dementia Affect Anger?

- ⊙ It can cause difficulty understanding directions
- ⊙ It can cause difficulty understanding questions
- ⊙ It can cause difficulty understanding others' behavior



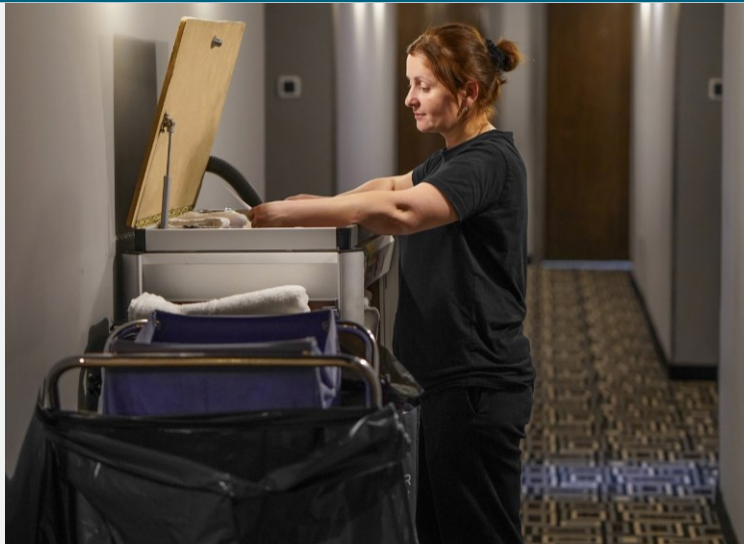
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Changes in cognitive or thinking abilities may cause residents to struggle. They may not be able to understand directions. They may not be able to understand and answer simple questions. They may be confused by what people do.

A resident may become angry or physically abusive for little apparent reason. A staff member entering their room to empty their trash may trigger anger. The staff member is doing their job. But the resident does not understand why a stranger has suddenly entered their room. They may believe they are in danger.

## Try These Strategies to Manage Misunderstandings

- ⦿ Acknowledge the resident
- ⦿ Introduce yourself
- ⦿ Explain your actions



When a staff member enters a resident's room, they should acknowledge the resident. Introduce yourself by name, even if you see the resident every day. Then explain why you need to come into the resident's room.

Here is an example of what you might say.

“Good morning, Mr. Smith. It's me, Sara. Can I come in to empty your trash can?”

This kind of explanation can help the resident understand what is happening.



## How do Cultural Differences Influence Resident Anger?

- ⊙ Lack of understanding of cultural differences can spark anger
- ⊙ Underlying biases may resurface with age
- ⊙ Past experiences may affect how a resident behaves
- ⊙ Residents may have fears relating to their own identity



Many seniors were born in an era when diversity was not the norm. Racist laws favored wealthy white people.

How does that cause anger today? Imagine a resident who grew up in a segregated town in the 1950s. Today, that resident may have a bias against a caregiver of color. Cultural prejudice learned early in life may be cause for anger in a resident.

Negative past experiences may also trigger an angry reaction. For example, a female resident with a history of sexual abuse may become frightened if a male staff member enters her room or touches her hand.

A growing number of residents in long-term care now identify as LGBTQ+. They may be afraid of bullying, and of not being accepted by others.



## Why is it Always the Food?

- ⊙ Allow residents to choose their food
- ⊙ Offer choices
- ⊙ Listen and respond with empathy



Food is one of the few things a resident feels they can still control. And food is important.

Control may look like a resident refusing to eat. They may send food back to the kitchen saying they don't like it or it isn't what they ordered. This can frustrate staff members trying to feed a large group of residents.

Offering menu choices at meals can allow the resident to maintain a sense of autonomy. Remember that if a resident sends his meal back, it is not a personal attack. Do not argue that they received the food they ordered, or that the food is fine. Listen and respond empathetically. Offering photo menus or "show plates" for the available choices may help residents.

## Reduce Feelings of Helplessness

- ⊙ Offer meaningful activities
- ⊙ Use resident's preferences, life experiences, and hobbies



All people feel helpless at times. Aging and entering long-term care are stressful. Residents who are bored can also feel agitated and generate anxiety. All of these emotions can lead to anger.

Activities can give residents a sense of purpose. Some seniors may enjoy walking or gentle exercise. Others may like crafting or art. Use the resident's life experiences and hobbies to find the best activities for them. In some cases, caregivers may need to modify an activity so the resident can participate.

## Risk Factors for Abusive Behavior

- ⊗ Impaired cognition
- ⊗ Pain
- ⊗ Depression
- ⊗ Environment
- ⊗ Medications



Abusive behavior does not always follow anger. But studies have found that impaired cognition almost always leads to abusive behavior. Often it is due to the senior's inability to communicate needs. Depression can also feed abuse.

The setting can play a role. Loud music, large groups, and crowded areas can create stress. Stressed residents may act out.

Residents who act irrationally may be feeling more than just anger. There may be an underlying medical reason. Urinary tract infections and unresolved pain can often be the cause for confusion and behavioral changes. The resident may also be feeling side effects from a medication. Always report unusual behavior to a nurse or doctor so a proper assessment can be done.

## Causes of Resident-to-Resident Aggression

- ⊙ Unwanted touching or crowding of personal space
- ⊙ Lack of room privacy
- ⊙ Interference with care
- ⊙ Arguments with roommates
- ⊙ Noise complaints
- ⊙ Cluttered environments



Many things can trigger anger and aggression in residents. The most common triggers include being in a crowded space or being touched by other residents. Noise coming from the TV or a noisy roommate can also be irritating.

People who enter the resident's room uninvited can cause anger. Touching personal belongings can also be a trigger. Both staff and residents can upset the resident. Remember, the room is the resident's home. They need to feel they have control over who enters it.

Arguments can take place over room temperature or noise. A difficult roommate who is confused or irritable can be upsetting. Group areas that are crowded, with people and objects, can cause frustration.

## Indirect Caregiver's Feelings can Interfere with Effective Response

- ⊙ Fear and anxiety
- ⊙ Personally attacked
- ⊙ Responsible for situation
- ⊙ Powerless and unprepared



It is important to know your own response to anger. Past experiences and current emotions impact your response. Try not to react with your own anger. Instead, try to understand that the resident is having a hard time. Always be respectful to the resident. Do not take their anger as a personal attack.

Stay calm. Give help to the resident. Try to de-escalate the situation. Work to redirect the resident.

You might feel like the resident's anger is your fault. This can prevent you from finding out what is really going on with the resident. Feeling unprepared and powerless may also prevent you from responding.

## Understand the Feeling and the Action

- ⊙ Feel misplaced anger?
  - Recognize it
- ⊙ Feel personally attacked?
  - Have self-confidence
- ⊙ Feel bad about yourself?
  - Understand resident stress
- ⊙ Get angry in return?
  - Respond with care and empathy



When anger makes you feel badly about yourself and the job you are doing, it is easy to overreact and get angry in return.

Do not let the angry resident get to you personally. Think about the resident's situation. Are they having a hard time? Remember that the resident may have anxiety and fear. They may take it out on others. Hard as it may be, you must stay calm. It takes self-confidence to put your anger aside. Respond with care and empathy. Then you can resolve the issue.

Know the signs before residents get angry. For example, you might notice that the room is noisy and a resident has started pacing. Point these changes out to your supervisor and ask for help.



## Consequences of Residents' Anger

- ⊙ Anxiety and fear
- ⊙ Avoidance by staff
- ⊙ Distress and disruption to the community
- ⊙ Overmedicating
- ⊙ Accusations of abuse or neglect



When staff do not manage anger effectively, both residents and staff may feel anxious. Staff may fear loss of control and feel guilty for lashing out.

Staff members may be frightened. They may be hesitant to interact with the resident. This adds to stress levels and results in less-than-optimal care. Sometimes treating the resident stress and anger can lead to overmedicating the resident.

Angry outbursts are distressing to other residents too. They disrupt the daily routine.

Anger aimed at other residents puts them at risk of emotional or physical injury. Unresolved anger can even lead to accusations of abuse and neglect against the staff.

## Know Warning Signs

- ⊙ Tense body language
- ⊙ Pacing
- ⊙ Clenched fists or jaw



Be alert to body language and other signs of anger. A resident may seem tense. They may pace back and forth. They may have clenched fists or a clenched jaw. Any of these signs can indicate building anger.

Any behavior that is unusual for the resident can signal that they might be having a problem. Try to understand what is going on around them and what might have triggered the anger.



## When Recognizing and Responding to Anger

- ⊗ Do not leave the angry resident unattended
- ⊗ Avoid touching
- ⊗ Stay calm
- ⊗ Listen
- ⊗ Be supportive
- ⊗ Be respectful
- ⊗ Try to fix the problem



When a resident is very angry, staff members must work to stay calm.

Do not avoid the resident who is becoming angry. Remember, this is not a personal attack on you. Residents can easily misinterpret your actions. So stay nearby, but avoid touching the resident.

Speak in a calm, steady tone. Allow the resident to talk about what is wrong. Even if they are yelling, listen to everything they say. Answer directly and honestly.

Acknowledge and validate the resident's feelings. Be respectful. Honest attempts to resolve problems may prevent the anger from rising to a crisis. If you can fix the problem, fix it.

## Other Actions for Helping an Angry Resident

- ⊙ Recognize the immediate concern
- ⊙ Don't respond with anger
- ⊙ Address the issue
- ⊙ Listen to the resident
- ⊙ Fix the problem if you can



A resident's complaint might be to a specific situation. Perhaps the room isn't clean enough. Maybe the light bulb went out, or the meal is cold, or the hallway is too crowded.

The problem may seem larger than it really is, and the resident may be overreacting. The resident may have other concerns or medical issues that are combining to make the situation worse.

The resident might be misplacing their anger, but the immediate concern is valid. Don't respond with anger to the angry feelings. Instead, remain calm. Remember that no concern is trivial. Listen to the resident and take care of the issue as best you can.

## More Actions for Helping an Angry Resident

- ⊙ If you cannot help, be honest about why
- ⊙ Listen with attention and eye contact
- ⊙ Find the answer or find someone who can help
- ⊙ Do not hesitate to ask for assistance



Sometimes it seems that there is nothing you can do to help an angry resident. You may feel helpless if a resident is screaming at you and you can't fix the problem. You are not helpless.

Avoiding the resident will only make them angrier. Engage the resident to let them explain why they are upset. Listen with attention and eye contact. It is okay to say you don't know the answer, or that you are unable to fix it.

Explain that you want to help and that you want to get them help. The important thing is to let the resident know you are trying. Notify your supervisor and get help.

## What do you do when Nothing Seems to Work?

- ⊙ If necessary, take a time out
- ⊙ Allow time and separation to help calm the situation
- ⊙ Do not leave the resident unattended



If necessary, take a time out to help calm the situation. If you do need to step away, make sure another staff member stays near the resident. A staff member needs to protect the safety of the angry resident and others in the area.

For example, you entered a resident's room. You said, "Hello." You explained why you were entering. But the resident didn't hear you. When you remove the resident's laundry, they get upset and yell that you are stealing their clothes. Even when you explain, they do not calm down. They accuse you of lying.

What should you do? Ask another employee to step in so you can leave the room. This can be the most effective way to de-escalate the situation.

## Safety First!

- ⊙ Protect staff and residents
- ⊙ Call for help
  - Follow policy
  - Use 911
- ⊙ Report all incidents in a timely manner
- ⊙ Document according to policy and procedure



Resident and staff safety is always the first priority.

A resident's anger or discomfort may escalate out of control. If there is any fear of physical harm, call for help. The resident could be yelling, hitting, running, hurting themselves, or hurting others. Get help before you approach.

Follow your facility's policies for alerting others. If necessary, call 911. Always report outbursts to the supervisor.

Make sure you fill out an incident report as soon as possible after the event. Your facility should also have clear policies and procedures for you to follow.

## Case Study 1: What is Happening?

- ⊙ Setting
- ⊙ Situation
- ⊙ Resident



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You are working in the dining room at breakfast. It is very busy, and several residents are trying to get your attention. Mr. Johnson is calling your name repeatedly. He recently returned from the hospital after a fall. Now he must use a wheelchair.

Mr. Johnson slams his fist on the table and yells, “What is the matter with this place? Why is it so hard to get good help these days?”

You are taking a food order at a nearby table and look over at Mr. Johnson. He yells out, “Yeah, I’m talking about you!”

You become embarrassed. You feel yourself getting angry that he thinks it is okay to speak to you this way.

## Case Study 1: Taking Action

- ⊙ Stay calm
- ⊙ Don't take it personally
- ⊙ Maintain neutral body language
- ⊙ Respond with empathy



Take a deep breath. Remember he is angry about the situation and not with you personally.

Excuse yourself from the resident you are currently assisting. Approach Mr. Johnson in a calm manner. Use neutral body language—do not fold your arms or put your hands on your hips.

Acknowledge that Mr. Johnson is upset and ask how you can assist him. “Hello, Mr. Johnson. I see you are upset. How can I help?”

Mr. Johnson looks up and says, “Oh, now you want to help? I have been sitting here for an hour and my food is cold!”

Remember to be empathetic. It can be hard to do so when the resident is directing their anger toward you.



### Case Study 1: Resolving the Anger

- ⊙ Acknowledge the reason for his anger
- ⊙ Address obvious complaint
- ⊙ Include solution for underlying issue



You remember that before he went to the hospital, Mr. Johnson walked on his own and was more independent. Although Mr. Johnson is saying he is upset about his food, he may really be afraid of losing his independence.

You say, “Mr. Johnson, I am sorry your food is cold. I can bring it back to the kitchen to warm up or get you something else instead. Can I bring you a menu?”

You have acknowledged Mr. Johnson’s emotions and provided a solution for his direct complaint. You also gave him a choice by offering the menu, addressing the underlying concern of loss of independence.



## Case Study 2: What is Happening?

- ⊙ Setting
- ⊙ Situation
- ⊙ Resident



You are a housekeeper in the memory care unit where Ms. Connors lives. She is in the hallway, and you approach her to see if she needs help.

Ms. Connors seems agitated when you get closer. She yells, “Get away from me! Don’t touch me! I am going home! My children need me! They are so little!”

## Case Study 2: Taking Action

- ⊙ Stay calm
- ⊙ Don't take it personally
- ⊙ Maintain neutral body language
- ⊙ Respond with empathy



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You remember from your trainings that it is important not to correct a resident with dementia. You know that you should not remind Ms. Conners that her children are all grown. Instead you should try to redirect her. You also remember that it is important not to touch the resident who is agitated, because they can misinterpret your actions.

You say to the resident, “Hi, Ms. Conners. I know you want to get home to your children. What are their names?”

## Case Study 2: Resolving the Anger

- ⊙ Redirect her behavior
- ⊙ Engage in reminiscing
- ⊙ Provide a solution



You redirect Ms. Connors back to her room. You have her sit down, and you bring over photos of her children. She tells you their names and explains that when they come home from school, she likes to be waiting for them with a snack.

She then says, “If they come home and I am not there, what will they do?”

Thinking of how you could redirect her, you say, “We have some time. Shall we make them a snack?”

Ms. Connors responds that her children love homemade cookies.

“Let’s go bake some cookies!” you respond. Ms. Connors smiles. She is no longer agitated, nor asking to leave. You accompany Ms. Connors to the community kitchen to gather the ingredients.

## Case Study Recaps: What went Right?

- ⊙ A calm approach
- ⊙ Effective body language
- ⊙ Listening to the resident
- ⊙ Looking for the underlying cause of anger
- ⊙ Expressing empathy in responses



In both of these case studies, you navigated the residents' anger and helped calm them. You did not take the anger personally, even when it was directed toward you. As a result, you were able to listen to the resident and find the underlying cause of the anger.

In the first case study, the resident feared the loss of independence. In the second case study, the resident was worried about things from her past. Due to her dementia, she thought they were happening in the present.

It is important to approach each of these situations differently. Remember, each resident is unique. What works for one may not work for another.

## Understand the Anger

- ⊙ Stay in control
- ⊙ Try to identify the problem
- ⊙ Don't avoid the resident
- ⊙ Assure safety first



When indirect caregivers do not manage anger effectively, residents may feel anxious. They may fear loss of control. They may feel guilty for lashing out.

Staff members may be frightened. They may be hesitant to care for the resident. This adds to stress levels and results in less-than-optimal care. Sometimes treating the stress and anger can lead to overmedicating the resident.

Angry outbursts are distressing to other residents too. They disrupt the daily routine.

Anger aimed at other residents puts them at risk of emotional or physical injury. Unresolved anger can even lead to accusations of abuse and neglect against the staff.

## Summary

- ⊙ Take charge of your own response
- ⊙ Remain in control
- ⊙ Try to understand why a resident is reacting
- ⊙ Show empathy
- ⊙ Recognize the stress
- ⊙ Respond in a meaningful way



The first and best thing you can do when you encounter an angry resident is to take charge of your own angry response.

When you don't take things personally, you can maintain control of the situation. Staying in control is less stressful and allows for a professional response. If you lose control, the situation will remain out of control.

Residents express frustration in many ways. Quite often they express this anger toward staff. You show empathy when you look at the whole person. Recognize their stress, and respond in a meaningful and productive way.

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