The Hong Kong Council of Social Service Seminar on Risk Management

The Management of Safety Issues in Residential Setting





Safety Dimensions in Residential Setting

- 1. Individual Safety Issues
- 2. Physical Setting
- 3. Group Living
- 4. Intruders / Batterers
- 5. Documentation







Belief

All people have the right to live with dignity & respect and to be free from violence, abuse and coercion.

Objectives of the Shelter



- Provide an immediate and safe refuge for female victims of domestic violence.
- Offer 24-hour immediate support and referrals for people affected by domestic violence.
- Empower abused women to restore their dignity and self-esteem, and rebuild a harmonious life.
- Protect and address needs of children who witness domestic violence.

Services of the Shelter (Since 1985)



- Short-Term Accommodation:
 - 2 weeks to a maximum of 3 months
- 24-hour Crisis Intervention and Counseling Hotline
- Hotline Follow Up:

Ensure non-admitted callers' safety and arrange referrals if necessary.

Services



Case Counseling:

Interview by social worker within 36 hours after admission

- Therapeutic Groups for women and children
- Educational Programs and Recreational Activities

Services



- After Care Services:
 - 3-month follow-up by the case worker
- Collaboration and Outreaching Services (Since 2005):

Reach out to adolescents, low-income highrisk families and ethnic minorities.

Statistics of the Shelter



(Capacity: 40)

2006 (Jan. to Dec.)	
Total no. of New and Re-admitted Cases	411
Daily Attendance (%)	98%
Hotline Follow Up Cases	43
Total no. of Service Calls	11119
Total no. of Rejected Cases due to	1018
Full Capacity	

1) Individual Safety Issues



24-hour Hotline

Hotline Log:

- Location of the caller
- Safety
- Violent incident
- Past abused history
- Social network
- Provide information related to community resources
- Admission or referrals
- Follow up services





- Risk Assessment: low, middle & high level
- Suicidal Assessment
- To assess victim's emotion, stress level, cognitive and behavioral status
- Victims in this stage may be confused. It is important to enhance their awareness of safety issues and assist them to make safety plans.





Case counseling and therapeutic groups

Domestic violence leads to significant impact on abused women and their children.

Physical injury, depression, anxiety and PTSD to their low self-esteem.



Case Counseling

- On-going risk assessment
- Healing of psychological effects of domestic violence
- Empowerment of the abused woman to make choices
- Introduce social services
- Make referrals, such as CSSA, Legal Aid, FSPSU.

Case Sharing 1: Suicidal Client

Background



- Madam Chan, immigrated from China with daughter (6 yrs. old) for 3 years.
- Husband was unemployed, under CSSA, and with drinking problem.
- Husband was controlling, extremely jealous.
- After drinking, husband always in a temper tantrum and use violence against client
- Client and her daughter were referred by the police and admitted to the Shelter after being beaten by husband

Incident



- Client had a lot of stresses due to financial difficulties.
- Application for CSSA, though FCPSU. During the interview with the unit, she became very agitated and ran away.
- When return to the Shelter, she locked herself up in her room. 5 minutes later a resident informed the office that she was attempting suicide.
- 3 staff (superior, case worker, and staff with first aid training) ran to her room and opened the door with spare key. It was found that Chan's hand was injured with 8 wounds, a knife was on the floor, two bottles of pills beside her and suicidal note.

Intervention



- 1. Staff called the ambulance and performed first aid at the same time.
- 2. One worker comforted Chan's daughter and brought her to the office.
- 3. Another worker accompanied Chan to the hospital.
- 4. Informed FCPSU.
- 5. Brought daughter to visit her mother every day in the hospital.
- 6. Provided both Chan and daughter with emotional support.







- Teamwork is essential.
- Important to keep close contact with FCPSU, especially when dealing with client's psychological needs.
- On-going risk assessment
- Nurture parent-child relationship.
- Work on concrete tasks to build up client's coping abilities.

Case Sharing 2: Depressed Client



Background

- Madam Lee, immigrated from China 2 years ago. She came to Hong Kong for family reunion with husband and son (7yrs. old).
- It was her second marriage. Her 1st-husband deserted the family and present husband has EMA.
- Lee was physically and sexually abused by husband.
- Under the threats from the husband, Lee agreed to give her husband custody of the son.
- Lee was beaten by her husband on the street and was admitted to the Shelter.

Incident



- Lee was depressed and emotionally unstable.
- She had no friends and had adjustment problem and conflict with residents.
- Relationship with the case worker was not satisfactory, unwilling to be engaged.
- Lee also didn't respond to FU's calls.
- Regularly sent phone message to husband.

Intervention



- 1. Although Lee refused to talk, the case worker was very patient and gradually building trust.
- 2. Persuade Client to seek medical advice.
- 3. Encouraged and escorted client for psychiatric assessment.
- 4. Ensure client took medication.
- 5. All staff encouraged her to participate in routine activities, social groups and gave a lot of encouragement





Insights

- Psychological assessment treatment complement work at shelter.
- Daily routine and exercises help stabilize emotion and raise spirits.
- Social skills programs
- Liaison between duty staff and case worker ,help provide comprehensive care.
- Team work again is important.

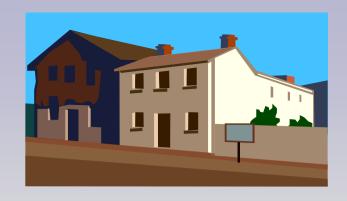




2) Physical Setting

Stifety is the primary concern!

- From the outside the Shelter is unrecognizable.
- Controlled access
- CCTV for surveillance
- Alarm system





Confidentiality

- Guidelines for escorting new residents to the Shelter
- Staff recruitment and orientation
- Management of Shelter's phone no.
- Confidentially agreement with residents, staff and visitors: address, location, appearance and neighbourhood.
- Designated officers of the Police and Fire Services Department

Home Life Setting



- Daily necessities: shampoo, tooth-brush, tooth-paste, rice, canned food, milk powder, diapers, clothing, bedding, crib
- Common area: shared living room decorated to provide relax "homely" environment
- Leisure: residents get together to read newspapers, watch TV, movies or chat.
- Playroom: toys and child case services
- Kitchen: prepare meals for themselves, also a way for residents to increase their independence

3) Group Living Routine Schedules



- Children award system: reinforce positive social behaviors in the Shelter
- Sharing of responsibilities among women
- Children Tutorial Class Women and Children House Meeting
- Educational programs & activities: Legal.





Routine Schedules

- Ex-resident sharing session
- Community resources visits
- Birthday party
- Festivities
- Women and children therapeutic groups

Conflict



Conflict is inevitable.

Conflict develops because we are dealing with people's different life background, values and interests.

Although conflict is inevitable, it can be minimized, diverted and / or resolved.

Conflict also is an indicator of service needs.

Conflict Management



- Trustful staff-resident relationship
- Frequent communication
- Carefully planned house rules
- Review and evaluation
- Informal interaction
- Mutual support among residents

4) Handling Safety Issues related to Intruders / Batterers



Outdoors Activities

- Escort the woman to safe place, away from the batterer.
- Assist other participants to return to the Shelter
- Call police if necessary
- Refer the woman to other shelter if necessary
- Report to supervisor and file in critical incident report.

Intruders in Shelter

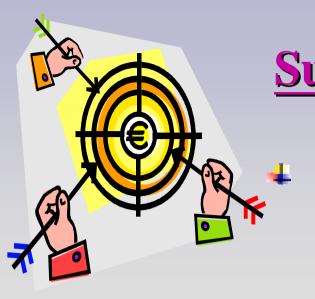


- Inform all residents immediately.
- 2. Remind residents to stay in their rooms.
- 3. Inform residents who are not in the Shelter to implement safety plans.
- Contact property management office or call police if necessary.
- 5. Refer the woman and her children to other shelter if necessary.
- 6. Report to the supervisor and file in critical incident report.

Support to Staff



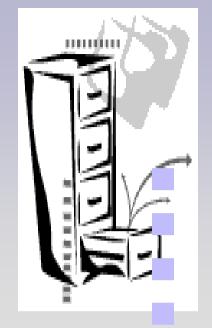
- Detail orientation program for all staff.
- Different social workers for abused woman and batterer.
- Provide staff with resources, information and consultation, regular in-service training, case sharing.
- Develop guidelines and standards for immediate and consistent responses to domestic violence, at all levels of service operations, Shelter Standards and Protocol, SQS standards, etc.



Support to Staff



- To foster a multi-disciplinary intervention, through partnerships with internal units, outside service providers and law enforcement agencies.
- Assess the effectiveness of the program through clients' feedback and regular survey of clients' needs and comments.



5) Documentation



「和諧之家」安全政策 熱線記錄表 家庭暴力危機評估表 受虐者自我保護評估表

自殺危機評估表

嚴重/緊急事故:處理指引、紀錄表

緊急及非緊急聯絡電話資料

户外活動:一般指引、緊急應變措施、交通安全備忘、參加者走失處理指引

特别天氣:熱帶氣旋、暴雨、雷暴、惡

劣天氣工作指引

防火設備:操作指引、火警處理、逃生圖、演習紀錄表、檢查記錄表及証書

HAMASSINE HIGHAN

急救箱用品清單、定期檢查紀錄表

宿舍前後門、窗及水電掣關閉紀錄表

宿舍衛生指引、清潔紀錄表

宿舍一般設備操作指引、檢查及維修紀錄表

電器安全操作指引、檢查及維修紀錄表

爐具檢查、保養及維修紀錄表

電器維修聯絡資料表

婦女清潔分工準則及記錄表

兒童獎勵計劃及星星表



- Mutual Understanding: staff client, staff staff, staff supervisor
- Multidisciplinary Co-operation

Thanks!



- End -