

Identifying and Handling Abuse/Neglect

**For NKCH Employees, Clinical
Staff & Management**

Knowledge & Patient Abuse Policy

- It is very important that all NKCH employees be able to:
 - Identify potential or actual patient abuse, neglect, exploitation, or abandonment, and
 - Know how to report/follow up with these potential cases.
- Any possible case of abuse, neglect or exploitation should be reported immediately.
- We should all be familiar with and use the same definitions of abuse, neglect, exploitation and abandonment when identifying a potential problem.
- Per Missouri law, **YOU ARE A MANDATED REPORTER** and are required to report suspected abuse.
- NKCH has a detailed policy/procedure on the intranet:
 “Patient Abuse, Neglect, Exploitation, and/or Abandonment”

Who is at risk? Child/Eligible Adult

CHILD: is any person, regardless of physical or mental condition, under eighteen years of age.

ELIGIBLE ADULT is a person:

- 60 years of age or older who is unable to protect his/her own interests or adequately perform or obtain services which are necessary to meet his/her essential human needs or
- Between 18 and 59 years old, with a disability (a mental or physical impairment that substantially limits one or more major life activities) and who is unable to protect his/her own interests or adequately perform or obtain services which are necessary to meet his/her essential human needs.

Definitions

Abuse:

- Infliction of physical, sexual or emotional injury or harm including financial exploitation by any person, firm or corporation. Also included are victims of sex trafficking or severe forms of trafficking.
 - For eligible adults, abuse includes bullying which is defined as “intimidation or harassment that causes a reasonable person to fear for his or her physical safety or property and may consist of physical actions including gestures; cyber-bullying; oral, electronic, or written communication; and any threat of retaliation for reporting such acts”
 - Note: For children, discipline, including spanking, administered in a reasonable manner, shall not be considered “abuse”.

Neglect:

- Failure to provide services to an any person, firm or corporation with a legal or contractual duty to do so, when such failure presents either an imminent danger to the health, safety, or welfare of the client or a substantial probability that death or serious physical harm would result, or
- failure to provide to a child the care, custody and control, the property or necessary support, education, nutrition or medical, surgical or any other care necessary for the child’s well-being.

Types of Abuse

- **Physical abuse:** is the use of physical force that may result in bodily injury, physical pain or impairment
- **Sexual abuse:** non-consensual sexual conduct of any kind
- **Emotional abuse:** is the infliction of anguish, pain or distress through verbal or nonverbal acts
- **Financial abuse:** the illegal or improper use of an individual's funds, property, or assets
- **Neglect:** is the failure to fulfill any part of a person's obligations or duties to an individual
- **Abandonment:** is the desertion of a person/child by an individual who has assumed responsibility for providing care to that individual, or by a person with physical custody of a person/child

Warning Signs of Physical Abuse

- Unexplained bruises
- Repeated falls
- Lab and injuries inconsistent with history
- Fractures or bruises in various stages of healing (multiple)
- Unusual injury or pattern of injury
- Unbelievable/inconsistent story
- Unusual behavior

Warning Signs of Neglect

- Listlessness
- Poor hygiene
- Evidence of malnutrition
- Inappropriate dress
- Bed sores
- Urine burns
- Reports of being left in an unsafe or unsanitary situation
- Reports of inability to get needed medication/food
- Not keeping medical appointments
- Inability to manage personal finances
- Poor hygiene
- Changes in intellectual functions
- Inadequate housing or homeless

Warning Signs of Financial Exploitation

This involves unauthorized use of a person's funds or property, either by a caregiver or an outside party.

- Significant withdrawals from financial accounts
- Sudden changes in the individual's financial condition
- Items or cash missing from the individual's household
- Suspicious changes in wills, power of attorney, titles, and policies
- Unpaid bills or lack of medical care, although the individual states having enough money to pay for them
- Financial activity the individual couldn't have done, such as an ATM withdrawal when the account holder is bedridden
- Unnecessary purchase of services, goods, or subscriptions

Common Perpetrators

- Adult Children
- Parents
- Other relatives (grandchildren, nephews, etc.)
- Spouses/partners
- Friends/neighbors
- Strangers
- DPOA/Guardians
- Patient Caregivers (home health aides, in home service workers, hospice workers, adult day care staff, hospitals)

Responsibility of ALL Employees

- If a patient reports a potential or actual incident of abuse, neglect, exploitation and/or abandonment, while under the care of NKCH, staff will report the situation immediately to the director of the patient's unit or Director of Clinical Operations on weekends and nights.
- If a patient has been discharged but, communicates to you verbally or in writing of a potential or actual abuse, neglect, exploitation and/or abandonment, report the situation to your Director.
- If a patient expresses concern about potential or actual abuse/neglect by an NKCH employee or medical staff member, you must **immediately** report this information to your Director.
- If you see another employee abusing or neglecting a patient you are responsible for reporting this to your Director.

Responsibility of Clinical Employees

- If a patient reports a potential or actual incident of abuse, neglect, exploitation and/or abandonment, staff will **report the situation immediately** to the director of patient's unit or Director of Clinical Operations on weekends and nights.
- **Review previous assessments** of this patient during this encounter to see if these signs have been charted. If so, have they been addressed?
- If no report has been previously made, it is important to **document any signs or symptoms** noted.
- Chart your assessment/observations in the appropriate documentation forms for your discipline.
- **All reports and screening should be done as soon as possible.**

Process for Reporting Suspicions of Abuse/Neglect

- If any member of the care team suspects potential or actual abuse/neglect or abandonment of a child, regardless of the source of the abuse/neglect, the **Missouri Department of Social Services must be contacted immediately**, or in any event, prior to the initiation of an internal investigation.
- The Director of Clinical Operations will **call in the hotline** to the appropriate agency and complete the report as instructed by hotline intake worker.

– For adults, call:



– For children, call: Call the child abuse and neglect hotline at **1-800-392-3738** IMMEDIATELY if child abuse or neglect is suspected.

If you need assistance making the call or have questions contact the Case Management Department for assistance.

Process for Addressing Suspicions of Abuse/Neglect by an NKCH Employee



- If a patient expresses concern about potential or actual abuse/neglect by a hospital team member, after being notified, the Director of Clinical Operations will begin the patient grievance process by **filling out an SEO** providing the basic information (name, date, time and brief description).
- The director or Director of Clinical Operations will immediately **begin the screening process** for abuse/neglect using the screening tool. If the screening tool indicates a reportable incident, the director will **make the hotline report**, notify Security and **secure the safety of the patient**.

Process for Addressing Suspicions of Abuse/Neglect by an NKCH Employee



- If the alleged abuse occurred in a department other than the department where the patient is located, the unit director will **notify the director of that department who will continue the investigation.**
- The director of the department where the abuse occurred will immediately report results of screening to his/her **Director or VP who will initiate a full investigation.**
- The **alleged abuser will be removed from patient contact,** security will be notified and security will interview the patient and alleged abuser and document on an investigative report.