THE ABUSED PATIENT

CHILD ABUSE/NEGLECT ELDER ABUSE/NEGLECT DOMESTIC VIOLANCE & RAPE

Prepared by: Johnnie Davis, RN BSN, MBA-HCM
OBJECTIVES

- Define Standard Knowledge
- Discuss Mandatory Reporting
- Define Child Abuse/Neglect, Elder Abuse/Neglect, Domestic Violence & Rape
- Discuss how to report
STANDARD KNOWLEDGE

If there is reason to believe that abuse or neglect has or may occurred report the abuse.
MANDATED REPORTING

Health care personnel are mandatory reporters of suspected abuse/neglect

- SC Section 63-7-610, Persons Required to Report
- Tennessee Code Annotated 37-1-403(i) (1)
  - Suspicions of abuse & neglect MUST be reported to the state Department of Social Services
  - Reports must be filed, even if another entity will also be reporting the incident – you need a verbal report and a written report
  - Includes both living & deceased persons encountered by healthcare personnel
CHILD ABUSE- Physical:

**Description**
Physical Injury caused by punching, beating, kicking, biting, burning, or otherwise harming a child.

**Indicators:**
Unexplained bruises, welts, burns, fractures, lacerations or abrasions inconsistent with medical findings and/ or frequent injuries that are accidental.
CHILD ABUSE- Sexual:

**Description**
Unwanted sexual activity, with perpetrators using force, making threats or taking advantage of victims not able to give consent. Most victims and perpetrators know each other.

**Indicators:**
Bruises or bleeding in external genitalia, vaginal or anal areas, venereal diseases and pregnancy.
CHILD NEGLECT

Description
Failure to provide for the child’s basic needs. Neglect can be physical, educational, and/or emotional.

Indicators;
Consistent hunger, failure to thrive, child lags in development, poor Hygiene, and inappropriate dress.
How to Handle Suspected Cases of Child Abuse

- Treat the victim apart from the suspected abuser if possible.
- Document exactly what you see and hear.
- Contact the appropriate state or county agency.
- Keep your emotions in check. It can be very difficult to care for a victim of suspected abuse, particularly if the abuser is in the next room. This is one of those times when you need to push your personal feelings deep down while you attend to the details. Act polished and professional; later, take some time to debrief with a coworker.
How do I report child abuse?

Contact your local child protective services office.

**Tennessee**
To report abuse or neglect: 1.877.237.0004

**South Carolina**
To report abuse or neglect: 1-803-898-7601

Child Abuse Hotline (National) (800) 422-4453
ELDER ABUSE/NEGLECT

- Occurs in all racial, ethnic and economic groups

- Can occur in the home by someone with a special relationship with the elder (e.g. spouse, child, friend or caregiver)

- Can occur in the hospital, nursing home, group or foster homes
ELDER ABUSE- Physical

Description
Force against the elderly resulting in bodily injury, physical pain or impairment.

Indicators:
Bruises, welts, or scars, especially if they appear symmetrically on two side of the body, broken bones, sprains, or dislocations, signs of being restrained, such as rope marks on wrists, and caregiver’s refusal to allow you to see the elder alone.
ELDER ABUSE- Emotional

Description
Infliction of pain through verbal or nonverbal act.

Indicators:
Behavior from the elder that mimics dementia, such as rocking, sucking, or mumbling to oneself. Controlling caregiver behavior that you witness.
ELDER NEGLECT

Description
Failure to provide basic needs such as food, water, clothing, shelter, medicine, personal safety and homecare.

Indicators:
Unusual weight loss, malnutrition, dehydration, bed sores, being left dirty or unbathed, report of unsafe living condition (no heat, water, fire hazards), unsuitable clothing for the weather, and desertion of the elder at a public place.
ELDER - Financial Exploitation

**Description**

Occurs when family members or caregivers take control of elders financial resources either through misrepresentation, coercion or theft.

**Indicators:**

Unpaid bills or lack of medical care, although the elder has enough money to pay for them. Financial activity the senior couldn’t have done, because they are unable to get out of the house.
How do I report elder abuse?

The first agency to respond to a report of elderly abuse is usually Adult Protective Services (APS). Its role is to investigate abuse cases, intervene, and offer services and advice.

**Tennessee**
Report Abuse and Neglect:
Toll Free **1-888-APS-TENN (1-888-277-8366)**

**South Carolina**
Report Abuse and Neglect:
(803) 898-7318
How to Handle Suspected Cases of Elder Abuse/ Neglect

- Treat the victim apart from the suspected abuser if possible.
- Document exactly what you see and hear.
- Contact the appropriate state or county agency.
- Keep your emotions in check. It can be very difficult to care for a victim of suspected abuse, particularly if the abuser is in the next room. This is one of those times when you need to push your personal feelings deep down while you attend to the details. Act polished and professional; later, take some time to debrief with a coworker.
Domestic Violence and Rape

Not Mandatory to Report
DOMESTIC VIOLENCE

- Basic needs to feel safe and secure is often threatened for victims of domestic violence.

- The single major cause of injury to women, more significant than auto accidents, rapes and other assaults combined.
DOMESTIC VIOLENCE- Signs

Here are some signs to watch for:

• **Bruises** or injuries that look like they came from choking, punching, or being thrown down. Black **eyes**, red or purple marks at the neck, and sprained wrists are common injuries in violent **relationships**.

• Attempting to hide bruises with **makeup** or clothing

• Making excuses like tripping or being accident-prone or clumsy. Often the seriousness of the injury does not match up with the explanation.
DOMESTIC VIOLENCE - Signs

- Having few close friends and being isolated from relatives and coworkers and kept from making friends
- Having to ask permission to meet, talk with, or do things with other people
- Having low self-esteem; being extremely apologetic and meek
- Having symptoms of depression, such as sadness or hopelessness, or loss of interest in daily activities
- Talking about suicide, attempting suicide, or showing other warning signs of suicide.
DOMESTIC VIOLENCE-How to Handle

- Be non-judgmental and non-threatening
- Respect and take the patient seriously
- Maintain privacy
- The patient should be interviewed and examined alone (away from family/others)
- Questions should be asked when household members are not within hearing distance
- The patient must be asked directly if their injuries are a result of a beating
- Have a high index of suspicion; battered persons rarely admit the source of their injury
SEXUAL ASSAULT

Characteristics of sexual assault/rape victims:

- Nightmares
- Restlessness
- Withdrawal tendencies
- Hostility
- Phobias related to offender
- Regressive behavior, such as bed wetting
- Truancy
- Promiscuity, in older children & teens
- Drug & alcohol abuse
RAPE- SEXUAL ASSAULT

- Definition sexual assault
  - To knowingly cause another person to engage in unwanted sexual act by force or threat; a statutory crime

- Definition rape
  - The crime of forcing a person to submit to sexual intercourse against their will

- Rape is referred to as a sexual assault
SEXUAL ASSAULT

Healthcare worker responsibilities:

- Provide a safe environment
- Psychosocial care (i.e. – privacy, same-sex caregiver)
- Use open-ended questions to reestablish a sense of control
- Remain non-judgmental; encourage patient to report the crime explaining importance of preserving evidence
Handling RAPE- Sexual Assault

- As a rule, victims should be questioned in private
- Approach victim calmly & professionally
- Respect the victim’s modesty
- Explain all procedures before beginning
- Avoid touching pt other than taking VS or examining physical injuries
- **DO NOT** examine genitalia unless life threatening hemorrhage
Handling RAPE- Sexual Assault

- Allow victims to be treated by same gender if at all possible
- Preserve physical evidence
- Handle clothing as little as possible
- Do not use plastic bags for blood stained articles
- Bag each item separately in paper bags
- Discourage victim from combing hair, bathing, or changing clothes
 Handling RAPE- Sexual Assault

- Do not clean wounds if at all possible
- Provide emotional support with a non-judgmental attitude
- Note: Physical trauma, such as bruising, lacerations and fractures are often associated with sexual assault and may be life-threatening
DOCUMENTATION

- Be timely
- Be objective
  - If you did not witness the event, then state who supplied the history (i.e.: “Patient states…”)
- Be descriptive
  - List color of bruises – indicates age of bruise
  - Write length of lacerations (avoid “small”, “large”)
- Be accurate
  - These cases often go to court
Handling Domestic Violence and Rape

Provide the patient with a number to speak with a trained counselor or ask the patient if they would like you to make the call for them to speak with a counselor. If the patient ask for authorities to be called then make the call. The main concern should be for the safety of the patient.

Patient Support:
- Call the National Domestic Violence Hotline Support, resources and advice for help 1-800-799-SAFE (7233)

- National Sexual Assault Hotline 1.800.656.HOPE (4673) Free. Confidential. 24/7.
Competency Exam

Continue to Step 2 and take the comprehensive exam. You must pass with a score of 80 or better. After you have successfully completed the exam, print the certificate of training and present to the center manager for your training file.

If you should have any questions regarding the information in the presentation please contact:

Johnnie Davis
803-782-4278 ext. 128
Sources

- https://www.childwelfare.gov/topics/responding/reporting/?hasBeenRedirected=1
- https://dss.sc.gov/content/customers/protection/cps/index.aspx