

Abuse & Neglect



ABUSE & NEGLECT

WHAT IS ABUSE?

Abuse means the **willful** infliction by a **caregiver**, of physical pain or injury or the willful deprivation of services necessary to the physical and mental health and safety of an individual. The term also includes the use of offensive language or act, to provoke or upset an **individual** or subject him or her to humiliation or ridicule.

Willful means intentional acts or omissions or the reckless disregard for the safety and consequences of one's acts or omissions.

Caregiver: a person who has responsibility for the care of an individual, who is a department client.

Individual means a person who has applied for and been determined eligible for the programs and services of the department, or who has been determined eligible by operation of law, and who is maintained as such in the department's individual data base.

The definition of abuse also includes **sexual contact** or **encouragement of sexual contact** between a paid or volunteer staff and an individual regardless of consent.

NOTE:

It is not the responsibility of the reporter to determine whether the action was willful. This is determined during an investigation. If you are unsure if something is abuse, report it and let an investigator decide if it is.

EXAMPLES OF ABUSE

Infliction by a caregiver of physical pain or injury

- Hitting with hand, fist, foot or object
- Shoving, tripping, pushing, pulling, scratching, pinching, cutting, biting
- Unnecessary or excessive physical or chemical restraints
- Giving medication not prescribed or forcing excessive medication on a person or physically forcing a person to take medication
- Jabbing a person with a sharp instrument such as a pencil, or scratching them with fingernails, which may result in cuts, punctures or scratches
- Burning a person by placing them in scalding bathwater

Deprivation of services necessary to the physical and mental health and safety of individuals

- Preventing a person from using his or her wheelchair
- Taking away a person's personal possession to punish him or her



Offensive language or acts used to provoke/upset/humiliate. These acts can be subtle or overt, and include:

- Belittling through the use of words, gestures, mannerisms, posturing, or mimicking. Referring to someone as "fat pig" or "Pimple Puss".
- Yelling or using offensive language
- Swearing
- Inappropriate teasing, taunting or ridiculing
- Attempting to provoke or intimidate through the use of actions, gestures, mannerisms, postures, tone of voice
- Taking a personal possession away and teasing the person with it.
- Getting "in one's face"
- Imposing punishments that are not part of an individual's written plan

WHAT IS NEGLECT?

Neglect means the failure by a caregiver, through action or inaction, to provide an individual with the services necessary to maintain his or her physical and mental health and safety, or a situation in which a person with mental retardation is living alone and unable to provide for him or herself such services.

NOTE: *If you are unsure if something is neglect, report it and let an investigator decide if it is.*

EXAMPLES OF NEGLECT

Failure to provide oversight in developing or implementing an individual's program which ensures an individual's well-being and safety

- A person who has begun to show signs of extreme anxiety is not taken to a counselor or psychiatrist for treatment
- an employee forgets to put a person's helmet on them for head protection

Failure to provide adequate clothing for weather conditions

- An individual is wearing light-weight clothing and no coat in 30 degree weather

Failure to provide meals of adequate nutritional value

Failure to prevent a person from self-injury

Failure to attend to personal care needs

- Leaving a person in a wet diaper or soiled clothing for prolonged periods of time

Failure to seek medical attention when needed

- A person with bleeding gums and loose teeth is not taken to a dentist for treatment

Failure to protect an individual from injury by another person

- Two individuals are fighting and the caregiver does not intervene

Failure to provide adequate supervision

- An individual is left unsupervised while bathing, and is scalded by hot water or drowns
- While two individuals are left unsupervised by a staff person, one of them assaults and injures the other
- A person is known to sexually assault his roommate and staff take no action
- Individuals are left unsupervised while in the care of a staff person who is intoxicated or has fallen asleep while on duty

Use or exploitation of a person's labor, funds or possessions

RECOGNIZING SIGNS OF ABUSE AND NEGLECT

Many people may not be able to tell you they have been injured, abused or neglected. Therefore, it is important to watch for physical, emotional and behavioral changes. None of these behaviors alone confirm that abuse or neglect is happening; this list is only intended to be a resource to help in detecting possible abuse or neglect.

Physical Signs of Abuse

Physical signs of abuse may include:

- marks or welts
- swelling
- bit marks
- fractures
- cuts or scratches
- punctures
- suspicious scars
- burns

Patterned Injuries: these are injuries that leave an imprint such as:

- belt mark
- foot print
- bite mark
- lines from a hanger
- rug mark
- slap mark
- fingernail scrapings

Patterns of multiple injuries: over time there are multiple injuries in various stages of healing

Bruising commonly occurs on knees, shins and elbows. It is unusual to find bruises on a person's:

- buttocks
- back
- upper arms
- abdomen
- chest
- cheeks
- inner thighs
- genitals

When reporting a suspicious bruise note the location, size, shape and color of the bruise; over time, the appearance of a bruise will change; bruises generally disappear within two to four weeks.

Behavioral Signs of Abuse

Both behaviors of individuals and behaviors of support staff (see causes of abuse) can be indicators of abuse. This is a partial list of behaviors that may be observed where situations of abuse or neglect exist:

An individual acts differently around a particular person:

- showing nervousness, fear or avoidance, flinching
- acting timid or shy
- being overly submissive or compliant
- being excessively affectionate
- asking permission to do things he or she would ordinarily do without asking
- acting subservient (i.e., overly compliant, eager to please, doing favors, etc.)

Past negative behaviors reappear

Negative self-talk begins (example: "I'm bad")

Becomes self-abusive or engages in self-injury

Becomes fearful of certain environments such as the van, bathroom, bedroom, etc.

Has nightmares or begins bedwetting

Becomes more emotional or more withdrawn



CONDITIONS THAT MAY LEAD TO ABUSE OR NEGLECT

There are many factors that correlate with an increase in abuse and neglect. The following are some examples of factors that may contribute to people being abused or neglected and should be evaluated on a regular basis.

Behaviors or Characteristics of Support Staff

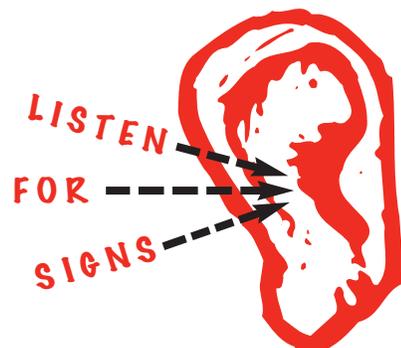
Personal values are not consistent with the philosophy of the individual or family

Support staff behavior that is impatient and controlling:

- requires immediate compliance of individuals
- overly quick to get into behavioral confrontations
- likes to be in control of an individual's behavior
- overly quick to apply restraints or consequences to restrict a person
- proud or boastful about ability to handle or control an individual's behavior

Support staff is tired and/or stressed

- working a lot of overtime
- multiple jobs
- consistently irritated or angered by a particular person or behavior
- dealing with illness or injury (self or family)
- dealing with personal problems



IMPORTANT!

SITUATIONS THAT CARRY A RISK

- *Providing significant medical care*
- *Managing difficult behaviors*
- *Mismatched housemates – people not wanting to live together*

Disrespectful to individuals or coworkers through conversations or actions

- talks about people as if they weren't present
- talks about people in derogatory terms
- shows distaste or disgust with certain individuals

Describes an individual's physical characteristics in sexual terms

Lack of interest, commitment or motivation

- inattentive toward people's needs for supervision or assistance
- seems to dislike or resent working with people
- doesn't show much initiative

Frequently shows poor judgment or carelessness

- careless about following programs, policies, procedures and household duties

STRATEGIES FOR PREVENTING ABUSE AND NEGLECT

The Individual Planning team or circle of support shall review individual needs and identify in an individual's plan of services required to prevent the individual from engaging in or being subjected to abuse/neglect.

Use the principles of the DMR Mission as a guide for support staff conduct:

- treat all people with respect. Talk to people politely, as you would like to be spoken to. Include people in conversations. Speak with them, not about them
- honor people's choices for how they want to live their lives
- assist people to identify their strengths. Teach people to do as much for themselves as possible. Ensure that people participate in all aspects of home and community
- support people to develop relationships with people other than paid staff and the people they live with
- support people to be active members of their community.

Practice good personal health and wellness habits:

- recognize signs of stress. Develop a personal stress management plan. Make sure you have a balance between home and work
- change destructive attitudes about yourself and others. Focus on their strengths
- get adequate sleep
- compartmentalize: when at work, leave personal problems at home

Be confident in your responsibility to point out potentially abusive behavior and recommend when a co-worker should seek assistance.

Report minor acts of abuse or neglect before they become major acts.

Advocate for and support individuals to carry out their legal and constitutional rights.

Remain respectful and professional at all times. This doesn't mean that you become detached but that you maintain professional judgment and approach.

Assess your own knowledge and skills and identify where more learning can be helpful to you.



WHAT SHOULD I DO IF I SUSPECT ABUSE AND NEGLECT?

First, make sure the person being supported is safe. In Connecticut, the law requires any caregiver who has witnessed, been told about, or suspects abuse or neglect to report it to the proper authority. A report must be made to one of the protective service agencies (listed below), depending on the age of the alleged victim:

AGE	DEPARTMENT TO CONTACT	TOLL FREE
CHILDREN AGED 17 OR UNDER	The Department of Children and Families (DCF)	1-800-842-2288
ADULTS AGED 18 TO 59	The Office of Protection and Advocacy (P&A)	1-800-842-7303
ADULTS AGED 60 AND OVER	The Department of Social Services (DSS)	1-203-597-4145



FREQUENTLY ASKED QUESTIONS

Who is required to report abuse or neglect?

Mandated reporters - every paid and volunteer staff of DMR and any program that DMR funds or licenses (private provider agencies or own hires) is considered to be a mandated reporter and is required by law (CGS 46a-11a) to report suspected abuse or neglect of any person who has mental retardation. Other mandated reporters include teachers, social workers, clergy, physicians, nurses, dentists and dental hygienists, therapists and most other health care workers. Non-mandated reporters such as people who receive support from DMR, neighbors, friends and family members can also report suspected abuse and neglect.

What would happen if I did not report suspected abuse or neglect?

You would be subject to disciplinary action and could also be fined up to \$500.

What if I reported something that I thought was abuse or neglect, but it turned out that I was mistaken?

As long as you made the report "in good faith" (that is, you did not have any malicious intent) you are immune from any civil or criminal liability, and can not be punished in any way by your employer. If you believe that you are being discouraged by your supervisor or employer from reporting abuse, you should contact the Commission on Human Rights and Opportunities or the DMR Ombudsperson?.

What would happen if someone falsely accused me of abuse or neglect?

Any person who makes a report with malicious intent is subject to disciplinary action and can be fined up to \$500.

CONTINUED ON NEXT PAGE



FREQUENTLY ASKED QUESTIONS cont.

What if I only suspect abuse or neglect, but I'm not sure?

You should report it! You are not required to be able to prove that abuse or neglect occurred, only to have reasonable cause to believe or suspect it. If you are not sure, you should file a report and let trained investigators determine whether further action is needed.

How much time do I have before I have to report suspected abuse or neglect?

DMR policy requires you to make a verbal report of suspected abuse immediately, both to your supervisor and to the appropriate outside agency (OPA, DCF or DSS). Your supervisor and the person you speak with at OPA, DCF or DSS can advise you on how to file any written reports that are required. You also need to report suspected abuse or neglect to your case manager who will help you report it to the appropriate DMR regional staff

What will happen after I make a report?

Trained investigators from OPA, DCF or DSS, as well as from DMR (or the private provider agency, if appropriate), will investigate the allegation. They will interview you (the reporter), the alleged victim, the alleged perpetrator, and any other potential witnesses. If the investigation reveals that there is sufficient evidence to support that abuse or neglect did occur, DMR (or the private provider agency) will take whatever actions are necessary to ensure that the victim is protected from any further harm. If the suspected abuse involves physical or sexual assault or any other criminal act, the police will be notified by the agency to whom you made the report. If you want to be sure that a report was made to the local police, you may call them directly.

