

Abuse and Neglect

Steps:

- Recognize that abuse is occurring
- Respond appropriately and quickly
- Safeguard against future occurrences

Types:

- Physical
- Sexual
- Psychological
- Financial
- Neglect

Reporting:

1. Verbally immediately to supervisor
2. In writing in incident report within 24 hours
3. Quick reporting makes a more accurate report

About Physical Abuse:

Physical abuse includes hitting, slapping, pushing, punching, pinching, burning, striking, sexual coercion, assault, incorrect positioning of the child or elder, forced feeding, improper or unauthorized use of restraints, rushing an elder, tying a client to a chair, and giving too much or too little medication. Telltales signs and symptoms include bruises, welts, lacerations, fractures, burns, rope marks and restraint marks.

About Sexual Abuse:

Damage to the genital area and unexplained venereal disease are signs of sexual abuse, as is withdrawal or sudden changes in behavior.

About Psychological Abuse:

Psychological abuse includes verbal scolding, harassment, intimidation, threatening punishment, deprivation, treating an adult like a child, and isolating a person from friends, family, or activities. A client who is suffering from psychological abuse may exhibit extreme withdrawal, agitation, depression, infantile behavior, or indifference.

About Financial Abuse:

Financial abuse could include taking control of an elder's resources by force or coercion, forcing the elder to sign durable power of attorney documents, or other coercive or manipulative behaviors regarding that person's finances. A client who appears to be receiving inadequate care given his or her resources, who has suddenly transferred assets or property, or seems indifferent about his or her resources may be a victim of financial abuse.



Inservice 4th Quarter 2019 – December 2019

About Neglect:

Neglect is when lack of attention causes harm. Neglect is characterized by having basic needs neglected, failure to provide basic needs such as personal care or food, physically neglecting (such as failing to reposition a bedbound client or failing to empty bedpans or change diapers), and psychological neglect, such as the “silent treatment.” Symptoms of neglect include dehydration, malnutrition, decubitus ulcers, poor personal hygiene, and lack of compliance with medical orders or medications.

Did you know?

- Anybody can be an abuser
- Anybody can be a victim
- Abuse is not frequently reported
- Many victims have conflicting feelings about their abuser
- A victim may experience several forms of abuse at the same time
- Wounds or marks in various stages of healing can indicate ongoing abuse

HMI Reporting Policies

1. Report verbally as soon as you suspect that a client is being abused or neglected or (as below) if you believe you have identified risk factors for violence.
 - Not sure who to talk to? Try your Staffing Coordinator, the Clinical Manager, or the RN assigned to your client.
 - Not sure if your suspicion is reportable? Please reach out anyway – failure to report could cause future harm to your client!
2. Report in writing using an incident report form within 24 hours.
 - Did you know that you can fax your incident reports to 202-829-9192?
 - This is a 24-hour industry – don’t wait until it is convenient or easy to report – take action as soon as you can!

Workplace Violence

Types:

Verbal Threats

Attempting or causing physical harm

Disorderly conduct

Verbal harassment

Making false statements

Possible Aggressors:

Strangers

Customers, Clients, or Patients

Co-Workers

Someone you are in a relationship with



Inservice 4th Quarter 2019 – December 2019

Prevention:

Step 1: Identify Risk Factors: isolated location, lack of training, no locks on doors, presence of unsecured handguns or weapons, availability of drugs or money, presence of gang members, drug or alcohol abusers, trauma patients, or distraught family members, lighting problems such as dark hallways or parking areas, lack of phones or communication methods, time of day (early in the morning or late at night), the presence of unknown persons loitering nearby, and easy access to potential weapons

Report Risks to Supervisor: report violent situations, potentially hazardous environments, or security risks – report swiftly – do not wait until a situation gets out of hand!!!

Step 2: Be Alert to Pre-Incident Indicators: increased use of alcohol or illegal drugs, noticeable decrease in attention to appearance and hygiene, depression and withdrawal, explosive outbursts of anger or rage without provocation, threatening or verbally abuse behavior or language, physical agitation, pacing, fidgeting, clenching fists or jaw, inability to sit still, out of touch with reality, noticeably unstable emotional responses, behavior which is suspicious or paranoid, preoccupation with previous acts of violence, increased mood swings, resistance and overreaction to changes in procedures or daily routines, empathy with those who commit violent acts

Step 3: Minimize Risk: pay attention to physical surroundings, trust your instincts, remove yourself if you need to and if you can, maintain your assigned schedule and notify the office of any changes, carry minimal money and the required identification badge, avoid poorly lit or poor visibility locations, have an effective means of communication like a cell phone, use locks and security systems available to you

Step 4: Reduce Tension: call the office, try to defuse the situation; if unable to, immediately leave the situation; remain calm, be empathetic, reinforce a calm tone with non-threatening, non-confrontational body language; do not touch an angry person, do not stand between a person and a door, do not use humor as it can be misinterpreted

Step 5: Be Patient: it takes 30-40 minutes for a physically angry person to calm down!

Step 6: If Aggression Occurs:

Block

Break holds

Don't reach for weapons

Encourage conversation and focus on the person

Keep your distance

Leave if necessary

Report Incident to Supervisor



Policy Update Effective December 15, 2019

WORK DAY LIMIT OF 16 HOURS

In order to facilitate beneficiary/patient safety, employee health and safety, and by order of the DC Department of Health Care Finance (DHCF) issued in June 2016, PCAs are not allowed to provide care to Medicaid beneficiaries for more than 16 hours during any calendar day beginning at 12:00 am (midnight). This daily limit applies to all hours worked in total for HMI and any other agency combined.

It is the employee's responsibility to make sure that she/he does not work more than a total of 16 hours in any given day even if working for more than one agency during that day.

DHCF monitors the billing for PCAs on a regular basis and will deny claims for PCAs who have worked more than 16 hours for any given day. The review can extend back to prior periods as well. Based on DHCF's reports, HMI may review the billings with the other agencies, and should it become apparent that time reported by the PCA overlapped with another agency, HMI is obligated by law to report such incidents to DHCF's Division of Program Integrity (Fraud Unit).

I have received the above policy and understand the content. I have been given the opportunity to ask questions regarding these policies.

I further agree that if DHCF denies any such claims, HMI will recoup the denied hours from my pay.

Printed Name: _____

Signature: _____

Date: _____

Inservice Test Quarter 4, 2019: Abuse and Neglect, Workplace Violence

1. Which of the following is a sign of financial abuse?
 - a. Bruises, welts, lacerations, fractures, burns, rope marks and restraint marks
 - b. Sudden transfer of assets, inadequate care, indifference about their money and resources
 - c. Extreme withdrawal or sudden changes in behavior
 - d. Agitation, depression, indifference

2. What type of abuse includes incorrect positioning, hitting, tying a client to a chair, rushing an elder, and forced feeding?
 - a. Physical
 - b. Sexual
 - c. Psychological
 - d. Financial

3. Which of the following is **not** an example of psychological abuse?
 - a. Yelling at a client for not eating or refusing to go to a medical appointment.
 - b. Listening to the client carefully and thoughtfully.
 - c. Keeping a client away from their family members.
 - d. Telling an adult client that you will punish them if they don't do something on their plan of care.

4. If you rush a patient out of the door for an appointment by grabbing him by the elbow and dragging him out of the door, how is that categorized?
 - a. Psychological abuse
 - b. Neglect
 - c. Physical abuse
 - d. Following the plan of care

5. What should you do if a client's behavior makes you feel angry or frustrated?
 - a. Tell him you won't give him lunch until he changes his behavior
 - b. Try telling a joke
 - c. Ignore him and refuse to speak to him
 - d. Step away for a moment to calm down

6. Can a family member be an abuser?
 - a. Yes
 - b. No

7. Which of the following should be reported to HMI?
 - a. Risks for violence
 - b. Suspected abuse/neglect
 - c. Confirmed abuse/neglect
 - d. A violent incident
 - e. All of the above
 - f. None of the above

Name: _____

December 15, 2019

8. Who can you talk to if you are worried about abuse, neglect, or violence in the patient's home?
 - a. Your family members
 - b. Your attorney
 - c. Your staffing coordinator, Clinical Manager, or the RN
 - d. None of the above

9. If aggression occurs, what should you do? **Select all answers that apply.**
 - a. Report the Incident
 - b. Ignore the person and stop all conversations
 - c. Stay as close to the person as possible
 - d. Block blows

10. Which of the following scenarios **does not** describe a high-risk environment?
 - a. The patient has many handguns or other weapons out in the open.
 - b. The patient has many people coming in and out of the home, many of whom are drinking alcohol or smoking marijuana.
 - c. The patient's sister usually accompanies him to doctor's appointments.
 - d. The patient's son who abuses alcohol is always arguing with you.

11. How long does it generally take a person to calm down?
 - a. 5 minutes
 - b. 15-20 minutes
 - c. 30-40 minutes
 - d. 1 hour or longer

12. When faced with a violent client, how can you minimize risk?
 - a. Remove yourself if you need to
 - b. Stay in locations where you can remain hidden
 - c. Make sure your cell phone is put away
 - d. Have lots of money for cab fare

13. When should you report a violent incident?
 - a. If you want a new client
 - b. If you are tired of dealing with repeated incidents
 - c. As soon as an incident occurs or within 24 hours
 - d. Only when the police are called

14. In situations of violence in the client's home, it is not usually a good idea to:
 - a. Leave a client
 - b. Call 9-1-1
 - c. Report the incident
 - d. Use humor to defuse the situation

15. What is a pre-incident indicator of violence?
 - a. Taking care with appearance and dress
 - b. Relaxed body language
 - c. Easy conversations
 - d. Mood swings