Abuse, Neglect and Mistreatment

Recognizing, Preventing and Reporting

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Today’s Agenda

- Definition and Purpose of Training
- Recognizing and Preventing Abuse and Neglect

Agenda

- Reporting Information
- Resources
- Question and Answers
All Marylander’s lead personally defined and fulfilling lives.
DDA partners with people with developmental disabilities to provide leadership and resources to live fulfilling lives.
DDA’s Goals are
People with developmental disabilities…

✓ direct their lives;
✓ have viable support options; and,
✓ have information to make decisions.
Who are we talking about?

Anyone who can be victimized.

Victimizers look for vulnerable people, so in this field, we are magnets for abusers.

Remember it only takes one person to damage a person’s life FOREVER!
Prevalence of Violence

More than ninety percent (90%) of people (both male and female) with developmental disabilities will experience sexual abuse at some point in their lives.

Sixty-two percent (62%) of women with physical disabilities reported experiencing emotional, physical or sexual abuse.

Adults with developmental disabilities are at risk of being physically or sexually assaulted at rates four to ten times greater than other adults.

The violence that women with disabilities experience includes verbal abuse, forced segregation, intimidation, abandonment and neglect, withholding of medications, transportation, equipment and personal assistance services and physical and sexual violence.

Neglect and Physical Abuse are most common.

Mostly reported by newly in-serviced staff.

What time do most incident occur?
Approximately 25% of sexual abuse is perpetrated by family members.

Approximately 50-67% of offenders contacted their victims through the service system.
2011 Incidents Reported to OHCQ

- Neglect: 279
- Physical Abuse: 219
- Violation of individual's rights: 57
- Psychological Abuse: 50
- Sexual Abuse: 27
- Inhumane Treatment: 13
- Use of aversive technique: 8
- Seclusion: 8
<table>
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<th>Category</th>
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<td>Seclusion</td>
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<td>Inhumane Treatment</td>
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<td>Sexual Abuse</td>
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<td>Psychological Abuse</td>
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<td>Neglect</td>
<td>293</td>
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<td>Use of aversive technique</td>
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<tr>
<td>Inhumane Treatment</td>
<td>23</td>
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<td>Sexual Abuse</td>
<td>30</td>
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<td>Psychological Abuse</td>
<td>53</td>
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How do abusers function?

The "Grooming" Process

Respect/Praise
Favors
Through "training"

Secrets

Fear & Intimidation
Power and Control
Gifts and Presents
Most of the staff we employ have the values and work ethics we are looking for.

It’s those **20%** that aren’t where we need them to be.

How do we handle that group?

What plans are in place to effect change?
Types of Abuse

1. Physical
2. Sexual
3. Psychological
4. Neglect/Isolation
5. Mistreatment/Verbal
6. Financial/Economic
**Definition of Physical Abuse**

- Physical contact, which may include, but is not limited to,
  - Hitting
  - Slapping
  - Pinching
  - Kicking
  - Biting
  - Strangling
  - Pushing
  - Shoving or
  - Otherwise mishandling an individual;

- Physical contact that is not necessary for the safety of the individual and causes discomfort to the individual;

- The handling of an individual with more force than is reasonably necessary.
Definition of Sexual Abuse

Any sexual activity between an individual receiving DDA funded services and an employee, intern, volunteer, consultant, or contractor of an agency who provides care or supports or has the responsibility for the supervision of a vulnerable individual, whether consensual or not, is considered to be sexual abuse AND IS PROHIBITED.

Any sexual activity between individuals receiving DDA funded services and others; or between individuals receiving DDA funded services is considered sexual abuse unless the involved individuals are consenting adults.

Any touching or fondling of an individual directly or through clothing for the arousing or gratifying of sexual desires and/or causing an individual to touch another person for the purpose of arousing or gratifying sexual desires.
Definition of Psychological Abuse

Psychological abuse, also referred to as emotional or mental abuse, is a sustained and repetitive form of mistreatment to cause mental or emotional anguish by threat, intimidation, humiliation, isolation or other verbal or nonverbal conduct in order to systematically diminish another.

It can include bullying, rejecting, degrading, terrorizing, isolating, corrupting/exploiting and "denying emotional responsiveness."

Emotional abuse includes verbal abuse such as yelling, name-calling, blaming, and shaming.

Abusive statements are intended to humiliate or infantilize, and include insults, threats of abandonment or institutionalization and other controlling, dominant or jealous behavior.
Evidence of Neglect

- Insufficient or incompetent supervision
- Program structure not meeting individual needs
- Failure to intervene when indicated
- Failure to revise ineffective behavior Plan
- Placement in an unsafe environment
- Absent or inadequate monitoring systems
- Individuals are found with serious injuries of unknown origin that are suspicious based on the nature or circumstances of the injury, and on the functional or medical status of the individual
Definition of Neglect

Neglect is:

- The failure to obtain or provide needed services and supports as defined by an individual’s plan and as required by law or regulation.

- The failure to provide goods and services necessary to avoid physical harm, mental anguish, or mental illness.

Neglect can be intentional or unintentional.
Signs/Examples of Neglect

Can include failing to provide needed care such as:

- Disregard for the individual’s needs such as Food, Shelter, Medication, Clothing
- Failure to provide personal and/or medical care
- Protection from Health and safety hazards
- Attention
- Lack of Supervision
- Allowing individuals to be in unsafe environments
- Unsanitary environments
- Or just leaving an individual unattended
Mistreatment is provider practices or behavior that result in any type of exploitation such as:

- Financial
- Sexual or
- Criminal
Financial Abuse

- Intentional acts that result in loss or misuse of an individual’s money or personal property
- Requiring an individual to pay for a service that should be paid by the agency
- Using an individual’s funds to pay for items that will be used by others
Preventing Financial Abuse

- Always count and document the individual’s money as it is used
- Keep all receipts
- Keep a running tally of all deposits and expenses
- Report discrepancies
- The same person should not be the purchaser and overseer
- Avoid mixing funds of one individual with another individual or staff
- Seek the guidance of your supervisor when there is a discrepancy - don’t try to hide it or make it up the next month
Indicators of Abuse

- Physical
- Individual Behaviors
- Staff Behaviors
- Environmental
Physical Indicators

- Difficulty walking or sitting
- Unexplained injuries such as bruises, cuts, welts, discolorations, grip marks, scratches, swelling, fractures, lacerations, wounds
- Any unexplained injury that doesn't fit with the given explanation of the injury
- Any injury incompatible with the person's history of unexplained injuries
- Lack of care for an injury (remember these injuries can and often are, hidden/covered by clothing)
- Poor skin condition or poor skin hygiene
- Malnutrition and dehydration without illness-related cause.
- Unexplained loss of weight
- Burns, that are possibly caused by cigarettes, or friction from ropes, rug burns from being dragged on the ground
- Pain or itching in the genital area
- Sexually transmitted diseases
- Not being given the proper medications
Individual Behavior Indicators

- Unusual crying out, whining, complaining, screaming
- Curling up in a corner, cowering
- Avoidance of staff or self-isolation
- Uncharacteristic increase in aggressive and/or self-abusive behavior
- New habit disorders such as jerking motions, thumb sucking or ear pulling
Staff Behavior Indicators

- Tone, frequency of interactions with individuals
- Body language and demeanor with individuals
- Physical interactions with individuals
- Avoidance, lack of interactions with individuals
- Staffing shortages
- Lack of supervision/training
- Failure to implement behavior plans and/or individual plans appropriately
Environmental Indicators

- Overcrowding in common areas
- Lack of cleanliness
- Noise levels (too quiet or too noisy)
- High usage of restraints
Indicators of Verbal Mistreatment Abuse

When staff speak to the individual they are supporting in language that is humiliating, insulting or threatening

It often results in individuals showing:

- Signs of helplessness
- Hesitation to talk openly
- Fear
- Withdrawal
- Depression
- Denial
- Agitation
- Anger
- Non-compliance or overly compliant
- Elopement
- Sleep Disorders
Individual Protections

The Provider must insure that:

- Individuals are not subjected to physical, verbal, sexual, psychological abuse or punishment
- All allegations of mistreatment, abuse or neglect are reported immediately based on the Policy of Reportable Incidents and Investigations
- There is evidence that all alleged violations were thoroughly investigated
- Further potential abuse is prevented while the investigation is in progress
- Investigation results are reported in accordance with the Policy on Reportable Incidents and Investigations and applicable regulations
- Appropriate corrective action is taken if the alleged violation is verified
Other Regulations

The Provider must:

- Develop and implement written policies and procedures that prohibit mistreatment, neglect or abuse of the individual they are supporting.

- Insure staff do not use physical, verbal, sexual or psychological abuse or punishment.

- Insure that staff do not punish an individual by withholding food or hydration that contributes to a nutritionally adequate diet.

- A licensee may not employ or contract with any person who has a criminal history which would indicate behavior potentially harmful to individuals documented through either a criminal history records check or a criminal background check, pursuant to Health-General Article, sub-section 19-1902 et seq., Annotated Code of Maryland, and COMAR 12.15.03.

- Insure that they are following the hiring practices based on COMAR regulations.
Failure to report abuse or your suspicion of abuse Is Abuse!
Alert your supervisor immediately.
The Abuse Is Not Their Fault

Reassure
Sticks and Stones
may break my bones
but words hurt FOREVER!
"What'll it be, Tyler—your lunch money or heaps of verbal abuse?"
Examples of Rights Violations

- Unauthorized removal of personal property
- Refusal of access to the telephone
- Opening individual’s mail
- Violating an individual’s privacy or confidentiality

[Know Your Rights]
Create the culture at your agency

All abuse allegations will be reported and investigated every time.

The abusers will leave!
A WORK ENVIRONMENT ABUSERS HATE!
Center for disabled loses its license due to alleged abuse and molestation

State threatens to shut down disability center amid patient abuse

‘Today’ Show’s Sandusky Interview: 5 Shocking Allegations
by Caroline Linton Mar 25, 2013 4:15 PM EDT
The infamous shower incident didn’t happen as we thought, according to a new documentary teased on the ‘Today’ show. Caroline Linton on what Sandusky said from behind bars.
Could this happen in your agency?

Yes. . .but there are ways to prevent it.

Organize your agency in such a manner that it proactively assures individuals are free from serious and immediate threat to their physical and psychological health and safety.
HEAR WHAT’S BEING SAID AND WHAT ISN’T BEING SAID

WATCH HOW INDIVIDUALS INTERACT WITH THEIR STAFF (ESPECIALLY BODY LANGUAGE)

TEACH AND EMPOWER INDIVIDUALS TO SPEAK UP

DON’T COVER IT UP
WHAT ABOUT THE PERSON THAT CLAIMS ABUSE REPEATEDLY?

WHY ARE THEY DOING IT?

IS IT JUST DOCUMENTED SO WE DON’T LOOK INTO IT OR ARE WE PROVIDING A SUPPORT TO SEE WHAT IS TRIGGERING IT?

COULD IT BE POST TRAUMATIC STRESS?
Questions to Consider/Internal Probes:

- Can your staff define what abuse, neglect or mistreatment is?
- Are agency policies enforced?
- How do individuals report abuse?
- When they do, are they believed? Made to feel safe?
- Does your agency actively promote respect for the individuals you serve?
- Are staff allowed to speak loudly or harshly?
- Are staff allowed to speak in negative and punishing threats?
The signs that tell an abuser Not to risk it:

If the individual is:
- Self Confident
- Not easily intimidated/good assertiveness skills
- Good at problem solving
- Good social skills
- Knows how to self protect
- Is valued/respected by others
- Has high self-esteem/respect
- Not overly-compliant/will question authority
- Well informed about sex
Insanity: Doing the same thing over and over again and expecting different results.

Albert Einstein
What are we doing
To prevent Re-Abuse?

It’s more that having a policy or saying the right words...we must do the right thing!
## WELLNESS AND POSITIVE BEHAVIOR SUPPORT

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<thead>
<tr>
<th>OBJECTIVES</th>
<th>OBLIGATIONS</th>
<th>OPPORTUNITIES FOR GROWTH</th>
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<tbody>
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<td>• Support Quality of Life</td>
<td>• Prevention of illness &amp; abuse</td>
<td>• Improve wellness</td>
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<td>• Support positive behavior</td>
<td>• Assure human rights</td>
<td>• Prevent behavior problems</td>
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<td>• Prevent Problems</td>
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SHARE YOUR THOUGHTS!

Let me share what worked for us.

What are some strategies for prevention that has been successful at your agency?
Are you supporting the abuse by not saying anything?

- By having policies and not following through
- By always alerting staff that you are coming to do a visit
A key element of any Quality Assurance System includes strategies and interventions to identify, address, seek to prevent abuse, neglect and exploitation.
Quality of Life & Quality of Care Issue

All Provider Agencies must ensure that there are adequate safeguards in place to identify, address, and prevent abuse, neglect, and exploitation.

As DDA providers, you are responsible for ensuring that your staff members are qualified and trained to provide the necessary care and services to all individuals you serve.
Abuse Prevention Tools
To reduce abuse from occurring at your agency

- Agency Policies & Procedures
- Agency Culture
- Proper Reporting, Investigating and Follow Up
- Non-Negotiables on Abuse
- Natural Supports
- Friends & Family
- Community Involvement
if you SEE something, SAY something™

TAKEN FROM HOMELAND SECURITY