NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES (NNAMHS)

POLICY AND PROCEDURE

SUBJECT: ABUSE: SIGNS AND SYMPTOMS

NUMBER: NN-RI-07

ORIGINAL DATE: 09/12/95

REVIEW/REVISE DATE: 11/05/98, 01/07/02, 11/20/08, 3/15/12, 10/17/13

APPROVAL: Cody L. Phinney, Agency Director

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I. PURPOSE

To help staff of NNAMHS identify and report consumers who are possible victims of abuse upon admission to NNAMHS and during treatment at NNAMHS.

II. POLICY

Persons performing initial assessments of consumers consider the possibility that a consumer may be an abuse victim. When there is reason to believe that a consumer is a victim of abuse, staff will report possible abuse to the supervisor. In addition, all clinical staff is to be trained and demonstrate competency to recognize and report abuse.

III. REFERENCES

1. NNAMHS Policy NN-RI-01Consumer Abuse and/or Neglect.
2. NNAMHS Policy NN-PC-PL-13 Medical Photographs.
3. Division Policy #2.003 Abuse and Neglect of Consumers.
4. MHDS Policy and Procedure # 2.003
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IV. DEFINITIONS

1. Vulnerable Adult is a person between the ages of 18 and 59 years of age (NRS 200.5092)
2. Elder is a person 60 years of age or older (NRS 200.5092)

V. PROCEDURE

A. Any employee of NNAMHS seeing, suspecting, or receiving a report (either verbal or written) from anyone of consumer abuse, neglect, or exploitation shall report the incident to their supervisor immediately or no later than one (1) hour after discovery.

B. Failure to report is grounds for disciplinary action, up to and including dismissal.

C. Reporting sequence will be as delineated in Policy NN-RI-01 Consumer Abuse and/or Neglect.

D. Warning Signs of Abuse include, but are not limited to:

1. Frequent injuries and/or bruises, cuts, welts or other injuries that are unexplained or inconsistent with history;
2. Repeated visits for medical and/or psychological concerns, with vague complaints;
3. Reports of lack of medication and/or missing medication;
4. Failure to seek medical attention or delay in seeking medical attention;
5. Refusal to reveal body parts for medical examination;
6. Domineering spouse/partner, parent/guardian, caretaker, or other person who is unwilling to leave the consumer alone with service providers and/or insists on answering questions posed to the consumer;

7. Injuries appear to have a pattern (e.g., handprint, belt);
8. Bite marks, cigarette burns;
9. Untreated illness and/or physical injuries; in adults/elderly: neglected/untreated bedsores (decubitus ulcers);
10. Malnourished condition; size developmentally inappropriate; thin/small for age;
11. Reports of lack of food ;
12. Reports of missing money and/or personal items; reports of unpaid utilities;
13. Consistently poor hygiene (e.g., unwashed skin, matted hair, dried feces on skin, soiled clothing, noticeable body odor);
14. Clothes ill-fitting and/or inappropriate for weather (e.g., lack of coat in winter; long sleeve shirt in summer to cover up injuries);
15. Dirty or dangerous living conditions;
16. Frequently late or missing from central activities (e.g., school, church);
17. Reports of being left alone with out adequate care and/or supervision; left in unsafe situations and environments and/or with unsafe person/s
18. Reports or observation of difficulty sitting down and/or walking (especially with sexual abuse).

E. Behavioral warning signs of abuse include, but are not limited to, behavioral changes including:

1. Signs of depression and/or anxiety (new behavior in person previously clear of these symptoms, may appear to have rapid onset or vague precipitating factors);
2. Loss of interest in hobbies or other activities;
3. Change in ability to care for self (decrease or inability to care for self);
4. Change in bathing habits;

5. Avoidance of certain people, places, and/or activities that had not been problematic for consumer in the past;
6. Avoidance of or vagueness in talking about daily activities;
7. Fear of being alone (when such fear did not previously exist);
8. Acting nervous or upset when around a certain person/people ; strong efforts to avoid a specific person, without an obvious reason (may avoid discussion of reason);
9. Hyper vigilance (watchful and on alert) as if waiting for something bad to happen);
10. Rapid startle response; reflexive ducking; shies away from touch, flinches at sudden movements;
11. Excessively withdrawn, fearful, or anxious about doing something wrong;
12. Verbal or non-verbal indications of fear of returning to home or other care setting;
13. Behavioral extremes (e.g., extremely compliant or extremely demanding; extremely passive or extremely aggressive);
14. Developmentally inappropriate behavior (e.g., child or adolescent may act overly responsible, adult-like; may show regressive, even infantile, behavior such as thumb-sucking, rocking, temper tantrums);
15. Does not appear to have a positive attachment to parent, guardian, or caretaker;
16. Inappropriate interactions with parent/s, guardian/s, and/or others; may show overly attached behavior with strangers;
17. Change in sexual behavior (e.g., avoidance); engaging in seductive and/or sexual behavior; or displays knowledge of and interest in sexual activities inconsistent with past behavior/values and/or inappropriate for normal developmental stage/age;
18. Resistance to changing clothes in front of others and/or participating in physical activities (when previously comfortable with these activities).