Assessment & Screening of Abuse

Purpose To address specific procedures for the assessment, screening and reporting of violence in adults and children within the RMCHP

Scope All Regional Maternal & Child Health Program personnel

Policy This agency adopts a "no tolerance" policy and recognizes the importance of intervention when abuse is suspected or determined. The Regional Maternal and Child Health Program has adopted the Department of State Services Child Abuse Screening, Documenting, and Reporting Policy for Contractors/Providers.

Definitions **Family violence**: defined by Texas Family Code (*71.02 & *73.01) as "an act by a member of the family or household that is intended to result in physical harm, bodily injury, assault or sexual assault, but does not include defensive measures to protect oneself. Furthermore, family violence can be defined as repeatedly subjecting a woman to forceful physical, social, and psychological behavior in order to coerce her, without regard to her rights."

Interpersonal violence includes:

1. Physical violence includes slapping, choking, kicking, pushing and the use of objects as weapons.
2. Property violence denotes threatened or actual destruction of property.
3. Psychological violence includes threats to harm, forced physical isolation of the individual, extreme jealousy, mental degradation and threats of harm to children.
4. Forced sexual activity constitutes sexual violence.

Child abuse: a type of family/interpersonal violence. "Abuse" is defined in part by the Texas Family Code as "mental or emotional injury to a child" and /or "physical injury that results from substantial harm to the child, or the genuine threat of substantial harm from physical injury to the child".

Any minor less than 14 years of age who has engaged in sexual activity with any individual to whom the minor is not married is considered to be a victim of child abuse. Sexual activity would be indicated if the minor states that she has been sexually active, is pregnant or has a sexually transmitted disease acquired in a manner other than through perinatal transmission or transfusion.

For minors < 17years of age: child sexual abuse is reportable if the minor states that the perpetrator is:

a. greater than 3 years older than the minor or of the same sex
b. used duress, force or a threat against the minor
c. a previously convicted sex offender

Sexual abuse: defined in the Texas Family Code as "sexual conduct harmful to an individual's mental, emotional or physical welfare". Sexual abuse involves many types of sexual activities such as breast, oral, anal, and or genital contact, touching or penetration and may range from a gentle seduction to a violent rape.

Procedure

Assessment

1. Review domestic violence screening questions with all clients.
2. Before asking specific questions, be sure to state that all services are confidential; however, in cases of life threatening emergencies and physical and sexual abuse, as required by law, a referral for further services may be made (i.e., hospital or battered women's shelter). If the patient is a minor, state that a report of abuse will be filed.
3. Consider the possibility of family/interpersonal/child abuse if any of the following are observed:
   - Multiple injuries in varying stages of healing
   - Repeated unexplained injuries
   - Extent and type of injury inconsistent with client's explanation
   - Vague or non-specific physical or psychological complaints (e.g. fatigue, anxiety, depression, "nerves", fearfulness, sleeplessness, rage, loss of appetite, disassociation)
   - Sites of injury - face, neck, throat, abdomen, genitals or bilateral extremity injuries
   - Suicide attempt

- Evidence of alcohol or drug abuse
- Problems during pregnancy; specifically miscarriage, bleeding, intrauterine growth retardation and hyperemesis
- Eating disorders
- Self mutilation
- Self induced abortions or multiple therapeutic abortions or miscarriages
- Unexplained single car crashes (victim may be a passenger)
- Unexplained lacerations and/or burns
- Emotional abuse or extreme marriage discord observed by staff
- Abuse observed by staff

<u>For clients under the age 17 consider the above plus the following:</u>

- Early age of first intercourse (<15)
- First sex not wanted
- Repeated vaginal infections and/or sexually transmitted diseases (STDs)
- Severe dysmenorrhea or pelvic pain
- Pregnancy at a young age
- Number of lifetime sex partners >3 for a client under the age of eighteen
- Age of partner > 3 years older
- Sexual orientation of partner

4. Examine the client in private. If abuse is disclosed or is suspected, it is important to be firm about excluding from the examination room family members or friends who could inhibit honesty/disclosure.
5. While in the exam room, observe the client for any of the following indicators:
   - Extreme anxiety reaction or overly compliant behavior during pelvic exam
   - Refusal or extreme hesitation to undress
   - Poor hygiene or excessive bathing
   - Pain, swelling, itching, lacerations, bruises in genital area
   - Unexplained burns, abrasions or welts
   - Difficulty walking or sitting

6. Document all observations that support the disclosure or suspicions of client abuse on the Domestic Violence Documentation form including: mental, physical, or emotional injuries you believe constitute abuse; quote the client as much as possible. Record the client's description of the suspected abuse. Clear, concise, accurate documentation is important, especially if legal action takes place. Record objective findings. Information must be accurate. In a court of law, the medical records will be admissible as evidence. With the patients consent Polaroid pictures may be taken - one set is provided to the patient, a second set remains part of the medical record.

Reporting

1. Reports can be made anonymously.
2. Health care professionals must report within 48 hours of disclosure to the appropriate agencies (i.e. Child Protective Services, local police department).
3. Non professionals must report immediately once they have cause to believe that the child's physical or mental health or welfare has been adversely affected by abuse.
4. Include the following in all telephone reports:
   - Name of the reporting person
   - Name of the client
   - Nature and extent of injury/abuse.
   - Present location of the client.
   - Other information requested by the agency to which the report is being made.
   - How and where client prefers to be contacted
   - The information contained in the report should be limited to that which is necessary for the agency to respond to the report and not the complete medical record.

Adults

1. There are no reporting requirements in the state of Texas if the client is an adult. You are required by law to offer a written referral and to document the suspected abuse and the referral of the client in the medical record. If the client is in immediate danger, recommend calling the police and provide immediate support if she wants to go to a shelter. With her request and permission, you may make the contact for her.

2. If the adult client requests that you make a report to police, document the report. A report made for a client should include the following:
   - Documentation of the client's request
   - Time the report was given
   - Name of the official to whom information was given
   - Case number given by the official
   - If a decision is made not to report when there has been some indication of abuse, it is extremely important to document the facts that led to that decision.

Children

All sexual conduct by a minor need not be reported as child abuse. However, the following must be reported as mandated by Rider 23 and/or Texas Family Code 261.001: Any child less than 14 years of age who has engaged in sexual activity with any individual to whom the minor is not married is considered to be a victim of child sexual abuse. Sexual activity would be indicated if the minor states that she has had sexual intercourse or in the event of pregnancy or documented sexually transmitted disease acquired in a manner other than through perinatal transmission or transfusion.

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For minors < 17 years a report is indicated if the partner is more than 3 years older than the minor, of the same sex, used duress, force or a threat against the minor or if the partner is a previously convicted sex offender.

If at any time a client who is under the age of 17 and has never been married or declared as an adult by court, states that she has been abused, a report must be made. A report must be made no matter how long ago the abuse occurred.

A report needs to be made even if the client states that a report was already filed. This is to verify that a report was indeed filed and to protect the patient and the staff member.

If the client indicates that their perpetrator is a member of her family or household, then a report must be filed with both the Child Protective Services and the police. If the perpetrator is not a family or household member,

the report must be filed only with the police. Client safety should be considered at all times.

When a staff person has cause to believe that a child has been abused, that person is individually responsible for her/his own reports and cannot delegate this responsibility.

Abuse may be reported online at https://www.txabusehotline.org .

This website is only for reporting situations that do not require an emergency response. An emergency is a situation where a child, adult with disabilities or person who is elderly faces an immediate risk of abuse or neglect that could result in death or serious harm.

Reports made through this web site take up to 24 hours to process. Call the Texas Abuse Hotline at 1-800-252-5400 if

- You believe your situation requires action in less than 24 hours.
- You prefer to remain anonymous.
- You have insufficient data to complete the required information on the report.
- You do not want an e-mail to confirm your report.

If the report is made via telephone or FAX to Department of Family Protective Services (DFPS) or local law enforcement a Child Abuse Reporting Form must be completed and submitted to agency. A copy must be maintained in the medical record.

Treatment

1. Treat injuries and /or related medical conditions as indicated.
2. Assess the immediate safety of the client.
3. Discuss with the client that abuse is not her fault and that abuse is a crime punishable by law.
4. Furnish the client with the appropriate written referrals for further services as needed.

Documentation

1. Document all observations that support the disclosure or suspicions of client abuse including: mental, physical, or emotional injuries you believe constitute abuse, quote the client as much as possible.
2. Record the client's description of the suspected abuse. Clear, concise, accurate documentation is important, especially if legal action takes place.
3. Record objective findings. Information must be accurate. In a court of law, the medical records will be admissible as evidence.
4. The Child Abuse Reporting Form must be completed for any unmarried child under 14 years of age that is pregnant or has a confirmed sexually transmitted disease.
5. Documentation for patients is maintained in the electronic medical record or paper chart. No domestic violence information will be available for review by the prenatal patient's family members.
6. If the adolescent < 17 years is not reported because she does not meet the criteria for reporting, the reason must be documented in the medical record. (For example, patient is 15 years of age, not reported as abuse because her male partner is 16 years of age).

Referrals

1. Document all referrals.
2. All referral resource numbers will be updated on an annual basis.

Monitoring of Abuse Reporting

1. All RMCHP staff will receive an inservice regarding identifying, reporting and documenting abuse.
2. The clinic director is responsible to assure that a census of all patients seen at the end of each day is run. All minors <17 years will have their records pulled to assure that any abuse has been reported and documented in the record. If a sexually active minor has not been reported, there must be documentation of why in the record. For example; a 16 year whose partner is male and 16 years of age does not require reporting.
3. If the adolescent is less than 14 years of age and pregnant or has a documented STD acquired in a manner other than through perinatal transmission or transfusion., a Child Abuse Reporting Form must be completed and maintained in a separate notebook with a copy of the report.

Reference:

"DSHS Child Abuse Screening, Documenting and Reporting Policy for Contractors/Providers – Revised effective January 1, 2009"
"DSHS Child Abuse Reporting Requirements for DSHS Contractors/Providers – Rider 23"
(Printed copies attached) (On-line link at http://www.dshs.state.tx.us/childabusereporting/)

Resource Numbers:

Texas Numbers
Texas Department of Family and Protective Services 1-800-252-5400 [24 hours per day, 7 days per week] (if the alleged or suspected abuse involves a person responsible for the care, custody or welfare of the child) or DFPS fax 1-800-647-7410

Online reporting for non urgent referrals (if a child is in immediate danger do not use this website)
www.txabusehotline.org
The log on name is: professional
The password is: report

Angleton
Women's Center of Brazoria Co. 1-800-243-5788, (979) 849-9553
Victim Advocate Offices 1-800-971-6677 (helpline)
Victim Advocate Offices (979) 849-9553
His Love Christian Counseling Services (979) 297-3236
Mental Health Emergency Crisis Intervention Bay Area Council on Drug/Alcohol 1-800-243-5788
TX Employment Commission (979) 297-6400
Salvation Army (979) 233-5429
United Way of Brazoria County 1-800-971-6677 (helpline)
Youth and Family Counseling Services of Angleton (979) 864-1577

Beaumont
Women's Shelter 1-800-621-8882 or (409) 832-7575
Domestic Violence Unit 1-800-252-5400

Conroe
CPS (936) 539-1161
Montgomery County Women's Center (936) 441-7273 or (281) 292-4338
Rape Crisis (936) 441-7273
Texas Department of Human Services (936) 539-1161
TriCounty MHMR (936) 525-2700
Crisis Hotline 1-800-659-6994
Family Inn (located in Humble) (281) 446-2615

Dickinson
Bay Area Women's Center (281) 422-2292 or 1-800-824-4807
Crisis Hotline (713) 228-1505
TX Dept. of Human Services 1-800-252-5400
Medicaid Hotline 1-800-393-3352
Family Outreach Center (281) 486-8827

Galveston UHC
Women's Crisis Center (409) 765-SAFE
CPS 1-800-252-5400
Victims Advocate (409) 765-2604
Family Service Center (409) 762-8636

Huntsville
Adult Protective Services (936) 291-7036
CPS (936) 291-0772
TX Dept. of Protective & Regulatory Services 1-800-252-5400
Huntsville Alcohol and Drug Program (936) 291-1111
SAAFEHOUSE Hotline (936) 291-3369
Tri-County MHMR (936) 295-0072
Salvation Army (936) 760-2440

Katy
Katy Christian Ministries – Domestic Abuse Center Hotline (281) 391-4397 (HELP)
Rape Hotline 281-693-7273 (RAPE)
Non emergency (281) 391-4504
Houston Area Women's Center (713) 528-2121
Fort Bend County Women's Center (281) 342-4357

Nacogdoches
Women's Shelter (936) 569-8850
Women's Shelter of East Texas 1-800-828-7233

New Caney
CPS (936) 756-1551
Montgomery County Women's Center (936) 441-7273 or (281) 292-4338 or (281) 292-4155
Rape Crisis (936) 441-7273
Texas Department of Human Services (936) 760-4780 or (936) 539-1161
TriCounty MHMR (936) 525-2700
Crisis Hotline 1-800-659-6994
Family Inn (located in Humble) (281) 446-2615

Orange
Women's Shelter 1-800-621-8882 or (409) 832-7575
Domestic Violence Unit 1-800-252-5400
TAN (free HIV testing) (409) 832-8648
County Indigent Care Office (409) 882-7838
Gulf Coast Clinic (409) 866-4400
Spindletop MHMR (409) 883-7074
Family Services 1-800-727-3080

Pasadena
The Bridge over Troubled Waters (713) 473-2801
Houston Area Women's Center (713) 528-2121, (713) 528-7233 (rape crisis),
(713) 535-6325 (domestic violence)
CPS Harris County (713) 394-4000
CPS Houston (713) 394-4000

Pearland
CPS (281) 331-6101 ext. 1428
Bay Area Women's Center (713) 422-3300
Galveston County Women's Crisis (409) 765-7233
Houston Area Women's Center Hotline (713) 528-2121
Women's Center of Brazoria County 1-800-243-5788, (979) 849-9553 (Angleton),
(281) 585-4047 (Alvin), (281) 485-0934 (Pearland)
Family Services Center of Galveston County (409) 762-8636

Stafford
CPS Houston (713) 394-4000
CPS Fort Bend (281) 341-7753 or 1-800-252-5400
The Bridge over Troubled Water (713) 473-2801
Fort Bend County Women's Center (281) 342-4357
Houston Area Women's Center (713) 528-2121
Family Service Center Fort Bend County (281) 261-1830 or Houston County (713) 861-4849
Crisis Intervention of Houston (713) 228-1505

Texas City
CPS (409) 948-3481
Women's Crisis Center (409) 765-2604

Victoria
Women's Crisis (361) 573-4357
Hope of South Texas (361) 573-5868
Texas Department of Family Services - 24 hour hotline 1-800-252-5400
Salvation Army (361) 576-1297