

This is the first of a series on our policy and procedures regarding **abuse/neglect/misappropriation of property prohibition**. Any questions or concerns may be directed to Mary McKerrow, Administrator or Karen Davis, Director of Nursing.

The Bradford County Manor shall provide a safe environment where residents are not subject to mental, physical, sexual, and verbal abuse or neglect by staff, residents, visitors, or family members. We will protect the resident from real or perceived abuse or neglect of any kind and from any source.

### **Definitions:**

- **Verbal abuse** – refers to any use of oral, written, or gestured language that includes disparaging and derogatory terms to residents or their families, or within hearing distance to describe residents, regardless of their age, ability to comprehend, or disability. Examples of verbal abuse include, but are not limited to: threats of Harm: saying things to frighten a resident, such as telling a resident that she will never be able to see her family again.
- **Sexual abuse** – includes but is not limited to sexual harassment, sexual coercion and/or sexual assault.
- **Physical abuse** – includes but is not limited to hitting, slapping, pinching, kicking, etc. It also includes controlling behavior through corporal punishment.
- **Involuntary seclusion** – includes separation from other residents, from the resident's room or confinement to his or her room (with or without roommates) against the resident's will or the will of the resident's responsible party. Temporary monitored separation from others will not be considered involuntary seclusion and may be permitted if used for a limited period of time as a therapeutic measure until professional staff can develop a plan of care to meet the resident's needs.

- **Mental abuse** – includes, but is not limited to resident humiliation, intimidation, threats of punishment or deprivation, or denial of food or privileges.
- **Neglect** – means failure to provide goods and services necessary to avoid physical harm, mental anguish, or mental illness. Neglect occurs on an individual basis when a resident receives a lack of care in one or more areas, (e.g., absence of frequent monitoring for a resident known to be incontinent, resulting in being left to lie in urine or feces). Neglect also occurs when a number of residents receive a lack of care in one or more regulatory grouping; a finding which reflects the facility's failure to have developed policies or implemented procedures to prohibit neglect.

A finding of neglect must not be made if the accused individual demonstrates that such neglect was caused by factors beyond the control of the individual.

**Interpretation:** Neglect refers to failure through inattentiveness, carelessness, or omission to provide timely, consistent, safe, adequate, and appropriate services, treatment and care, including but not limited to: nutrition, medication, therapies, and activities of daily living. The absence of reasonable accommodations of individual needs and preferences may result in resident neglect.

- **Misappropriation of resident property** – means the deliberate misplacement, exploitation, or wrongful (temporary or permanent) use of a resident's belongings or funds without the resident's consent.

## **PROCEDURES:**

### **Screening**

1. Professional-work references and character references are required to be submitted with all employment applications. All references are called and questioned regarding the character and emotional and psychological disposition of the potential employee before hiring the applicant for employment.

2. Licensed staff has their appropriate licensing boards checked for any history of abuse, neglect, mistreatment of residents or misappropriation of resident property.
3. Certified Nursing Assistants, who are currently on the registry, will have their registry checked for past incidences of abuse, neglect, mistreatment of residents and misappropriation of resident property prior to hiring for employment. Any potential employee found with a history of abuse or any of the above, will not be hired by the facility, as long as that information is known by the facility prior to hiring.
4. Individuals who have been found guilty of abusing, neglecting, or mistreating residents by a court of law, shall not be employed by the facility.
5. All new employees will be screened for a history of abuse using the state policy criminal background checks procedure. Results of the criminal background check must be available within 30 days from the date of hire.
6. Employees hired from outside the commonwealth of Pennsylvania will have an FBI check done. Results from this check will be available within 90 days from the date of hire.

**Training:**

1. Employees are trained at the time of hire, prior to direct care provision and at a minimum on an annual basis on issues related to abuse, neglect, mistreatment and misappropriation of resident property.
2. Training scenarios will include but not be limited to the following:
  - a. Appropriate interventions to deal with aggressive and/or catastrophic residents;
  - b. How staff should report their knowledge related to allegations of abuse, neglect, mistreatment or misappropriation of resident property;
  - c. How to recognize signs of burnout, frustration and stress that may lead to abuse;

- d. What constitutes abuse, neglect and misappropriation of resident property?

**PREVENTION:**

1. Prevention of resident abuse and neglect is accomplished by:
  - a. The completion of pre-employment screening of potential employee registries, completion of criminal record check of all employees and pre-employment reference checks of potential hires;
  - b. Admission and quarterly resident assessment;
  - c. Monitoring of incidents/accident reports for possible abuse.
2. Information is provided to residents, families and facility staff on how and to whom they may report any concerns, incidents and grievances without fear of reprisal or retribution. Prompt acknowledgment of the “concern” as well as prompt efforts by the facility to resolve such concerns will be given to those voicing such complaints. Feedback on voiced or expressed concerns will be provided to residents, families and facility staff as soon as a resolution has been reached.
3. The facility identifies, corrects and intervenes in situations in which abuse, neglect, mistreatment and misappropriation of resident property is more likely to occur by doing an analysis of the following:
  - a. Physical features of the building that may be “secluded” or not easily supervised.
  - b. Lighting in halls, corridors and resident rooms to ensure adequate light is provided for resident comfort and proper nursing care.
  - c. The deployment of sufficient numbers of nursing and ancillary staff on each tour of duty to assure that the needs of the residents are met.
  - d. The knowledge base of the nursing staff assigned to direct resident care to ensure that the individual care needs of the residents are known.

- e. The supervision of staff is sufficient and adequate to identify inappropriate behavior, use of derogatory language, rough handling, ignoring residents while giving care, ignoring resident requests to toilet or directing residents to urinate in their briefs.
- f. Residents having behavior problems such as combativeness, aggression, verbal or physical abuse, have been assessed, care planned, and monitored on a continual basis to ensure that conflicts or neglect does not occur by care givers.
- g. Residents having wandering behaviors, communication disorders, self-injurious behaviors, or being totally dependent on staff for nursing care needs, have assessments, care-plans and monitoring done on a continual basis to ensure that conflicts or neglect does not occur by caregivers.
- h. Caregivers are observed for signs and symptoms of “burn-out” and given the appropriate attention and relief to ensure that potential abuse or neglect situations do not arise.

To be continued