

Pediatric Abuse and Neglect Screening for the Emergency Department

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Introduction

- The number of children undergoing evaluations in the Emergency Department whose abuse and neglect escape detection is unknown.
- In 2014, it was estimated that 1,825 children in the U.S. were abused and neglected every day.
- The estimated lifetime cost for each survivor of childhood abuse and neglect is \$210,012
- On average, abuse and neglect kills 4 children every day.
- And the cycle continues.... approximately 30% of abused and/or neglected children will abuse their own children.

Background

- A 2-month old baby boy was seen and treated in the ED for fussiness.
- No obvious signs of trauma were present.
- 24 hours later the patient returned with a subdural hematoma. What did we miss?

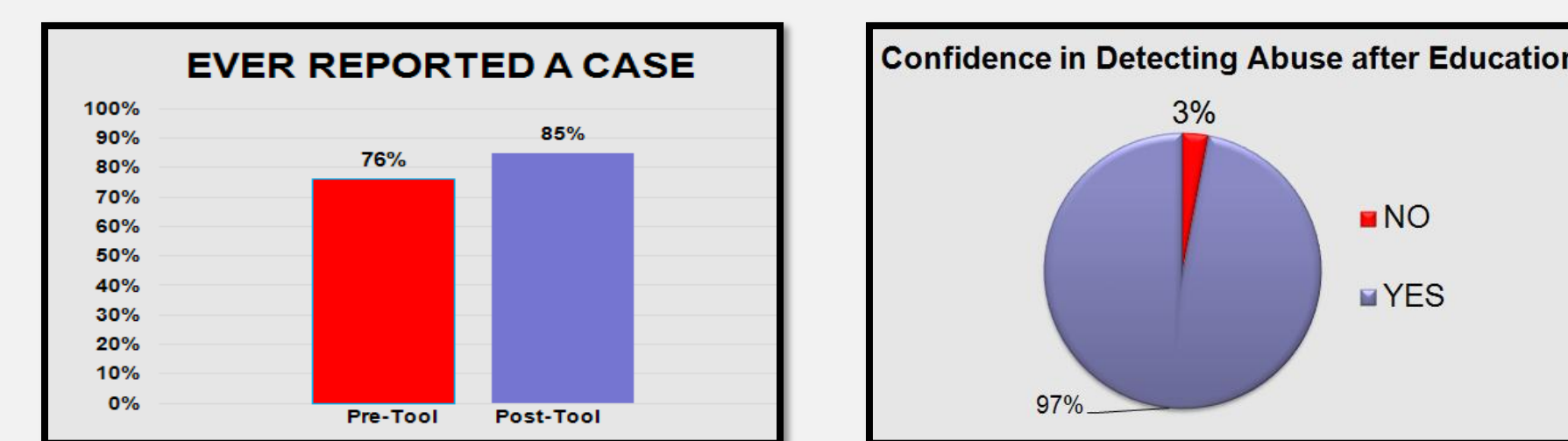
Objective

- To develop a screening tool for identification of (potential) pediatric abuse, with particular emphasis on children less than 1 year of age.
- To identify barriers which prevent early recognition and reporting in suspected child abuse cases for medical staff and the community at large.
- To formulate a collaborative interdisciplinary approach for the detection and care of children and families suffering from abuse and neglect.

Methods

- A pre-survey evaluation tool was used to assess baseline knowledge and comfort level in recognizing child maltreatment.
- Education on child abuse and screening tool was provided to the ED nursing staff.
- The Tool was implemented in the triage setting for all patients ages 0-17.
- A post-evaluation survey was conducted 6 months after the education to determine the nurses' perception on the effectiveness of the screening tool.
- A questionnaire was completed by members of the community to determine their comfort in the detection and reporting of child abuse cases.

Results



97% of participating nurses felt the tool was useful and stated they were more comfortable reporting potential abuse cases.

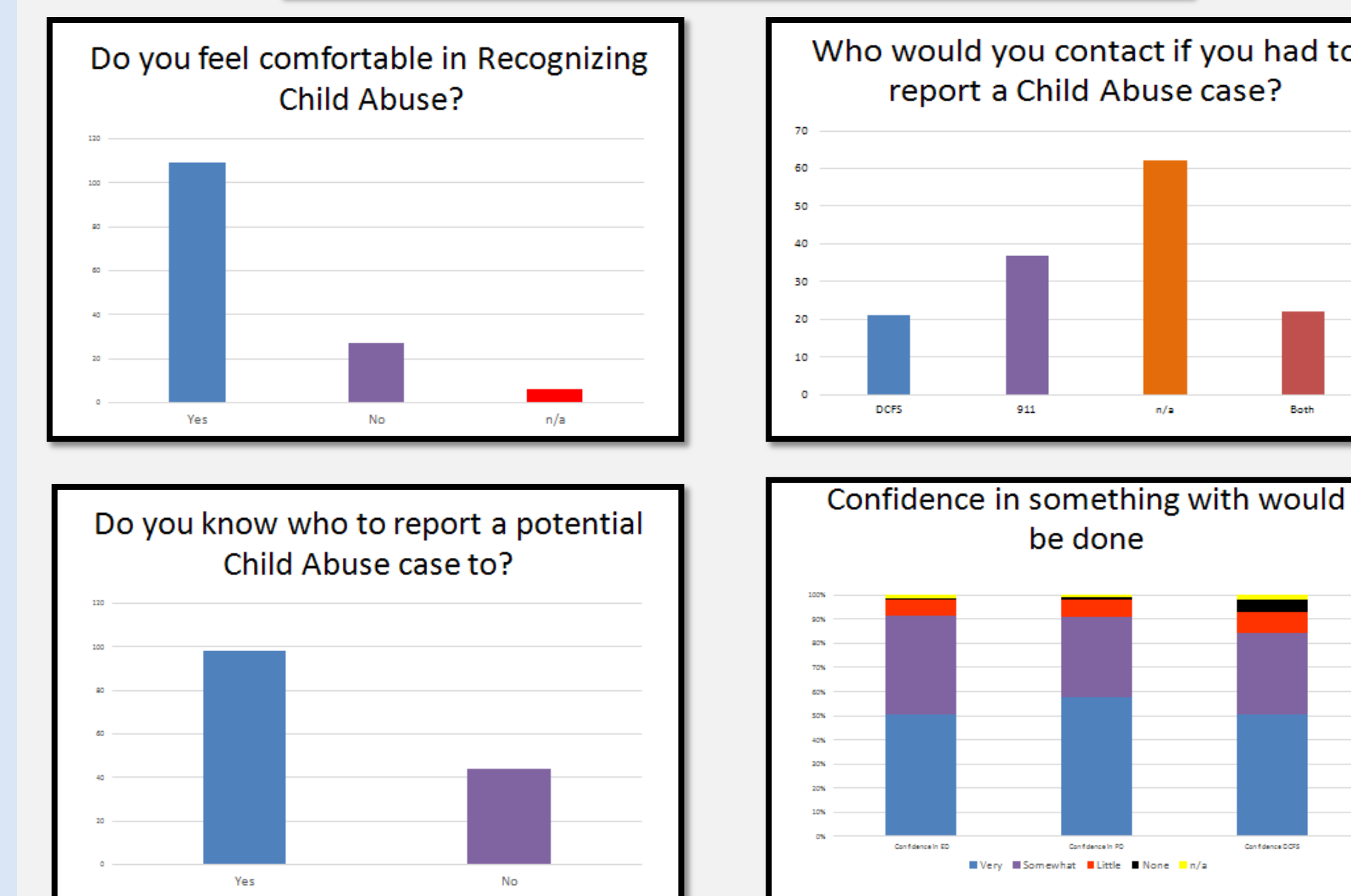
	Pre Screening Tool	Post Screening Tool
Obvious Abuse Cases	20	20
Non Obvious Cases	0	6
Detected Potential Cases	0	43
Reported Cases	20	26

Tools

The MacNeal Child Abuse Screen:
Six key questions during triage

1. Is the story inconsistent with the injury?
2. Was there a delay in seeking medical treatment?
3. Is the behavior of the child to the caregiver's interaction inappropriate?
4. Does the child look improperly cared for with physical signs of abuse?
5. Does the child seem withdrawn?
6. Using your nursing judgment do you believe this child to be in an unsafe environment?

If one of these answers is selected as "yes", the risk of child abuse could be increased and additional action is recommended



Child Abuse Task Force Mission Statement

As members of the community and this task force we strive to continually screen, educate, and support the community and local agencies through best practice to help better serve and protect children.



Conclusion

- The results of the questionnaire demonstrated that the education provided about child abuse/neglect and its detection significantly impacted nurses.
- This raised awareness and broadened the potential for detecting child abuse/neglect, thereby increasing the frequency of reporting and, more importantly, the number of indicated cases discovered:

MacNeal Hospital Reportable Child Abuse Cases							
Number of Investigations	Number Indicated	Number Unfounded	Number Pending	Number of Investigations	Number Indicated	Number Unfounded	Number Pending
74	42	32	0	214	88	117	10
2013				2014			

- The Child Abuse Task force utilizes a multi-disciplinary approach which strives to maximize the awareness, recognition, and reporting of child abuse throughout the community and optimize the education provided to medical personnel.
- The ultimate goal of task force is to break the cycle of child abuse and neglect.

References:

<https://www.childwelfare.gov/pubPDFs/fatality.pdf>
<http://americanspc.org/child-abuse-statistics/>
www.cdc.gov/violenceprevention/childmaltreatment/EconomicCost.html