

Child Abuse:

Child or adult subjected to non-accidental physical, emotional, or sexual violence or injury

Signs/ Symptoms:

- | | |
|---|-----------------------------------|
| ▪ Harsh/ excessive discipline | ▪ Fearful/ hypervigilant behavior |
| ▪ Welts/ bruises/ burns/ other injuries | ▪ Violent environment |
| ▪ Questionable explanation of injury | ▪ Consistent negative messages |
| ▪ Attacked verbally | ▪ Assaulted sexually |
| | ▪ Other |

KBS rating considerations:

Caregiver's Knowledge

Consider parent's knowledge of:

- what abuse is
- what appropriate discipline is
- effects of a violent environment

Child's Behavior

Consider child behaviors that may be red flags for abuse, such as :

- unusual responses to caregiver
- indiscriminant friendliness
- watchfulness
- guardedness
- sexual actions
- affect
- sudden onset of bedwetting

Child's Status

Consider:

- all types of abuse (physical, emotional, sexual)
- visible injuries
- emotional status
- child safety
- observations that are not overtly manifested in child's physical condition such as violence in environment, discipline style, use of inappropriate or dangerous caregivers

Guidelines & Notes:

SPRCDPH Policy Statement: Documentation of abuse and neglect follow the definitions and symptoms set forth in the Omaha System. Using the modifier "Actual" means that one or more of the symptoms listed in the Omaha System are present. Using the modifier "Actual" for problem 15 (neglect) or 16 (abuse) does not mean that the symptoms identified are reportable to Child Protection. Decisions regarding reports to Child Protection are based on Minnesota State law.

	1	2	3	4	5
	None	Minimal	Basic	Adequate	Superior
Caregiver's Knowledge	No knowledge of what child abuse is. Believes inaccurate information about child discipline or care that results in abuse.	Minimal knowledge of appropriate parenting practices for age, but not aware of need to prioritize child's welfare over personal gratification.	Understands that abuse can be physical, emotional, or sexual. Does not understand consequences or effects of violent environment. Knows some resources.	Understands that abuse can be physical, emotional, or sexual, and effects of violent environment. Understands consequences or effects of violent environment. Knows several resources	Knows all aspects of abuse, effects of violent environment, and consequences, and where and how to seek help.
	Not Appropriate	Rarely Appropriate	Inconsistently Appropriate	Usually Appropriate	Consistently Appropriate
Child's Behavior	Child does not engage with caregiver. Child exhibits extremely aberrant behavior that could indicate abuse.	Minimally engages with caregiver	Sometimes engages with caregiver	Often engages with caregiver	Consistently engages with caregiver Child behavior within normal limits for age.
	Extreme S/S	Severe S/S	Moderate S/S	Minimal S/S	No S/S
Child's Status	Experiences physical, emotional, or sexual abuse, is not safe in home environment	Child is exposed to violence in the environment, no overt signs of physical, emotional, or sexual abuse	Occasionally experiences harsh or excessive discipline. Consistently receives negative messages.	Sometimes receives parenting that is negative or inappropriately controlling.	Not abused

Abuse (Child): (pg 219)

Child subjected to non-accidental physical, emotional, or sexual violence or injury

Signs/Symptoms

- Harsh / excessive discipline
- Welts/bruises/burns/other injuries
- Questionable explanation of injury
- Attacked verbally
- Fearful/hyper vigilant behavior
- Violent environment
- Consistent negative messages
- Assaulted sexually
- Other

KBS rating considerations:

<u>Caregiver's Knowledge</u>	<u>Child's Behavior</u>	<u>Child's Status</u>
Consider knowledge of: <ul style="list-style-type: none">• What abuse is• What appropriate discipline is• Effects of a violent environment• Appropriate and positive parenting practices	Consider child behaviors for red flags for abuse, such as: <ul style="list-style-type: none">• Unusual responses to caregiver• Indiscriminant friendliness• Watchfulness• Sexual actions• Affect• Sudden onset of bedwetting• Guardedness	Consider: <ul style="list-style-type: none">• Visible injuries• Emotional status• Child safety• Presence of violence in child's environment• Harsh, abusive, or excessive physical discipline of child• Child left with inappropriate or dangerous caregivers

Guidelines & Notes:

- Abuse-Child is a child problem / pathway. Assess and document child's behavior and status
- Assess caregiver's knowledge
Caregiver knowledge about abuse is documented in the Abuse/Child Problem.
Caregiver behavior and status are documented in the Caretaking/Parenting Problem.
- Domestic Violence is an Abuse-Adult problem and documented on the caregiver's pathway

References:

Children's Trust Fund of Washington, Protective Factors. Available on www.wcpcan.washington

Attachment Theory Research. Available <http://childandfamilypolicy.duke.edu/eca/Attachment/index.htm>

The Massie-Campbell scale of mother-infant attachment indicators during stress. Available: <http://adscale.com>

Abuse - Child

		1	2	3	4	5
		None	Minimal	Basic	Adequate	Superior
Caregiver's Knowledge	Caregiver unaware that current parenting practices have negative impacts on child well being	Caregiver acknowledges some negative impacts from current parenting practices	Caregiver articulates basic knowledge of age appropriate positive parenting practices	Caregiver has adequate knowledge of age appropriate positive parenting practices and gives 3-4 examples	Caregiver readily gives examples of age appropriate positive parenting practices in daily routines	
	Caregiver unable to recognize/unwilling to talk about abusive incidents or abusive discipline practices	Caregiver acknowledges some negative impacts of current disciplinary practices on child	Caregiver has basic knowledge of age appropriate discipline and gives 1-2 examples	Caregiver has adequate knowledge of age appropriate discipline practices and gives 3-4 examples	Caregiver articulates a variety of age appropriate ways to discipline and manage child behavior	
	Caregiver has no knowledge of parenting practices which promote positive social-emotional development of child	Caregiver asks little questions on ways to positively respond to child's behaviors & needs	Caregiver has basic knowledge on ways to positively respond to child's behaviors & needs and gives 1-2 examples	Caregiver has adequate knowledge on ways to positively respond to child's behaviors & needs and gives 3-4 examples	Caregiver articulates appropriate ways to promote positive social-emotional development and behaviors of child	
		Extreme Concern	Severe Concern	Moderate Concern	Minimal Concern	No Concern
Child's Behavior	Child appears anxious and fearful in caregiver's presence	Child appears insecure or ambivalent in caregiver's presence	Child intermittently shows pleasure and anxiousness in caregiver's presence	Child is less tense around caregiver and is able to smile and interact for brief periods	Child enjoys being with caregiver	
	Child does not actively seek out caregiver's attention or avoids interacting with caregiver	Child rarely seeks caregiver's attention and rarely interacts	Child sometimes seeks caregiver's attention	Child frequently seeks out or interacts with caregiver	Child readily seeks caregiver when needing help, needing attention, when wanting to play, or when distressed	
	Child avoids or never looks at, vocalizes to, or reaches out to caregiver	Child rarely looks at, vocalizes to, or reaches out to caregiver	Child sometimes looks at, vocalizes to, or reaches out to caregiver	Child frequently looks at, vocalizes to, or reaches out to caregiver	Child readily smiles, laughs, vocalizes, reaches out to caregiver	
	Child avoids or pulls away from caregiver's touch	Child frequently pulls away from caregiver's touch	Child occasionally pulls away from caregiver's touch	Child rarely pulls away from caregiver's touch	Child seeks out caregiver's touch and enjoys being held by caregiver	

Abuse – Child Continued					
	1	2	3	4	5
	Extreme S/S	Severe S/S	Moderate S/S	Minimal S/S	No S/S
Child's Status	Child actively resists or stiffens when caregiver attempts to soothe or hold child	Child does not relax when caregiver attempts to soothe or hold child	Child intermittently relaxes when caregiver attempts to soothe or hold child	Child relaxes and will allow caregiver to soothe or hold child	Child readily responds to parent's attempt to soothe, caress, or hold child
	Caregiver reports/provider observes multiple or severe incidents of child physical abuse or sexual abuse that require assessment and interventions	Caregiver reports/provider observes some incidents of child physical abuse or sexual abuse that require assessment and interventions	Caregiver reports/provider observes sporadic incidents of child physical abuse, or sexual abuse	Caregiver reports/provider observes rare incidents of child physical abuse, or sexual abuse	No reports or observations of child physical abuse, or sexual abuse
	Child is harshly disciplined with corporal punishment or with psychologically/emotionally abusive discipline methods <i>(examples: severe isolation, demeaning child, punishing child by withholding affection)</i>	Child frequently disciplined with corporal punishment and some emotionally abusive methods	Child is occasionally disciplined with corporal punishment and/or emotionally abusive methods	Child rarely is disciplined with corporal punishment methods Child is rarely disciplined of emotionally abusive discipline methods	Child receives age appropriate behavior management or discipline that is free from abuse
	Child exhibits significant social-emotional health disturbance which requires mental health interventions	Child exhibits some social-emotional health disturbance which requires mental health interventions or Child is accessing mental health interventions	Child having little social-emotional health disturbance Child may have a history of social-emotional health disturbance	Child usually exhibits appropriate social-emotional health patterns for age	Child consistently exhibits appropriate social-emotional health patterns for age
	Child exposed to ongoing incidents of domestic violence	Child frequently exposed to incidents of domestic violence	Child exposed to incidents of domestic violence in the past year	Child has a history of exposure to incidents of domestic violence	Child has never been exposed to domestic violence incidents

Abuse of Adult:

Child or adult subjected to non-accidental physical, emotional, or sexual violence or injury

Signs/ Symptoms:

- | | |
|---|-----------------------------------|
| ▪ Harsh/ excessive discipline | ▪ Fearful/ hypervigilant behavior |
| ▪ Welts/ bruises/ burns/ other injuries | ▪ Violent environment |
| ▪ Questionable explanation of injury | ▪ Consistent negative messages |
| ▪ Attacked verbally | ▪ Assaulted sexually |
| | ▪ Other |

KBS rating considerations:

Knowledge

Consider parent's knowledge of:

- cycle of abuse;
- affects of abuse on self and others;
- law/order for protection;
- community resources;
- safety promoting behaviors;
- awareness of own history and how history effects the present

Behavior

Consider

- client accepting/seeking of information;
- safety promoting behaviors;
- readiness to take action;
- acknowledgment of abuse

Status

Consider:

- all types of abuse
- visible injuries
- level of isolation from financial independence and support
- emotional status
- client-family safety
- observations that are not overtly manifested in client's physical condition such as reaction to partner's presence, etc.
- Do not consider abuser's behavior or status

Guidelines & Notes:

- The problem Abuse when used in an adult client's chart means the client is experiencing or is at risk of experiencing abuse.
- When the client is abusing or at risk of abusing a child, the problem Abuse belongs in the child's chart. Documentation in the adult's chart will be in the Caretaking/ Parenting problem.

	1	2	3	4	5
	None	Minimal	Basic	Adequate	Superior
Knowledge	Unaware of difference between healthy and abusive relationship.	Beginning to be aware that relationship is abusive, doesn't understand she is not to blame	Recognizes that abuse can be physical, emotional, or sexual; knows some resources	recognizes abusive behavior, knows some ways to protect self, and knows community resources.	knows difference between healthy and abusive relationship. Knows legal rights and how to protect self and others.
	Not Appropriate	Rarely Appropriate	Inconsistently Appropriate	Usually Appropriate	Consistently Appropriate
Behavior	Stays in abusive situation	Leaves only when abuse is severe Blames self Makes excuses for partner	Leaves and comes back, inconsistent safety promoting behaviors	Has safety plan for self and children, adheres to order for protection.	Leaves abusive relationship, establishes and maintains safe living conditions for self and others
	Extreme S/S	Severe S/S	Moderate S/S	Minimal S/S	No S/S
Status	Experiences extreme abuse; does not feel safe	Experiences abuse and sometimes feels safe	Experiences occasional abuse but feels safe most of the time	No fear for personal physical safety, relationships are negative or controlling at times	Not abused

Abuse (Adult) Domestic Violence: (pg 219)

Child or adult subjected to non-accidental physical, emotional, or sexual violence or injury

Signs/Symptoms

- Welts/bruises/burns/other injuries
- Questionable explanation of injury
- Attacked verbally
- Fearful/hyper vigilant behavior
- Violent environment
- Consistent negative messages
- Assaulted sexually
- Other

KBS rating considerations:

<u>Knowledge</u> (What client knows)	<u>Behavior</u> (What client does)	<u>Status</u> (How the client is)
<p>Consider knowledge of:</p> <ul style="list-style-type: none"> • Cycle of power and control • Effects of abuse on self and others • Legal protection from abuse • Community resources • Safety promoting behaviors • Awareness of own history and effect on present situation • Safety planning 	<p>Consider client's:</p> <ul style="list-style-type: none"> • Safety planning • Readiness to take action • Acknowledgement of abuse • Client accepting/seeking of information 	<p>Consider:</p> <ul style="list-style-type: none"> • All types of abuse • Visible injuries • Isolation from family and friends • Financial independence, support • Emotional status • Client-family safety <p>Observations that are not overtly manifested in client's physical condition such as reaction to partner's presence, etc. Do not consider abuser's behavior or status</p>

Guidelines & Notes:

- Adult Abuse is opened for DV survivors

References:

- Children's Administration Washington State Department of Social and Health Services. (2010) Social Worker's Practice Guideline to Domestic Violence. <http://www.dshs.wa.gov/pdf/Publications/22-1314.pdf>
- Family Violence Prevention Fund: (2004) "National consensus guidelines on identifying and responding to DV victimization in health care settings", see <http://endabuse.org>

Abuse (Adult) Domestic Violence

	1	2	3	4	5
	None	Minimal	Basic	Adequate	Superior
Caregiver's Knowledge	<ul style="list-style-type: none"> • Unable or unwilling to talk about relationship problems or abuse • May be unaware that abuse is a problem 	<ul style="list-style-type: none"> • Able to articulate some unsafe or abusive behaviors by partner 	<ul style="list-style-type: none"> • Able to articulate safety risks • Identifies who to contact for emergencies 	<ul style="list-style-type: none"> • Recognizes and understands abusive behavior and risks to self/others • Able to identify supportive persons or other community resources 	<ul style="list-style-type: none"> • Articulates what is a healthy relationship • Articulates right to live without harm or abuse in personal relationships
	Extreme Concern	Severe Concern	Moderate Concern	Minimal Concern	No Concern
Caregiver Behavior	<ul style="list-style-type: none"> • Unable to or rarely accesses health care for abuse related injuries • Unable or unwilling to discuss community resources or other supports for abuse • May appear fearful/guarded when talking about abusive partner 	<ul style="list-style-type: none"> • Seeks medical care for injuries • Takes initiative to ask questions or ask for support with abusive behaviors • May take responsibility or makes excuses for partner's abuse • Begins to recognize and discuss safety issues 	<ul style="list-style-type: none"> • Identifies safety risks and starts to develop safety plans • Engages in community resources or other supports for the abuse 	<ul style="list-style-type: none"> • Able to articulate a short term/long term safety plan for self/child • Demonstrates a greater sense of control and comfort with personal relationships 	<ul style="list-style-type: none"> • Reports feeling safe in personal relationships • Lives in an environment that is free of abuse • Client reports/provider observes that personal relationships are positive and meets social/emotional needs
	Extreme S/S	Severe S/S	Moderate S/S	Minimal S/S	No S/S
Caregiver Status	<ul style="list-style-type: none"> • Client reports/provider observes symptoms of physical abuse, sexual abuse, or emotional abuse in the past month • Client reports/provider observes extreme concern for safety with self/children 	<ul style="list-style-type: none"> • Client reports/provider observes periodic physical, sexual or emotional abuse in the past few months • Client reports/provider observes frequent concern for safety with self/children 	<ul style="list-style-type: none"> • Client reports/provider observes occasional abuse in the past year • Client reports some concern of safety for self/children 	<ul style="list-style-type: none"> • Client reports/provider observes minimal abuse in relationships • Client reports having formal/informal support systems • Client reports/provider observes little concern for safety with self/children 	<ul style="list-style-type: none"> • Client reports/provider observes no evidence of physical, sexual or emotional abuse • Client actively engages and utilizes formal/informal support systems • Client reports no safety concerns