



## **MODULE 4**



# **ABUSE, NEGLECT AND FINANCIAL EXPLOITATION**

## TABLE OF CONTENTS

<b>ABUSE AND NEGLECT OVERVIEW .....</b>	<b>4</b>
<b>WHY ARE PEOPLE WITH DEVELOPMENTAL DISABILITIES MORE AT RISK?.....</b>	<b>6</b>
SOME PREVENTION TIPS.....	6
<b>RULE 50 (ILLINOIS ADMINISTRATIVE CODE 50).....</b>	<b>7</b>
RULE 50 MANDATES: .....	7
PROHIBITION OF RETALIATORY ACTION AGAINST AN EMPLOYEE FOR REPORTING:.....	8
<b>ADULT PROTECTIVE SERVICES ACT (320/ILCS 20/) (REPLACES RULE 51) .....</b>	<b>8</b>
ICF/DD RULE 350.....	8
<b>QUESTIONS AND ANSWERS .....</b>	<b>10</b>
ALLEGATION: .....	10
<b>ENVIRONMENTAL CHARACTERISTICS WHICH MAY FOSTER ABUSE/NEGLECT.....</b>	<b>11</b>
WHO WE HIRE.....	11
<b>CHARACTERISTICS OFTEN FOUND IN ABUSERS .....</b>	<b>12</b>
SEXUAL PREDATORS .....	13
WARNING SIGNS TO LOOK FOR WHEN HIRING STAFF:.....	13
<b>NEGLECT .....</b>	<b>14</b>
<b>FINANCIAL EXPLOITATION.....</b>	<b>15</b>
<b>ASSESSING RISK FACTORS .....</b>	<b>16</b>
<b>MALTREATMENT AND ORGANIZATIONAL DIMENSIONS .....</b>	<b>17</b>
<b>FALSE REPORTS OF ABUSE OR NEGLECT .....</b>	<b>18</b>
<b>REPORTING EXERCISE: .....</b>	<b>18</b>
<b>WHAT TO DO WHEN SOMEONE TELLS YOU THEY HAVE BEEN SEXUALLY ABUSED .....</b>	<b>19</b>
<b>WHAT TO SAY WHEN SOMEONE TELLS YOU THEY HAVE BEEN SEXUALLY ABUSED ....</b>	<b>19</b>
<b>QUICK REFERENCE FOR PHYSICAL ABUSE, SEXUAL ABUSE, MENTAL INJURY, OR NEGLECT REPORTING.....</b>	<b>20</b>
<b>COMMON EXCUSES FOR NOT REPORTING.....</b>	<b>21</b>
<b>HOW CAN YOU HELP MAKE THE ENVIRONMENT SAFER? .....</b>	<b>22</b>
<b>BASIC PRINCIPLES OF SELF-PROTECTION FOR PEOPLE WITH DEVELOPMENTAL DISABILITIES .....</b>	<b>23</b>
<b>STAFF TRAINING .....</b>	<b>24</b>
<b>STAFF ATTITUDE.....</b>	<b>25</b>
GROUP DISCUSSION .....	25
TEAMWORK.....	28

SUBSTANTIATED FINDINGS AND THE HEALTH CARE WORKER'S REGISTRY (FORMERLY KNOWN AS NURSE AIDE REGISTRY) .....29

DISCUSSION EXERCISE – DIFFUSING SITUATIONS.....30

COMFORTING THE VICTIM.....31

STRESS AND BURNOUT.....32

WHAT ARE THE WARNING SIGNS OF STRESS?.....32

WHAT CAN BE DONE TO REDUCE STRESS?.....33

PRACTICE WHAT YOU PREACH - MANAGING YOUR OWN EMOTIONS .....33

VULNERABILITY EXERCISE.....34

WHAT ARE THE SYMPTOMS OF BURNOUT? .....35

**PROFESSIONAL ORGANIZATIONS ..... 36**

## ABUSE AND NEGLECT OVERVIEW



We know that most incidents of abuse are underreported, whether or not it involves a person with a disability or someone in the general population. There is also the issue of believability. Often, when reports are made concerning people with disabilities, and developmental disabilities in particular, there are questions about the credibility of the person making the allegation. As you will learn in this training, the credibility of the person does not negate your legal obligation to report allegations of abuse. It is not up to the mandated reporter to determine whether or not an individual is being truthful. You must report all allegations in accordance with your agency or facility's reporting policies and procedures.

### **Did You Know . . .**

The rate of abuse ranges from a low of 25% to a high of 83% for all people with a disability.

The perpetrators are often not strangers, but rather caregivers or someone else who is close to the person with a disability.

More than 90% of people with a developmental disability will experience sexual abuse at some point in their lives. (Valenti-Hein & Schwartz, 1995).

49% will experience 10 or more abusive incidents (Valenti-Hein & Schwartz, 1995)

**Only 3% of sexual abuse cases involving people with disabilities will ever be reported. (Valenti-Hein & Schwartz, 1995)**

## **How can these Statistics be reduced?**

The first step in reducing the occurrence of sexual abuse is recognizing the magnitude of the problem and confronting the truth that people with intellectual and other developmental disabilities are more vulnerable to sexual victimization than those without disabilities.

Abusers typically abuse as many as 70 people before ever getting caught. Without reporting there can be no prosecution of offenders or treatment for victims. Underreporting of sexual abuse incidents involving people with disabilities has in the past, and continues to be a major obstacle in preventing sexual abuse. Only 3% of sexual abuse cases involving people with developmental disabilities will ever be reported (Valenti-Hein & Schwartz, 1995).

Reporting can be increased through educating individuals with disabilities and service providers, improving investigation and prosecution, creating a safe environment for victims to disclose and enforcement of employment policies, such as background checks, as required by Illinois law.

For more information on sexual abuse of people with disabilities, contact:

*The National Task Force on Abuse and Disabilities*  
PO Box "T" Culver City CA 90230

*The National Committee to Prevent Child Abuse*  
332 South Michigan Ave Ste 1600  
Chicago, IL 60604

## Why are People with Developmental Disabilities More at Risk?

- May have a variety of care providers and may be reliant on physical assistance
- Frequently taught to be compliant to requests from caregivers or other authority figures
- Often isolated or living in institutional/group settings
- Have not typically received training that addresses healthy intimate relationships and appropriate sexual activities.
- May not have been allowed privacy or had the chance to learn about the private areas of the body
- May have limited communication skills, therefore making it harder to resist or disclose abuse
- Often not believed or viewed as credible

**Perpetrators of abuse against a person with developmental disabilities may have little fear of consequences because many cases go both undetected and unreported. This increases the likelihood that the abuse will be repeated, many times over a period of months or years.**

### Some Prevention Tips

- Always provide staff with information on agency policies and procedures regarding abuse.
- Make sure staff understands the consequences of abuse.
- Encourage staff to assist people in expanding their network of friends in the community. Social networking can be an effective tool for abuse prevention.
- Make it possible for people to report – modify augmentative communication devices to include words/symbols/pictures to report abuse/neglect and exploitation.



## Rule 50 (Illinois Administrative Code 50)

State law required the Office of Inspector General (OIG) to adopt a formal rule with regulations on reporting allegations. The Rule that was adopted is Rule 50. It is called "Rule 50" because it is located in the Administrative Code, Title 59, Chapter 1, Part 50. Pursuant to this Rule, all DHS and community agency employees are required to report allegations to the OIG.

(59 Illinois Administrative Code 50) is in the OIG Administrative Code that provides procedures on how to implement the law. The complete code can be found at the link below:

<http://www.ilga.gov/commission/jcar/admincode/059/05900050sections.html>

### **RULE 50 MANDATES:**

Any employee who **suspects, witnesses, or is informed** of an allegation of abuse or neglect must report it immediately (**no exceptions!**).

You are a required reporter 24 hours a day, seven days a week, NOT just when you are at work.

Every allegation must be reported to the OIG Hotline within **four hours of the time it was first discovered** by the staff.

For allegations of abuse/neglect, "employee" means any person who provides services at the facility or agency on-or off-site. The service relationship can be with the individual, the facility or agency. Also, "employee" includes any employee or contractual agent of DHS or the community agency involved in providing, monitoring or administering mental health or developmental services. This includes, but is not limited to, owners, operators, payroll personnel, contractors, subcontractors, and volunteers. For purposes of this Part, employee also includes someone who is no longer working for an agency or facility, but is the subject of an ongoing investigation for which OIG has jurisdiction.

### **Remember, for reporting purposes:**

- You are an "employee" 24 hours a day, seven days a week.
- Volunteers and contractors are employees.
- Employees are accountable if they commit abuse or neglect on their personal time.

**An employee who quits or is fired will still be investigated by OIG for abuse or neglect allegedly committed while an employee.**

**Rule 50 can be found in its entirety at:**

**<http://www.ilga.gov/commission/jcar/admincode/059/05900050sections.html>**

### **Prohibition of Retaliatory Action Against an Employee for Reporting:**

"It is a violation of the law to take retaliatory action against an employee who acts in good faith in conformance with his or her duties as a required reporter."

(20 ILCS 1305/1-17.)

### **Adult Protective Services Act (320/ILCS 20/) (Replaces Rule 51)**

The Adult Protective Services Act supersedes OIG Rule 51 for reports of abuse, neglect and financial exploitation for adults living in a **domestic living situation**:

- Adults 18-59 with a disability who live in a domestic living situation.
- Adults age 60+ who live in a domestic living situation
- "Domestic living situation means a residence where the adult with disabilities lives alone or with his or her family or a caregiver, or others, or other community based unlicensed facility.
- "Caregiver" includes Personal Support workers (PSWs) hired by a family.
- "Mandated Reporter" is anyone who has reasonable cause to believe that abuse, neglect or exploitation of an adult with disabilities has occurred may report

**The Hotline for reporting incidents of abuse, neglect and financial exploitation for the above individuals is: 1-866-800-1409**

**Adult Protective Services Act can be found in its entirety at:**

**<http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=1452&ChapterID=31>**

### **ICF/DD Rule 350**

**For information about ICF/DD Rules regarding abuse and neglect, go to:**

**<http://www.ilga.gov/commission/jcar/admincode/077/077003500032400R.html>**



## Policy Process – Abuse, Neglect, Death and Incident Reporting

### Your agency policy should address:

- Definitions of the reportable event events, including abuse and neglect
- Prohibition of screening abuse/neglect allegations
- Timeframes for reporting
- Information on preservation of evidence, when appropriate
- When and how to notify the parent/guardian of significant events
- A systemic review process to evaluate injuries and other adverse events
- A method in place for the systemic review to occur at least quarterly



## Questions and Answers

### **ALLEGATION:**

An allegation is an assertion, complaint, suspicion or incident involving any of the following conduct by an employee, facility or agency against an individual or individuals: mental abuse, physical abuse, sexual abuse, neglect or financial exploitation. You do not have to prove or even believe an allegation to report it.



**Question:** What about "screening"?

**Answer:** You are not allowed to screen allegations. Screening means intentionally not reporting an allegation or omitting or changing any information in the allegation. Screening is also using any other information you know and so deciding to not report an allegation of abuse, neglect or financial exploitation. If the policy says you are to report allegations to your supervisor, you should do so. However, if your supervisor fails to report it to OIG, you are still responsible to report it. You are still a Required Reporter.

Allegations are never assumed true or false: If you hear of an allegation from an individual who frequently lies, you are still required to report it.

Allegations have no statute of limitations: If you hear of an allegation that may have occurred ten or twenty years ago, you are still required to report it.

**Question:** What about multiple allegations? If an individual makes multiple allegations of abuse or neglect every day, do you have to report all of them?

**Answer:** You should report each one as a new allegation. But you must also try to get specifics - names, dates, and times - so OIG can verify that each allegation has already been reported.

**Question:** What about false allegations? If an individual makes an allegation of abuse or neglect that you know is not true, do you still have to report it?

**Answer:** Yes

**Question:** What about recanted allegations? If an individual alleges that he or she was abused or neglected, and then, before you call to report it, he or she admits to just making it up, do you have to still report it?

**Answer:** Yes. Remember... If you are told about abuse or neglect, you must report it. If you witness abuse or neglect, you must report it. If you just suspect abuse or neglect, you must report it.

**Question:** What happens when people are accused of abuse or neglect?

**Answer:** While an investigation is pending, the accused should have no contact with any individuals.



## **Environmental Characteristics Which May Foster Abuse/Neglect**

- Lack of privacy and dignity for the resident
- The expectation of complete compliance as a condition of residence
- High client-to-staff ratio, which limits supervision & opportunities for disclosure
- Staff without a positive attitude towards the residents
- Institutional settings that cluster potentially sexually aggressive and vulnerable individuals

## **WHO WE HIRE**

Residential directors should understand how important hiring and supervision are in creating and preventing abuse and neglect at their residential facilities.

### **Hiring and Probationary Period**

- At the very least, in addition to background checks, hiring should include, extensive interviews, full follow-up on letters of recommendation and employment history.
- Expand hiring practices to include giving potential employees a case to which they must respond, a statement of their personal beliefs about persons with disabilities, and other activities that will provide insight into attitudes toward people they will serve and the field in general.
- To whatever extent possible, consumers should be involved in interviewing and hiring employees.
- Extend the probationary period for new employees.
- Make full use of the probationary period and the specific evaluation points to cull out those who are not well suited for work in services for people with disabilities before they become permanent employees.



## CHARACTERISTICS OFTEN FOUND IN ABUSERS

While anyone can be an abuser, there are characteristics that are often found in the abuser. These signs may include:

- Having been a victim of abuse as a child
- Abusing drugs and/or alcohol
- Having difficulty controlling anger
- Being overly jealous
- Having recurring mental health problems
- Having financial difficulties and poor employment records
- Having limited social support systems
- Displaying an attitude of indifference and not caring for the victim



When accompanying the individual served to a health care appointment, an abuser may:

- Insist on coming into the examining room with the individual
- Control or dominate the health care appointment
- Be overly solicitous
- Insist on not leaving the individual alone with the medical professional.

## **Sexual Predators**

While a sexual predator can be anyone, studies have shown that, in 8 out of 10 rape cases, the victim knows the perpetrator. It is reported that 4 out of 10 sexual assault cases happen in the homes of the victims.

Some characteristics commonly found among sexual abusers are:

- Excessive or inappropriate eroticism (i.e., the employee brings pornographic material to work, seems preoccupied with sex)
- Perpetrates other forms of abuse
- Seeks isolated contact with individuals
- Abuses drugs or alcohol
- Has a history of childhood sexual and physical abuse
- Behaves immaturely
- Can be socially isolated
- Has a preference for impersonal sex and hostility toward women
- Is young (the average age of arrest is 31)



## **Warning Signs to Look for When Hiring Staff:**

Evaluate, and watch out for people who may have some of the characteristics that are listed above, or if they:

- talk about people with disabilities in a way that is either overtly demeaning or seems like they have a negative attitude toward them.
- Seem to have a need to have a lot of control.

## NEGLECT

"Neglect" means an employee's, agency's, or facility's failure to provide adequate medical care, personal care, or maintenance, and that, as a consequence, causes an individual pain, injury or emotional distress, results in either an individual's maladaptive behavior or the deterioration of an individual's physical condition or mental condition, or places an individual's health or safety at substantial risk of possible injury, harm, or death.

### Some Categories of Neglect Include...

- Unsupervised
- Failure to secure assistive device
- Medication error
- Failure to prevent unauthorized behavior technique
- Failure to report incident
- injury
- Failure to address hygiene issues
- Failure to complete nursing duties
- Staff refusal/unwillingness to assist
- Failure to ensure dietary restrictions (Choking)
- Improper lifting/transfer techniques
- Inadequate safe vehicle operation
- Failure to secure unsafe item
- Failure to provide dental services
- Inadequate medical care
- Insufficient amount of food
- Inadequate nursing services
- Failure to train staff to report to OIG
- Failure to follow physicians orders
- Failure to complete fire drills



## FINANCIAL EXPLOITATION

**Financial Exploitation:** Financial exploitation is taking unjust advantage of an individual's assets, property, or financial resources through deception, intimidation, or conversion (theft), for the employee's, facility's, or agency's own advantage or benefit.

### Examples of Financial Exploitation:

- Removing money from an individual's purse.
- Taking money from the individual's trust fund.
- Stealing money from a bank account.
- Using and not returning an individual's clothing.
- Taking food that belongs to an individual.
- Coercing an individual to trade you for something he or she has that you want.



### What if...

Ronald's mom gives him \$20 every week but gives it to him as two \$10s. That way, he doesn't have to take it all on one outing, since she knows that he likes to spend everything in his possession.

Staff member Lauren convinces Ronald to let her hold onto his second \$10 bill, so that he doesn't make his mom mad by spending it right away.

Ronald tells you that Lauren never gives him the second \$10 back, claiming that if he spends it, his mom would get angry with both of them. He says that Lauren has been doing this for the last six months or so.

### Is that alleged financial exploitation?





## **Maltreatment and Organizational Dimensions**

It is not enough for a human service agency to have a zero tolerance policy outlawing abuse in their corporation. We have those policies/statements now, but abuse still occurs. It is not enough to provide training in consumer/resident/client rights, and expect that rights will not be violated. We have that training now, however rights violations continue to occur. **When organizations react to the negative influences that steal into their environment in a negative way, is it any wonder that employees react to the persons they are serving in a negative way.** Words without action are useless. Often, the action of preference is disciplinary in nature against the staff. Yet, terminating the abusive employee has not eliminated abuse from our agencies either. What more can we do?

The answer is very simple, but seems very hard to implement. An organization must actively participate in abuse prevention. Participation includes five basic components: the way we design and deliver services, the people we hire, the way we treat the people we hire, the way we create our organization (our values, relationships, communication, conflict resolution), and the way we respond to negative influences that will most certainly occur. The organization must have a clearly defined mission and akin to that, a means of continually assessing, evaluating, planning and delivering those services in a meaningful manner.

With that clearly outlined, we must recruit, select and retain persons who will work toward fulfilling that mission. Once we have those people on board, we must make them feel valued, treat them with respect as the integral and indispensable people they are. We owe it to them and the people entrusted to our care that staff have a clearly defined professional identity and a recognized set of skills for which they are held accountable and for which they can be proud. Training, supervision, evaluation and organizational recognition for a job well done are all essential components of the human services agencies responsibility. Polarization (management vs. direct care staff, us vs. them mentality) cannot be allowed. Open communication will reduce the potential for rumor and innuendo while at the same time building trust and better grounds for conflict resolution. It is imperative that the organization be viewed inside and out as a cohesive group of people, with the same goals and outcomes in mind, namely those of providing excellent care. Finally, when negative influences do become apparent, the organization needs to respond in an active, meaningful manner. Stagnation, isolation, dishonesty, incivility and general deterioration cannot be allowed to seep in and destroy staff morale, or trust in the organization's administration.

Poise Under Pressure; Organizational Dimensions of Abuse by Novelene Martin, Lori Wertz, Dewi Morgan-Jones, and Jean Morgan  
Abuse Prevention Specialists

## **False Reports of Abuse or Neglect**

Reports made by individuals with a documented history of making false accusations must be taken seriously. You have little way of knowing whether or not the individual is telling the truth "this time." Individuals with a known history of making false reports are at increased risk because perpetrators know they are an easy target and it is likely that the report will not be taken seriously. All incidents should be addressed clinically and through a behavior management program and/or training.

Thorough documentation will help safeguard staff in the event a false report is made against them. In the event it is determined that the report is false, consider:

- Providing counseling services and/or training to the people involved.
- Meet with the falsely accused employee one on one to discuss the incident in an effort to re-establish a positive working relationship with the person who made the false report.

### **Reporting Exercise:**

Keisha has a documented history of making false reports of abuse and neglect by staff.

All previous allegations were determined to be unsubstantiated. This time, Keisha reported to you that early today, a DSP at the home yelled at her, called her "stupid," and slapped her on her ears.

### **Reporting Exercise Discussion Questions**

1. What can you do to minimize the negative impact on individuals and the home/work environment while the investigation is being conducted?
2. What can you do to maintain confidentiality while the investigation is being conducted?
3. The allegation is determined to be unfounded. What steps should you and other interdisciplinary team members take to clinically and behaviorally address the problem of the individual making false allegations?
4. What could you do to reintroduce the employee into the workplace?

## **WHAT TO DO WHEN SOMEONE TELLS YOU THEY HAVE BEEN SEXUALLY ABUSED**

***First, respond to person's immediate needs, then report incident to OIG within the required time frame***

- Provide Privacy
- Explain Options
- Support Choices
- Ensure Safety

### **Do**

Believe

Respect

Support

Assist

### **Don't**

Doubt

Judge

Blame

Punish

## **WHAT TO SAY WHEN SOMEONE TELLS YOU THEY HAVE BEEN SEXUALLY ABUSED**

<b>Say:</b>	I believe you. I'm sorry this happened to you.
<b>Ask:</b>	How can I help you? What do you need right now?
<b>Tell:</b>	We have a crisis center in town that can help you on the phone or in person.
<b>Help:</b>	Would you like to call them? I can help you with that.
<b>Protect:</b>	What would make you feel safe right now? Let's make a safety plan.

For more information on this topic, please call the Rape Crisis Center at 800-656-4673 or visit the Illinois Department of Human Services website at [www.dhs.state.il.us](http://www.dhs.state.il.us) or Illinois Coalition Against Sexual Assault at [www.icasa.org](http://www.icasa.org)

## QUICK REFERENCE FOR PHYSICAL ABUSE, SEXUAL ABUSE, MENTAL INJURY, OR NEGLECT REPORTING

<u>If</u> the consumer is:	<u>And</u> you suspect that the perpetrator of the abuse/neglect is:	<u>Then</u> you should call/inform:
Under 18, living in a private home in the community	A family member or caregiver	Your supervisor DCFS HOTLINE 1.800.252.2893
Under 18 and enrolled in any of your agency's programs (non-ICF residential, day programs, etc. included)	A staff member from your agency	Your supervisor OIG HOTLINE 1.800.368.1463
Under 18 and enrolled in any of your agency's programs (non-ICF residential, days program, etc. included)	A family member or caregiver	Your supervisor DCFS HOTLINE 1.800.232.2893
Over 18 and enrolled in any of your agency's programs (non-ICF residential, day programs, etc. included)	A staff member from your agency	Your supervisor OIG HOTLINE 1.800.368.1463
Over 18 and enrolled in any of your agency's programs (non-ICF residential, day programs, etc. included)	A family member or caregiver	Your supervisor OIG HOTLINE 1.800.368.1463
Over 18 living in a setting funded, licensed, or certified by DHS, but not run by your agency (ex: individual attends your agency's day program, lives in CILA at another agency)	A third-party staff member	Your supervisor OIG HOTLINE 1.800.368.1463
Between 18 and 59 and living in a private home in the community	A family member or caregiver	Your supervisor OIG HOTLINE 1.800.368.1463
Over 18, living in a nursing home or facility (ICF included) run by your agency	A staff member from your agency	Your supervisor DPH HOTLINE 1.800.252.2893
Over 18, living in a nursing home or facility (ICF included) not run by your agency	A third-party staff member	Your supervisor DPH HOTLINE 1.800.252.2893
Over 60, NOT in a nursing home (living in private home in community)	A family member or caregiver	Your supervisor DOA HOTLINE 1.800.252.8966

- **IF THERE IS IMMEDIATE DANGER or A MEDICAL EMERGENCY, CALL 911 and then inform your supervisor.**
- **In cases of financial exploitation, inappropriate staff conduct, inappropriate staff interactions, inform your supervisor.**
- **DPH may also require reporting of serious injury. ALL client deaths should be reported to supervisor, and then to appropriate agency, regardless of whether abuse/neglect is suspected.**
- **DHS OIG now accepts referrals of abuse/neglect allegations of the 18+ individuals with a disability still in school with an IEP. If they can investigate under Rule 51, they will. If not, they will refer it to the appropriate law enforcement agency.**
- **In the Act, "Adult student with a disability" means an adult student, age 18 through 21, inclusive, with an Individual Education Program, other than a resident of a facility licensed by the Department of Children and Family Services in accordance with the Child Care Act of 1969.**

Source: Clearbrook

## Common Excuses for Not Reporting

There are many excuses given for not reporting abuse or neglect. Mostly people do not report because of a selfish concern for themselves, and not for the individual. No excuse justifies not reporting. No excuse justifies placing individuals at continued risk.

- Too much paperwork to complete
- Too disruptive to the routine of the home (day program)
- My co-workers will be angry with me



**What other 'excuses' can you think of?**

- 
- 
- 

**What can be done to counteract these excuses?**

**How can you help ensure that staff will report?**

## How Can You Help Make the Environment Safer?

- Support the individual in finding activities that he or she enjoys and which can boost self-esteem
- Make sure the facility carefully screens staff before employment
- Be a facility that supports regular visits by outside agencies
- Teach appropriate sexuality education. Do not assume that it's not necessary even if it makes you uncomfortable
- Be available to talk in an unrushed manner on a regular basis
- Teach that there are some valid situations for noncompliance
- Provide support for positive, healthy relationships and romantic partners



## **Basic Principles of Self-Protection for People with Developmental Disabilities**

### **Teaching Self-Protection**

Any program of defensive strategies for people with developmental disabilities should also acknowledge that they may still not be able to prevent the abuse and the sole responsibility of what happens falls on the perpetrator. Be very careful not to imply that if a person is abused, he or she must not have followed the rules.

People with developmental disabilities can learn skills that will reduce their vulnerability to sexual abuse. When introducing personal safety concepts it is important to gauge your presentation to the age, type of disability, and the learning style of the audience.

- Verbalize your instructions/ideas appropriately.
- Stick with the concrete, avoid the abstract.
- Break down complex ideas into smaller, clearer notions. Check frequently to make sure your message is being received as intended.

### **People should learn...**

- A clear understanding of healthy sexual expression.
- Generally know what is exploitative or harmful.
- To be aware that sexual contact as a condition of service provision or by service providers is abuse.
- To be aware that everyone has a right to some privacy. Your body, personal details about yourself, etc. do not need to be discussed or displayed in a manner that is embarrassing or without dignity. You have a right to say "NO" to touch that makes you feel uncomfortable. You can say "no" even to someone who you love or someone who provides care for you.
- To seek out someone you trust who has the time to listen. Tell this person anytime someone is bothering you or if you need help deciding if a situation is okay or not.
- Personal rights. Nobody has a right to touch you if you do not want them to. You have a right to be safe in your home, at work, and safe in the community.
- To feel good about themselves. They should know that they are special and powerful and can stop or report someone who tries to make them feel differently.

## STAFF TRAINING

### Abuse and Neglect Training:

- All employees (including part-time and contractual employees and volunteers) must be trained in the requirements of Rule 50 upon being hired and at least biennially thereafter.
- All supervisors, managers, and executives need continuous training in detecting and preventing abuse and neglect including targeted training on characteristics of victims, potential abusers, and substantiated abuse.
- Give supervisors and managers regular access to the “facts” and outcomes associated with specific abuse reports so they can learn more about the entire process of reporting, investigating, substantiating, resolving, and preventing abuse.
- Offer specific training for supervisors to assess work climate and culture, and generate and implement improvements.



### DHS Required Abuse and Neglect Training

The CILA Provider shall ensure that:

- All employees successfully complete DHS OIG approved 59 Ill. Admin. Code 50 training at the time of hire and
- A biennial (every two years) refresher training course approved by DHS OIG pursuant to Rule 50.

DHS also requires biennial training that contains the following components:

- Defines who is a required/mandated reporter
- Identifies what needs to be reported
- Describes how to report an allegation of abuse, neglect or death
- Provides the OIG Hotline number
- Defines timelines for reporting, including requirement that OIG be called within 4 hours of initial discovery, even when agency policy requires first reporting to management staff
- Includes prohibition of screening of calls
- Outlines the potential consequences of not fully cooperating with an OIG investigation
- Outlines the consequences of being the abuser in a substantiated allegation of abuse or neglect of an individual receiving services, including loss of job, criminal charges and referral to the Health Care Worker Registry.

Sign-in sheets for any staff training **must**:

- Be maintained and readily available for review by Department staff.
- Include the following components: Module/class name, Class date, Class times, Instructor signature and Trainee signature.



## **STAFF ATTITUDE**

Attitude is what you think or feel about a person, object, situation or fact. The attitude that you bring to work each day directly impacts the individuals you support, your job performance and the performance of the staff you supervise. Your attitude can also contribute to creating and maintaining a positive, pleasant and safe environment or can contribute to creating a negative, hostile, fearful, destructive environment.

### **Promote positive attitudes and working environments by:**

#### **Managing Through Leadership and Coaching**

Recognize employees' accomplishments and contributions and communicating with employees on a regular basis.

- Be accessible
- Assess and periodically reassess your approach to employee recognition

#### **Affirming and Enhancing the Capabilities and Motivations of Employees**

- Acknowledge and build upon the strengths of employees
- Listen to the opinions and suggestions of employees, ask for input, and give feedback so the person knows s/he has been heard.
- Consistently provide positive, constructive feedback.
- Acknowledge success.
- Emphasize strengths.
- Acknowledge failures.
- Concentrate on solutions rather than problems.
- Determine what the problem is in order to quickly move on to find a solution.
- Avoid focusing on assessing blame.
- Refocus the team by putting energy into identifying strengths and solutions.

#### **Group Discussion**

- How do you acknowledge people's successes at your facility?

## **Rational Detachment or . . . How to Remain Calm**

First of all...don't take it personally!

We have all witnessed people who, even under difficult and stressful situations, somehow manage to remain calm and professional. How do they do it?

Rational Detachment is a key factor in setting limits with those people you support. Without this ability, team members can find themselves reacting in a challenging or defensive manner, which will only escalate the situation.

As caregivers, we must find strategies to use to stay in control. To diffuse crisis situations when they occur, the following techniques can be considered:

### **Strategic Visualization**

Visualize incidents that may occur and practice how to respond to them in a calm and professional manner. By making these plans ahead of time, responses will likely be more rational and well thought out when the need to respond arises.

### **The Team Approach**

Have another staff person available when working with someone you support who may take your communication with hostility. Knowing that there is someone there to assist makes it easier to maintain your professionalism.

### **Positive Self-Talk**

Remind yourself that if you are the target of an outburst or negative situation, you are rarely the cause of the behavior.

Part of “remaining calm” is assessing the situation to determine what the best way is to diffuse the situation. Use your detective skills. Try to figure out what is bothering, upsetting, or somehow affecting the individual. You may only have a few seconds to assess the situation.

- Calmly talk to the person(s) about what happened.
- Calmly explain to them what the options are for doing something different.
- Give the person(s) readily available choices for how to handle the situation.
- Use humor to break the tension.
- Create a diversion; direct the individual’s attention to something or someone else.
- Support the individual in taking a quiet rest period to relax or engage in an enjoyable activity.
- Change the surroundings.
- Release the individual from the demands that are causing the individual to be upset.

Adapted from:

“Rational Detachment-How to Remain Calm and Not Take it Personally” April 5<sup>th</sup>, 2010, Crisis Prevention Institute, Inc.

## Teamwork

Remember the importance of teamwork in creating and maintaining a trust-producing, healthy, engaging environment.

Teamwork is...

- Work done by several people with each person doing a part in order to ensure the successful completion of a job.
- Effective teamwork requires that each person compromise or bend a little in order to complete the work in the best possible way for everyone.
- Teamwork requires putting aside personality differences or negative personal feelings about co-workers.

### Teamwork Discussion Question:

What are some characteristics of an ideal situation when it comes to teamwork?

What can you do you do to promote effective teamwork at your agency?



### Performance Appraisal and Progressive Discipline

- Performance appraisal and feedback should be constant.
- Supervisors must use both day-to-day feedback practices as well as the formal performance appraisal system to recognize and reward positive interactions and skilled work.

## **SUBSTANTIATED FINDINGS AND THE HEALTH CARE WORKER'S REGISTRY (formerly known as NURSE AIDE REGISTRY)**

The Department of Public Health maintains a registry that, among other things, identifies health care workers who have had substantiated findings of abuse and neglect made against them. OIG is only one entity that reports names to the Health Care Worker Registry (formerly known as Nurse Aide Registry) for physical abuse, sexual abuse or egregious neglect. OIG reports to the Health Care Worker Registry the names of employees who they have substantiated as having committed physical abuse, sexual abuse or egregious neglect, unless there is still pending a grievance or a petition filed under 20 ILCS 1305/1-17(s)(3). Referral to the Health Care Worker Registry applies to all employees (which includes owners/operators, contractors, subcontractors, and volunteers). Substantiated findings of mental abuse and non-egregious neglect are never reported to the Health Care Worker Registry.

### **Perpetrators whose names are placed on the Health Care Workers Registry:**

- are ineligible for employment in the field of human services in Illinois.
- are prohibited from being employed in providing, administering, or monitoring services.

### **Keep in mind that you should:**

- maintain the routine of the home/work environment to the maximum extent possible.
- report and ensure the confidentiality and privacy of all parties involved to the maximum extent possible. Do not participate in gossip.
- Keep thorough documentation of your actions, your co-worker's actions, and those of the clients you support will help safeguard you in the event a false report is made against you.



## **Agency Response to Reports of Abuse:**

- If firing is the only response to abuse, it will reduce reporting and make it more likely that abuse will occur.
- Many supervisors have said that employees are hesitant to report because they believe that nothing is being done in response to their reports. Therefore, agencies should make individuals aware of the actions and outcomes associated with each report of abuse within the boundaries of employee confidentiality and rights.
- Since employees look at the agency's response to determine future actions, it is important that all employees know what to expect when they report abuse.

From: "What Do Supervisors, Managers, and Executives Know About Abuse?" Abuse Prevention Specialists TM June 2010

**Learning how to diffuse a situation takes time, practice and teamwork!  
Use your leadership and coaching skills to teach this skill.**

### **DISCUSSION EXERCISE – DIFFUSING SITUATIONS**

If staff members do not work as a team, there may not be consistency in how an individual's ISP is carried out.

What additional strategies do you use to diffuse a situation between staff members?

What do you do to support DSPs and other caregivers to effectively assess and diffuse a situation?

## Comforting the Victim

You should try to comfort victims of abuse, neglect, or exploitation. It is important to say things that will reinforce the fact that abuse should have not occurred, such as:

- "You do not deserve to be abused."
- "You are not responsible for the abuse."
- "What happened to you is a crime."
- "There is help available; you are not alone."

When working with possible victims of abuse, neglect, or exploitation, you should:

- Assess the extent and circumstances of the abuse, neglect, or exploitation in order to offer appropriate client care and referral
- Protect victims and provide a safe environment for their care
- Recognize clients' rights to be free from physical, sexual, and emotional abuse, neglect, and exploitation while under the care of this facility

While an investigation is pending, the person should have no contact with the alleged abuser.



## Stress and Burnout

Providing supports to persons with developmental disabilities can be very rewarding. However, the day-to-day responsibilities and sometimes demanding work can end up taking a toll on both your body and your mind causing stress and burnout. People who are "burned out" may experience fatigue, stress, anxiety, and depression. When ignored, stress can lead to irritability that may lead to abuse and neglect. From the very start of your role as a DSP, you should build in ways to be a DSP to yourself!

### What is Stress?

Stress is a reaction to changes that require you to adjust or respond. Our bodies are designed to feel stress and react to it. Not always a bad thing, stress keeps us alert and ready to escape danger.



It's not always possible to avoid change or the situations that can cause stress; as a result, you can begin to feel overwhelmed and unable to cope. When it persists, stress can affect the body's immune system, leading to illness.

When you are not sure of the exact cause of your stress, it may be helpful to know the warning signs. Once you can identify these signs, you can learn how your body responds. Then you can take appropriate steps to reduce the stress.

### What Are the Warning Signs of Stress?

Your body sends out physical, emotional, and behavioral warning signs of stress.

#### Emotional warning signs:

- Anger
- Inability to concentrate
- Unproductive worry
- Sadness
- Frequent mood swings

#### Physical warning signs:

- Stooped posture
- Sweaty palms
- Tension headaches
- Neck pain
- Chronic back pain
- Chronic fatigue
- Weight gain or loss
- Problems with sleep



## **Behavioral warning signs:**

Over-reacting  
Acting on impulse  
Using alcohol or drugs  
Withdrawing from relationships  
Changing jobs often

## **What Can Be Done to Reduce Stress?**

### **Tips for managing stress include:**

- Keep a positive attitude. Believe in yourself.
- Accept that there are events you cannot control.
- Be assertive instead of aggressive. "Assert" your feelings, opinions, or beliefs instead of becoming angry, combative, or passive.
- Learn to relax.
- Exercise regularly. Your body can fight stress better when it is fit.
- Stop smoking.

## **Practice What You Preach - Managing Your Own Emotions**

Throughout every day of our lives we all experience many emotions, such as anger, joy, frustration, and sorrow. As a QIDP, middle manager or professional staff, it is important that you serve as a role model for DSPs and other caregivers in managing your emotions. This means:

Doing what you say you will do and doing what you tell others to do.

Being accountable for what you say and do.

Acknowledging failures and successes.

Concentrating on solutions rather than problems

Determining what the problem is in order to quickly move on to find a solution.

Avoid focusing on assessing blame.

Refocus the team by putting energy into identifying strengths and solutions.



Awareness is the key to managing your own emotions. Acknowledge how you are feeling and how your mood might impact individuals and others.

**Have you ever been...**

Angry with your boss, but you took your anger out on your spouse?	Frustrated with the person ahead of you at the checkout counter, but took your frustration out on your kids?
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Taking your anger or frustration out on individuals, DSPs and other caregivers is wrong and is inappropriate and may be a form of abuse or neglect.

**Recognizing Your Own Vulnerabilities**

Vulnerabilities are situations that put you at risk for losing control of your emotions.

- Be aware of the situations that set you off, make you lose control, try your patience, trigger your anger and challenge your need to be in charge.
- Awareness of your own vulnerabilities is the first step in preventing situations that are difficult for you to handle from arising.
- Once you are aware of the kinds of situations that put you at risk, be on the lookout for these situations and develop strategies for keeping your emotions in check.

**Vulnerability Exercise**

1. What work-related situations make you vulnerable to losing control of your emotions?
  
2. In your role as a supervisor or manager, what can you do to help DSPs and other caregivers recognize their own vulnerabilities and develop strategies for keeping their emotions in check?

What strategies do you use to keep your emotions in check?

## What Are the Symptoms of Burnout?

The symptoms of burnout are similar to the symptoms of stress and depression.

They include:

- Withdrawal from friends, family and other loved ones.
- Loss of interest in activities previously enjoyed.
- Feeling irritable, hopeless, and helpless.
- Changes in appetite, weight, or both.
- Changes in sleep patterns.
- Getting sick more often. Flare up of your own medical problems or a new illness.
- Feelings of wanting to hurt yourself or the person for whom you are caring.
- Emotional and physical exhaustion, chronic fatigue.
- Rough handling of the persons with the disability.



## Professional Organizations

A professional is someone who has specialized knowledge, preparation, and commitment to a type of work or career.

### Professional Enhancement for Supervisors

- Join and participate in the National Association of Qualified Mental Retardation Professionals or another professional organization affiliated with your profession.
- Continually increase your knowledge and skills.
- Attend local, state and national conferences, workshops and trainings.

### Helping DSPs with Professional Enhancement

Encourage DSPs to join their professional organization - the National Alliance for Direct Support Professionals.

Encourage and facilitate opportunities for DSPs to improve their knowledge and skills.

**[www.nadsp.org/](http://www.nadsp.org/)**

Encourage and facilitate opportunities for DSPs to attend local, state, and national conferences, workshops and other trainings