



Woodstock and District Developmental Services

SECTION: Ethical Practices, Rights & Responsibilities	SUBJECT: Abuse	REF: SS-1.04 DATE: April 1, 2008 REVISED: April 2011, May 2019 Reviewed: August 2019, Sept 2020, August 2021
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All employees, volunteers, and board members of WDDDS who have direct contact with persons with disabilities will receive training on the abuse policy and demonstrate an awareness of what steps to take when reporting abuse. All people receiving service will also be made aware of this policy in a way to help them best understand what abuse is and how to properly report abuse. All employees and people receiving service are required to review the abuse policy annually. For further information, outlined in this policy, please refer to approved training videos, handouts and to Regulation 299/10. This document provides some general guidelines around abuse reporting, signs, and other information.

There are three (3) factors which need to be remembered:

1. Staff members are expected to show respect and consideration for people with a developmental disability. All persons have the right to live in a state of dignity and to feel safe.
2. WDDDS has a zero tolerance for any abuse or force used with or toward a person receiving services and supports. In the case where a situation requires any restraint or defensive measures as in a situation when the person supported is physically aggressive and of potential harm to themselves or others, then only approved restraints, holds and blocks as taught through Non-Violent Crisis Intervention may be used to gain control of the situation. (See policy SS-9-1.02). An incident report must be completed by staff/supervisor and the On-Call Manager is to inform the Director to determine if the incident is deemed a Serious Occurrence. Other forms of physical force (outside of the methods approved through NVCI) will be considered abuse and the police will be called to investigate.
3. In the situation where there is an allegation of abuse or reasonable suspicion of abuse that may be criminal in nature, then police must be called to investigate. Once police have been called, then no internal investigation or questioning of what happened should occur. The police must complete their investigation first before the agency does any internal inquiry. During this time the alleged abuser should have no further access to the victim. (Regulation 299/10)

POLICY STATEMENT:

Abuse of any description will not be tolerated or condoned by WDDS. Every person has the right to a physically and psychologically safe environment and the right to live in a state of dignity.

At no time should a staff member use force with any person (except in self-defense and in accordance with NVCI). On any occasion when force is used, it must be reported to the supervisor and an Incident Report must be completed. All staff that provide direct support will be trained in Non-Violent Crisis Intervention.

The relationship between staff members and people supported must be open and friendly. However, care should be taken to ensure that relationships cannot be misconstrued by the person receiving supports or the community.

All staff of WDDS have a legal and moral obligation to report an abusive situation immediately to the police.

Reported abuse will be considered confidential and no reprisal will be made against the person reporting abuse except where there is malicious intent. In the event that a staff person is accused of abusing a person receiving supports, they will be considered innocent until proven guilty by a police investigation.

DEFINITIONS:

What is abuse?

Any action or behavior that causes or is likely to cause physical injury or psychological harm or both to a person with a developmental disability, or results or is likely to result in significant loss or destruction of their property, and includes neglect

There are many specific forms of abuse. These are:

Sexual abuse: Sexual abuse is the unwanted touching of a person's sexual body parts. The lack of consent is the defining feature. It is important to note that the hierarchy makes it impossible for there to be consent between a person with a disability and their care provider. Sexual Abuse is also about the denial of a person's right to engage in consenting sexual behaviour.

Physical Abuse: Physical Abuse is an act of assault, or a threat of an assault, such as hitting, slapping, and burning that cause or could cause actual physical injury or fear of physical injury.

Verbal Abuse: The use of demeaning language and/or name calling. Negative verbal depictions of disability or attractiveness are also forms of verbal abuse.

Psychological abuse: Whenever constant criticism, insulting, threatening, degrading, humiliating, intimidation or terrorizing of a person occurs, this is deemed psychological abuse.

Emotional abuse: Emotional abuse is the misuse of power, in any way, to cause a person to lose respect for themselves.

Psychological and Emotional abuse: can also include the demeaning of one's faith or beliefs or the imposition of another's faith onto the person.

Financial abuse: Financial abuse constitutes the misuse, misappropriation or restriction of someone's financial assets for personal gain.

Neglect: Neglect is about the failure to provide the necessities of life such as food, clothing, shelter, care or supervision. People with disabilities, in care, have a right to expect that their basic needs will be met and they will be provided with appropriate supervision for their age and their developmental needs.

Exploitation: Taking advantage of a person's disability to trick or manipulate for personal benefit is exploitation. This includes persuasion to do things that are illegal or not in the individual's best interest.

Harassment: The use of any comments, conduct, or gestures that are insulting, intimidating, humiliating, malicious, degrading, offensive, or discriminatory, directed toward an individual or group of individuals.

Sexual harassment: The use of any comments or conduct of a sexual nature undertaken with the intent of causing offence or humiliation.

POTENTIAL INDICATIONS OF ABUSE:

THE FOLLOWING INDICATORS ARE TO ASSIST STAFF IN RECOGNIZING ABUSE OR NEGLECT. THE PRESENCE OF ANY OF THESE INDICATORS DO NOT IN AND OF THEMSELVES PROVE ABUSE HAS OCCURRED. THEY ARE SIGNS WHICH SHOULD ALERT STAFF TO THE FACT THAT ABUSE MAY HAVE OCCURRED.

PHYSICAL ABUSE:

PHYSICAL SIGNS:

- marks, welts, bruises, scratches, punctures, or cuts which are unexplained or are inconsistent with the explanation offered; marks or bruises on those parts of the body not generally injured in the normal course of play, work or recreation;
- loss of hair or a bald spot where the person may have been grabbed or pulled;
- broken / fractured bones (including skull) which are unexplained or inconsistent with explanation offered;
- presence of several injuries, bruises or broken bones that are in various stages of healing;
- injuries that appear to be caused by an instrument used with force (i.e. hand, loop marks, etc.);
- burn marks or inflamed tissue on parts of the body which suggest scalding and which are either unexplained or inconsistent with the explanation offered;
- adult-size human bite marks.

BEHAVIOURAL SIGNS:

- person cannot recall how injuries occurred or offers an inconsistent explanation;
- may be wary of adults;
- may cringe or flinch if touched unexpectedly;
- infants may display a vacant stare or frozen watchfulness;
- may be extremely aggressive or extremely withdrawn;
- may display extremely indiscriminate affection-seeking behaviour;
- may be extremely compliant and / or eager to please.

SEXUAL ABUSE:

PHYSICAL SIGNS:

- difficulty walking or sitting;
- unusual or excessive itching in the genital or anal area;
- bleeding and / or bruising in the genital or anal area;
- vaginal infection / discharge, not consistent with a medical problem;
- venereal disease;
- pregnancy

BEHAVIOURAL SIGNS:

- engages in age-inappropriate sexual play with toys, self and / or others;
- has bizarre, sophisticated or unusual sexual knowledge;
- reports stories of sexual contact with adults or children;
- shows a fear of or is seductive in behaviour towards members of the opposite sex;
- engages in delinquent, promiscuous or running behaviour or in prostitution;
- is depressed and / or suicidal.

EMOTIONAL ABUSE:

There are few physical indicators of emotional abuse, so care-givers should watch for behavioural signs such as:

- extreme lack of confidence;
- severe depression;
- a non-medical failure to thrive;
- extreme passivity or aggressiveness;
- excessive need for attention;
- inappropriate adult behaviour or infantile behaviour;
- criminal or anti-social behaviour;
- frequent psychosomatic complaints, headaches, nausea, abdominal pains;
- bowel and / or bladder incontinence.
- self-injurious behaviour

Rarely is any one indicator conclusive proof that a person has been harmed. In most instances, victims present with a cluster of behavioural and physical indicators.

WHAT CONSTITUTES A REASONABLE SUSPICION OF ABUSE

Anyone may have suspicions of abuse as a result of the appearance or behaviour of a person. In some situations, the abuse may be clearly recognized. In other situations, there may be questions as to whether possible abuse has occurred. In reporting abuse, all persons must understand what constitutes a reasonable suspicion of abuse. You may need to ask some questions in the determination of reasonable suspicion. Once you feel there is reasonable suspicion, then the police should be called immediately and no internal interviewing or investigation is to take place until such time as the police investigation is complete. The following guidelines are designed to assist in determining a reasonable suspicion.

- a) Direct evidence, such as bruising, torn clothing, bleeding from vaginal or anal orifices
- b) Certain areas of bruising are highly suspicious as well as repeat bruising or injuries on a person that is physically incapable of moving independently. Areas of suspicious bruising include the inner thighs, back of legs, eyes, upper arms, and upper back.
- c) The human body is shaped in a way that when someone falls, the typical areas of injury are the knees, shins, hands, and forehead. These latter injuries should be monitored and documented to see if there is a pattern that may indicate possible abuse, or if a medical condition needs further exploration that would explain this type of bruising (poor gait or balance, vision limitations). This is part of determining "reasonable suspicion".
- d) If there is suspicion of abuse without direct evidence, such as a change in behaviour, it must be well documented and tracked. A pattern may develop that may provide sufficient suspicion of possible abuse.
- e) A person who is being abused may not tell anyone for a variety of reasons including:
 - they don't realize that abuse is happening;
 - they fear the abuser;
 - they fear getting into trouble;
 - they are never believed so why should they report;
 - they don't know how to tell;
 - they may have been threatened by the abuser not to say anything.

REPORTING ABUSE:

1. Support staff should not make any attempt to diagnose a situation or to imply responsibility. Staff are **NOT** to ask questions or discuss what happened or probe for more details when suspected abuse is brought to their attention or if abuse is directly witnessed. If a staff is unclear if abuse occurred, he/she can ask non leading questions to determine what happened. (Review what constitutes suspicion of abuse). As soon as a person provides enough information that indicates suspected abuse, the staff person must not discuss the situation further. At this point they must call police; even if the person does not give their consent. **Staff should then inform the on-call supervisor or manager that a complaint has been made and that police have been called.**

Staff are required to report alleged abuse to the police regardless of whether the abused person wants it reported. The police will conduct their own investigation to determine if the abuse is reportable or criminal in nature. Confidentiality is imperative. No allegations of abuse will be discussed with other parties until the police have arrived and have taken an initial statement. This will prevent any contamination of evidence.

Staff must ensure that the victim receives any emergency medical attention required as a result of the suspected abuse and are free from further harm from the suspected abuser as soon as possible following the report of the abuse.

2. The employee will complete an Incident Report on AIMS- Incidents -Abuse and include the following:

- a) Description of any injury observed including size, shape, colour and location on the body. The description should be clear enough to visualize the injury;
- b) Drastic changes in the person's behaviour;
- c) Direct quotes from a person when there is suspected injury, neglect or emotional mistreatment;
- d) changes or chronic problems in a person's appearance or health;
- e) direct quotes from a parent / friend related to abuse or neglect;
- f) any additional pertinent information.
- g) Police notification and police actions taken.
- h) Once the Incident Report is completed on AIMS the employee will report to the On Call Supervisor/ Manager that the documentation is complete. The Supervisor/Manager will then process it with the Director. Procedures for reporting Serious Occurrences to MCSS will be followed.

3. If the person is capable of making informed decisions, it is their decision whether they will notify anyone that they have reported abuse. If this person does not give consent for staff to notify family, staff must comply with that person's decision to keep the reported abuse confidential. After police have been informed the family or substitute decision maker must be notified if the person who has been allegedly abused is not capable of making their own decisions on whom to inform.

RESPONSE PROCEDURES

- a) WDDS will ensure that the alleged abuser does not have unsupervised access to people receiving support. Any continuing duties will be non-person related until the investigation is completed. An employee may be suspended with or without pay, as determined by the Chief Executive Officer or designate. If the allegation is against a non-staff member (i.e., family / friend / stranger) precautions will be taken to separate the individual from the alleged abuser. The agency will advocate on the person's behalf.
- b) All allegations of abuse must be reported to the police immediately.
- c) WDDS will ensure that documents, records, staff and the person supported are available to Police for their investigation and that an advocate and / or interpreter is available for the victim if the person is incapable of making informed decisions.

Reporting of Abuse by Housemate or Other Person Receiving Services or Supports

Due to the complex needs of the people receiving services and supports from WDDS, each situation will be managed on an individual basis. In these situations, it must be considered if the behaviour is abusive but not criminal in nature. If there is a determination that the behaviour may be criminal in nature, then it will be reported to the police to be investigated. Steps will be taken to ensure that the alleged abuser does not have access to other people supported or house mates. Staff must follow the same steps as noted earlier in the policy with regards to reporting.

Due to the nature of the people supported in WDDS with varying levels or abilities and communication skills, it is critical that all support staff remain alert and observant of each of the people supported, understanding who each unique person is, and as a strong advocate, in turn develop the awareness and ability to identify when something is wrong.

Anyone suspected of abusing someone verbally, mentally, physically or financially will be investigated by the police to determine if the alleged abuse did occur, is criminal in nature and if there is enough evidence to press formal charges. If after police investigation it is found that either the abuse is not criminal in nature or there is not enough evidence to press formal charges, the agency may conduct an internal investigation. If it is determined that a staff has been engaged in inappropriate misconduct, appropriate disciplinary action will be taken immediately. This action may range from counseling to termination of the employment relationship.

If during the investigation, it is determined that abuse has not occurred all documentation of the evidence shall be given to the Chief Executive Officer and no such documentation or allegations of abuse will be placed in the employee's personnel file.

This policy will be reviewed yearly and make changes as necessary to prevent occurrences of abuse. This review will be documented.

ReportON

In situations where attempts to report and respond to the abuse, neglect or exploitation as defined in this policy, have not resulted in interventions and/or resolution through the internal WDDS processes and police interventions the MCCSS ReportON- Direct reporting service will be utilized.

ReportON is a direct reporting service that includes a toll free phone line 1-800-575-2222, TTY-1-844-309-1025 and email address (reportONdisability@ontario.ca). The service allows people to report to the Ministry of Children, Community and Social Services (MCCSS) concerns of alleged, suspected or witnessed abuse and/or neglect of adults with a developmental disability.

Employees, students and volunteers must first follow the WDDS policy and procedure regarding the identification and reporting of alleged abuse/neglect. Once the police have completed their investigation and/or after management have been alerted of the allegation(s), but staff remain of the view that the incident is not being responded to appropriately, it is only then that staff should contact ReportON.

ReportON is not a complaint mechanism, for complaints follow WDDS's Service Delivery Feedback/Complaints, Grievances and Appeals Policy and Procedure.