

Child Abuse Screening as a Triage Nurse in the Emergency Department

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BACKGROUND

- Child abuse is a prevalent issue that can be caught in early stages to prevent life threatening situations
- It is extremely important to screen all pediatric patients as child abuse can be masked as medical conditions
- Only 87% of our pediatric patients are currently being screening for abuse

PICO

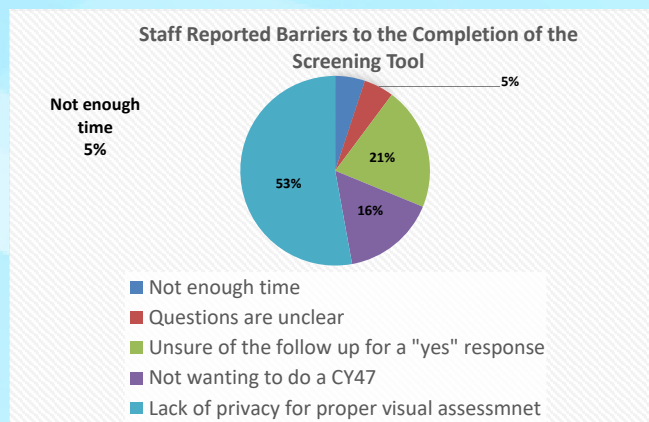
- **P:** Triage Nurse
- **I:** Re-education of importance of triage screenings
- **C:** No education
- **O:** Child abuse screening completion

EVIDENCE

- “Hospital-wide use of an objective screening tool, frequent re-education, and the support of an experienced child protection team led to improved child abuse screening compliance and more consistent suspected-abuse reporting rates.” (Dudas et al., 2019).
- “In 2014, there were 29,273 reports of child abuse in Pennsylvania, with 3340 cases substantiated after investigation by Department of Human Services (DHS). Of these cases, 3284 were reported by a hospital.” (Dudas et al., 2019).

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OUTCOMES



Summary: Prior to education, a survey regarding child abuse screening was distributed among ED nurses. This survey included a chance for staff to report barriers to their completion of the screening tool in triage. Pediatric charts were analyzed at random to determine completion of child abuse screening in triage. 62 pediatric charts were analyzed, of these 87% were fully complete and 13% were incomplete. As a result of these findings, education was created and distributed among staff. Education consisted of information regarding recognizing child abuse. After education was complete, we reevaluated the percentage of complete child abuse screenings by analyzing pediatric charts at again at random. A total of 61 pediatric charts were analyzed, of these 87% were fully complete and 13% were incomplete.

Barriers: Nurses identified several barriers to completing the assessment including lack of privacy and responsibility being placed on the triage nurse as opposed to the physician or primary RN where a more in depth assessment can be completed. The COVID 19 pandemic caused a influx of policy changes, emails and education that took away focus and made implementation of new education difficult among staff.

IMPLEMENTATION

- Evaluate the percentage of pediatric patients currently being screened for child abuse in the ED
- Survey RNs to discover why child abuse screenings are not being completed at this time
- Create education focused on correcting current barriers to the screening being completed by RNs
- Have staff who are responsible for screening complete the education
- Re-Evaluate the percentage of screening being completed on pediatric patients in the ED

NEXT STEPS

- Continue annual education for all RN's to encourage accurate and consistent screening for abuse among our pediatric patients
- Analyze current child abuse screening method and assess for possible improvements to the tool being used
- Continue to utilize hospital approved triage screening tool embedded in EPIC
- Identify methods to make an action plan for “yes” responses on the CY47 in order to make staff more comfortable answering questions honestly

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