



Effects of changing policy on screening and detection of child abuse in emergency departments



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Background

- 1:30 children victim of child abuse in the Netherlands
- Recognizing child abuse in an early stage/preventing recurrent abuse is crucial but difficult²
- Although victims of child abuse have a higher ED use than the general pediatric population, abuse often remains unrecognized (NI 0.2%)^{3,4}
- To identify high risk populations, checklists of warning signs for child abuse are being used. Large studies to support the value of checklists are scarce.

¹Euser et al. Child Maltreat 2010 ²Éthier et al. Child Abuse Negl 2004 ³Guenther et al. J Pediatrics 2009

⁴Louwers et al. Arch Dis Child 2011

Aim

To assess the effect of screening for child abuse we conducted a prospective intervention cohort study at seven emergency departments in the Netherlands.

Methods



Province South Holland

3.5 million people

22 hospitals



Our study Escape

7 hospitals

200,000 ED visitors

Methods

- All children ≤ 18 years visiting the ED in a timeframe of 23 months were included

- Interrupted time series design

- Interventions:
 - Implementation of a new checklist
 - Implementation of training for ED nurses

Screeningsinstrument

sticker kind

Datum: _____

Ingevuld door: _____

Reden van komst: _____

▪ Is de anamnese consistent?	ja	nee
▪ Is er onnodig vertraagd medische hulp gezocht?	ja	nee
▪ Past het ontstaan van het letsel bij het ontwikkelingsniveau van het kind?	ja / n.v.t.	nee
▪ Zijn het gedrag van het kind / de verzorgers en de interactie tussen hen passend?	ja	nee
▪ Komen de bevindingen bij top-teen onderzoek overeen met de anamnese?	ja	nee
▪ Zijn er overige signalen waardoor u twijfelt aan de veiligheid van het kind of overige familieleden? * Indien ja: beschrijf de signalen onder 'Overige opmerkingen' in het vak hieronder.	ja*	nee

Overige opmerkingen:

Conclusie:

Twijfel over de veiligheid van het kind; indien u **één of meer** antwoorden hebt omcirkeld **in de pijl**, overleg dan met de behandelend arts.

Gedurende werkdagen is het Goofy team voor overleg bereikbaar:
 • maatschappelijk werker: tel 010 - 703 70 82 of 06 - 65 13 74 61
 • e-mail: goofyteam@erasmusmc.nl

Na 17:00 uur en voor 08:00 uur en in de weekends kan een bericht worden achtergelaten op het antwoordapparaat van de maatschappelijk werker.

Voor dringende zaken tijdens diensttijd kunt u overleggen met de dienstdoende kinderarts of met:

- het AMK:
0900 - 123 123 0
- het ASHG:
010 - 443 84 44

23/03/12

Erasmus MC




Is the history consistent?	yes	no
Was there unnecessary delay in seeking medical help?	yes	no
Does the onset of the injury fits with the developmental level of the child?	yes/n.a.	no
Is the behaviour of the child/the carers and the interaction appropriate?	yes	no
Are the findings of the top-to-toe examination conform the history?	yes	no
Are there other signals that makes you doubting about the safety of the child or other family members? If Yes describe the signals in the box 'Other comments' below.	yes	no

Other comments

	Conclusion
	Twijfel over de

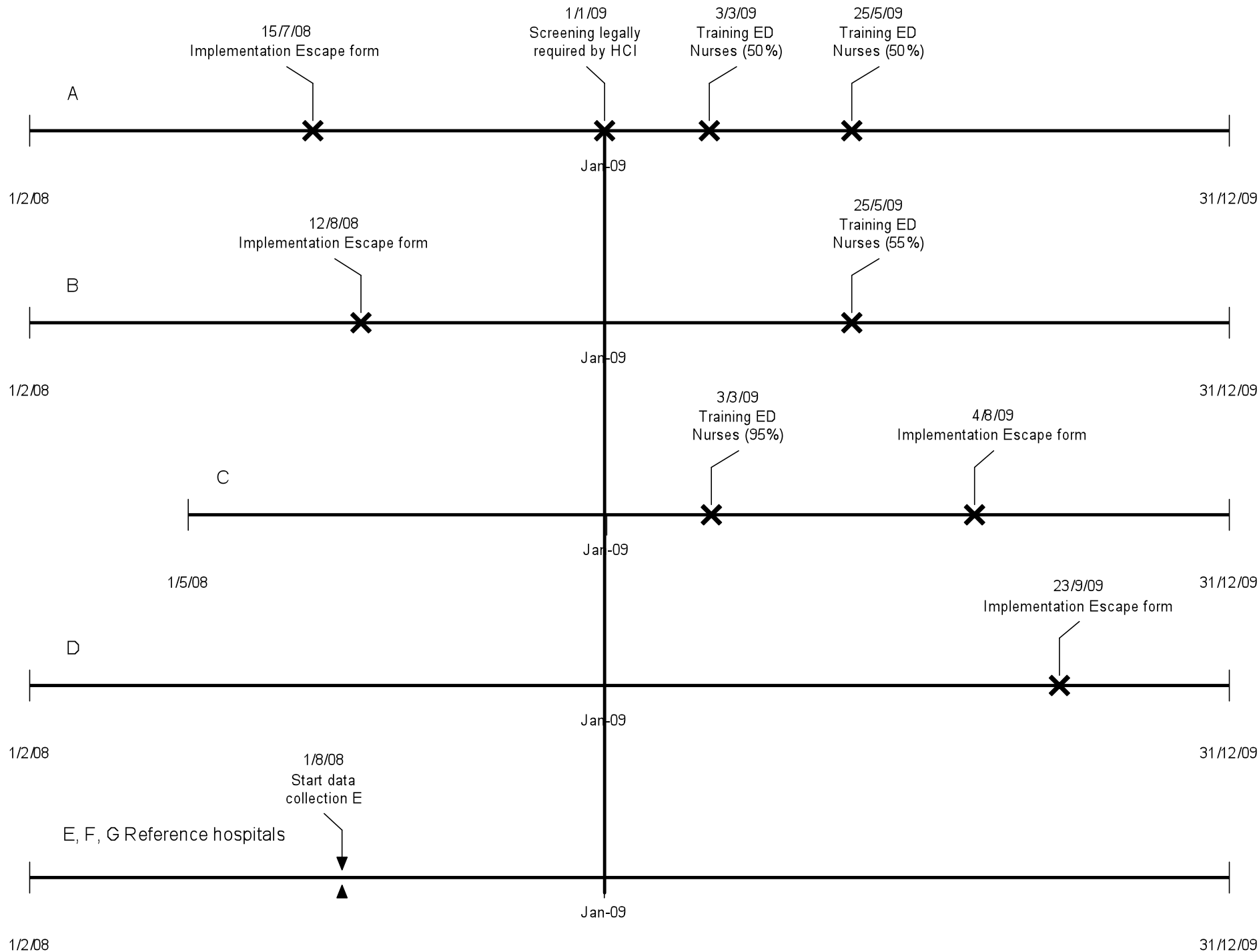
Case definition

- All children reported to the hospital child abuse teams
- Scored for 8 criteria by 4 professionals individually
- Criteria formulated with the child abuse definition

“Any form of threatening or violent physical, mental or sexual interaction with a minor which is perpetrated actively or passively by parents or other persons on whom the minor is dependent and causes or will probably cause physical or mental injury and serious harm to the minor”.

De Wet op de jeugdzorg (artikel 1, lid m)

Results



1/2/08

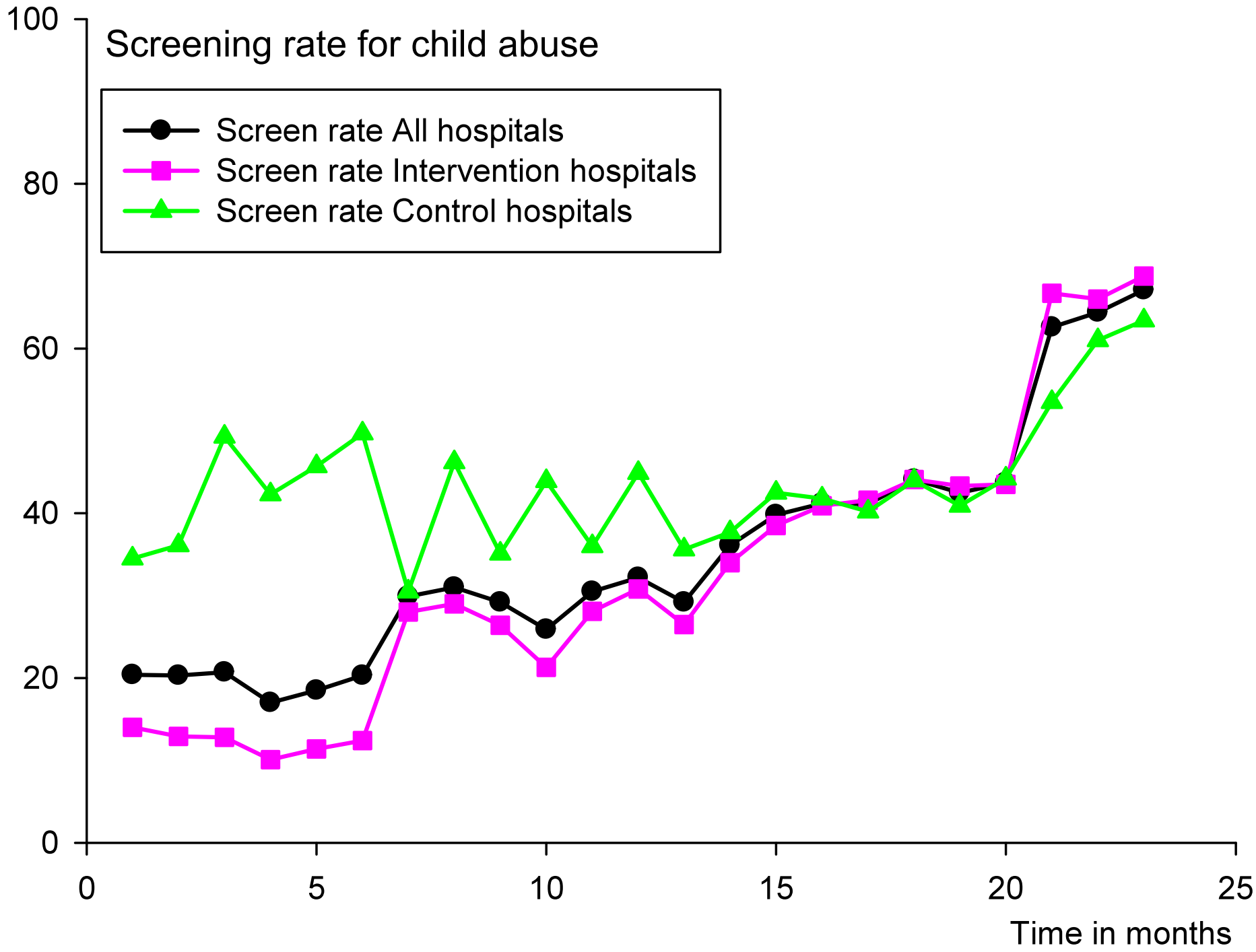
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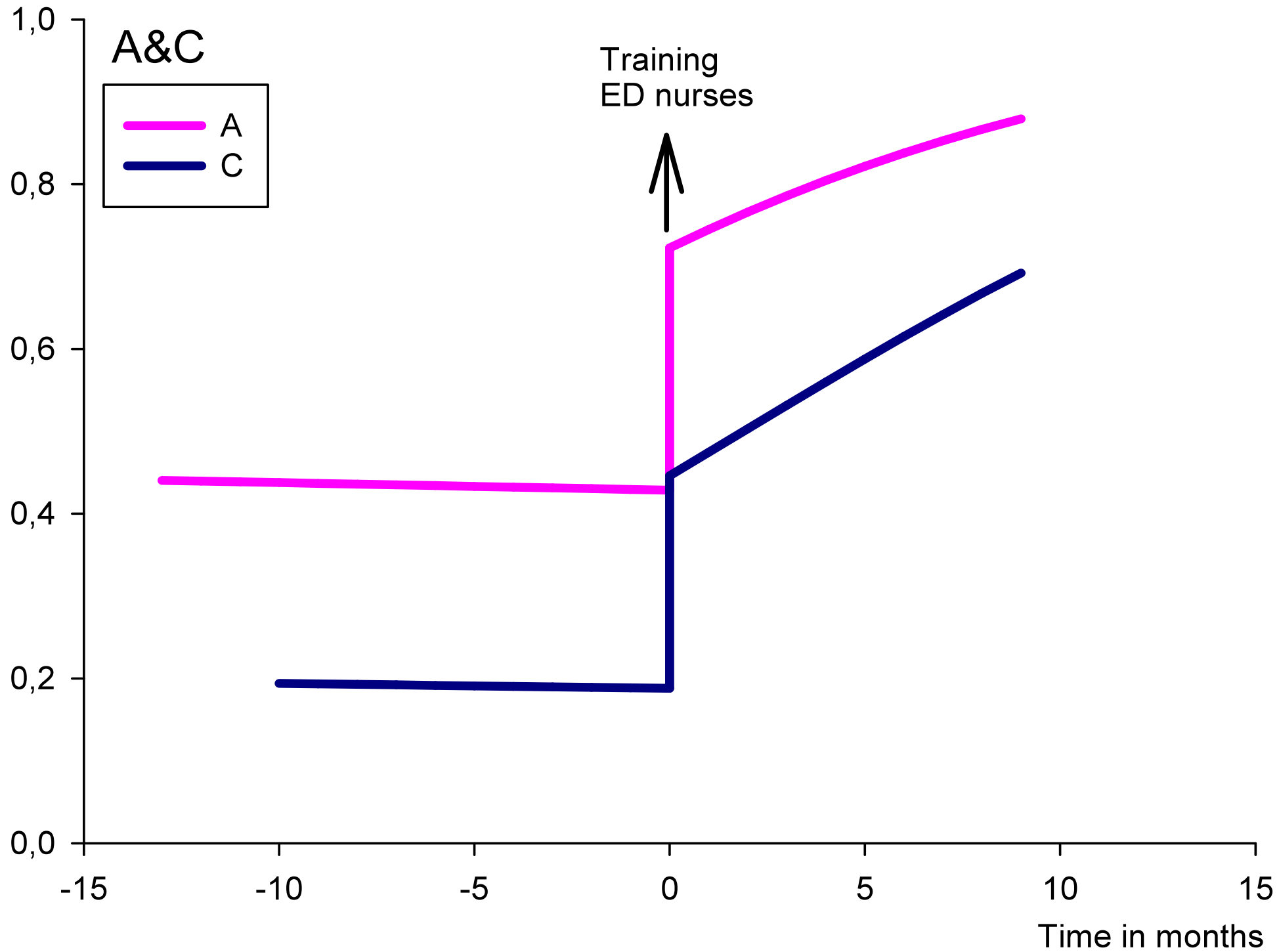
Results

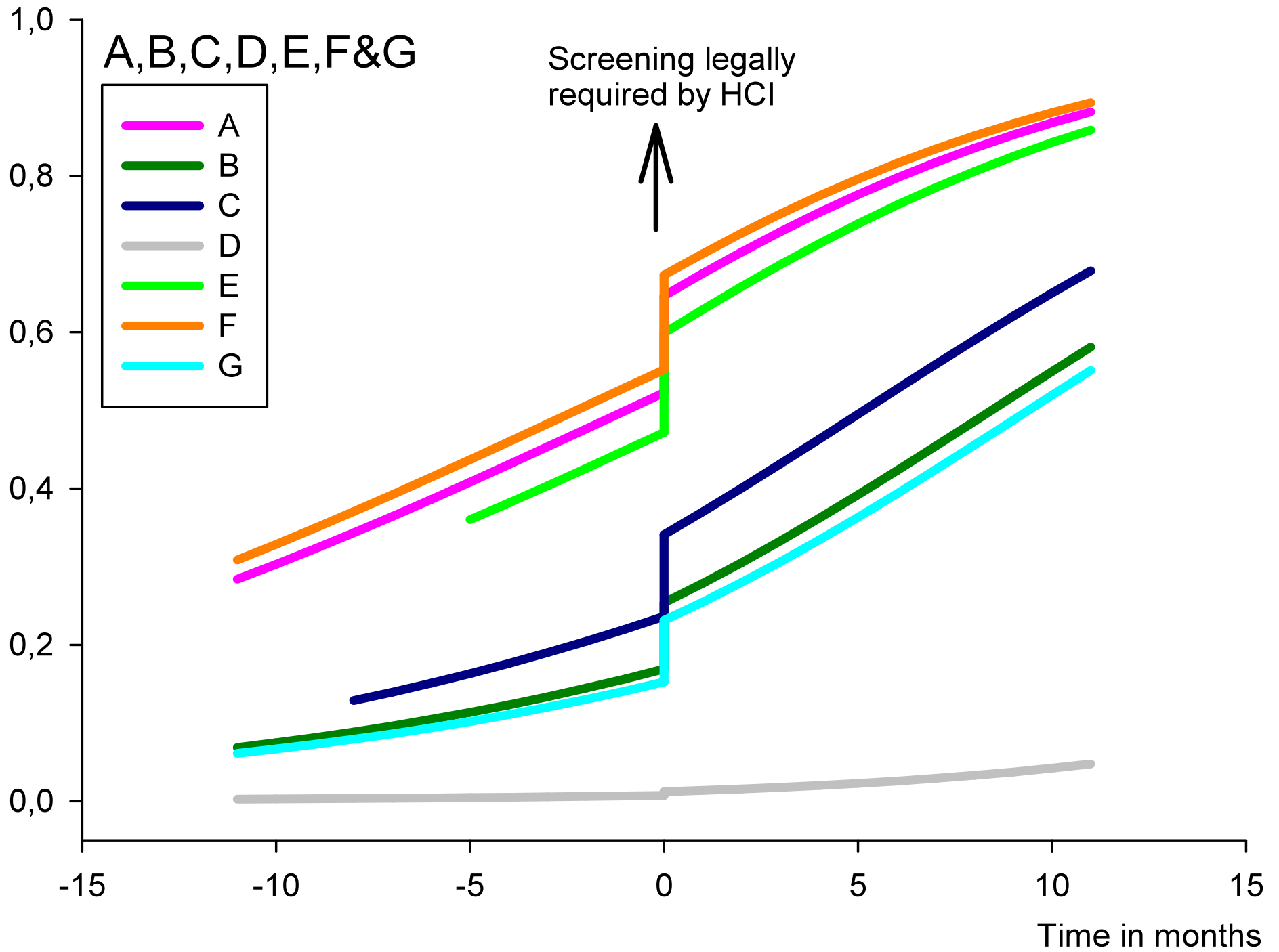
- 104 028 children
- 7 years
- 56% male
- 48% self referrers
- 49% surgical problems
- 36% (37 404) completed screening instruments

Screening rate for child abuse

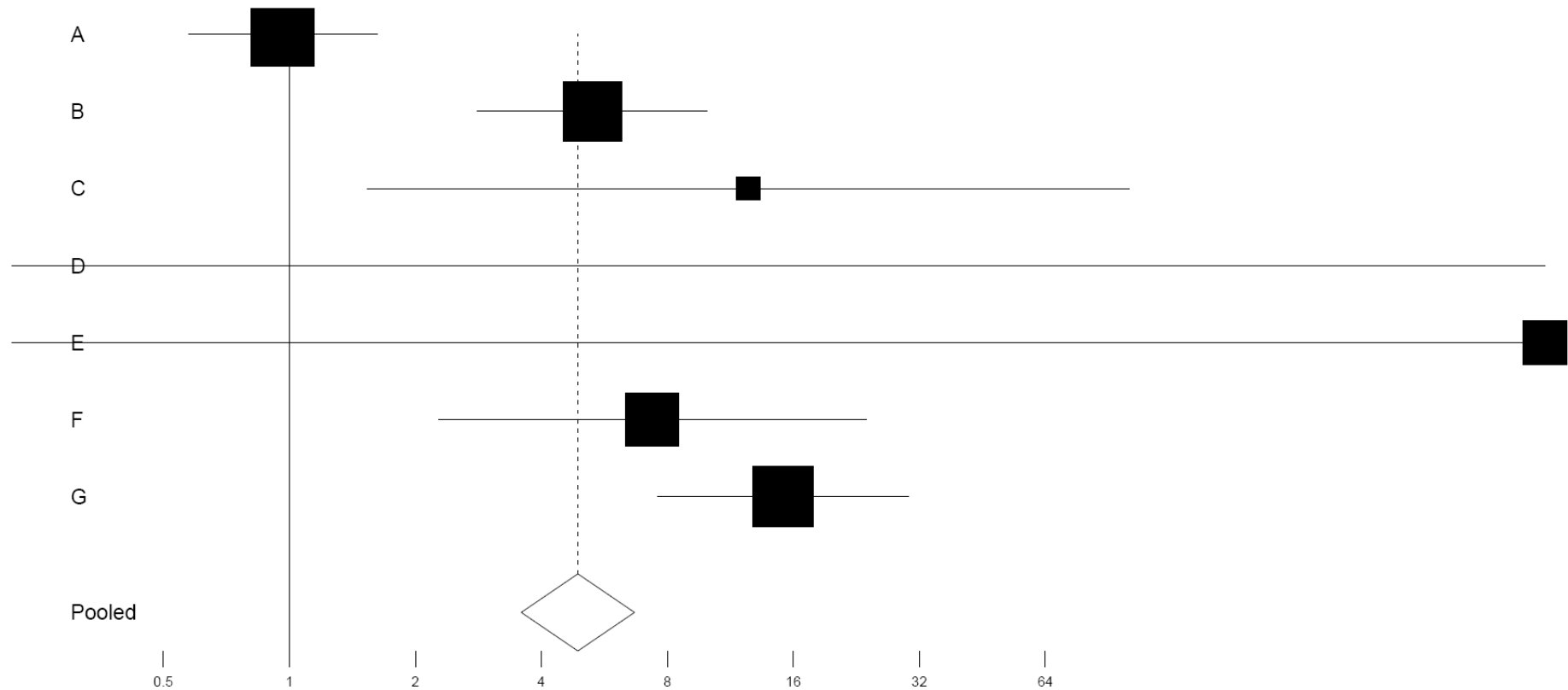
- Screen rate All hospitals
- Screen rate Intervention hospitals
- ▲ Screen rate Control hospitals







Odds ratios for detection of suspected child abuse in screened children



Odds ratio screening

Conclusions

- Screening for child abuse is effective to detect suspected child abuse in an early stage
- Screening increased after implementing training and legally require screening by the HCI
- 0.2% suspected cases of child abuse at 7 EDs in 23 months

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Hospital

Questions??

