

Northwest Community EMS System
Continuing Education Class Credit Questions for January 2013
VIOLENCE: Impact for EMS

Name (PRINT):	Date submitted:
Affiliation:	Rating: [] Complete [] Incomplete

Reminder: You must schedule to take the class post-test with your assigned hospital EMS Coordinator/educator or their designee after this packet has been approved as complete.

The answers are found in the January 2013 class handout, independent study materials, NWC EMSS Policy Manual, and/or the SOPs.

1. When faced with child abuse, what 4 specific resources does EMS have available to them on the immediate call? (PP slide)

2. How is each one a utilized as a resource to EMS personnel?

3. In policy V-2, how is an abused child defined based on the Abused & Neglected Child Reporting Act (ANCRA)?

4. In policy V-2, how is a neglected child defined based on the Abused & Neglected Child Reporting Act (ANCRA)?

5. What "sole reason" is specified that cannot be defined as neglect or abuse? (Policy Manual, V-2, p. 1)

6. What 7 entities are considered mandated reporters as defined by the ANCRA?)

7. What three requirements must be met in order to take temporary protective custody of a child? (PP/ Policy V-2)

8. If suspicion of child abuse exists, each EMS provider on the scene must make a phone call to DCFS to report abuse. (Policy Manual, V-2)

TRUE

FALSE

9. What 2 criteria must be completed in accordance with law, when suspicions of abuse arise (Policy Manual, V-2)?

10. If the physician or nurse at the hospital also suspects abuse for the same pt and they are planning to complete a DCFS report, EMS has fulfilled their legal obligation of mandated reporting. (Policy/PP)

TRUE

FALSE

11. If signs of abuse are not readily apparent at the onset of the pt interaction on a call, does DCFS still need to be notified if suspicion arises later in the call? (Policy Manual, V-2, p. 2, Section III-A)

12. When child abuse suspicions are not obvious and two crew members are in disagreement as to if the situation constitutes as abuse, what should be done? (Policy Manual, V-2)

13. What 4 steps are included in accordance with the procedure for individuals suspected of child abuse? (Policy V-2: Procedure)

14. What steps are necessary to complete the process of mandated reporting? (Policy)

15. What information will be needed from the reporter to give to the hotline? (Policy/ PP)

16. When completing a written report, when must it be completed by and what must be done with it? (Policy and PP)

17. According to the PP, what 7 situations put children at a greater risk for abuse? (PP)

<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

18. Identify three areas of injury that appear suspicious in which EMS should take time to further to investigate for abuse. (PP)

19.-23. Rewrite the subjective statements into objective documentation that would be better defended in court.

Subjective to Objective	
Subjective	Objective (factual)
Pt appears drunk	
Pt not acting appropriate	
Child does not appear to be in any distress	
House dirty and unkempt	
Mother does not appear to be concerned	

24. _____ is the single largest cause of injury to women in the US between ages ____ - ____.(PP 54)

25. What is the percentage of women, according to the PP, that present to the ED that is statistically known to be victims of abuse? (PP)

26. Identify 6 reasons (layers of complexity) in which the individual being abused may not choose to leave their abusive situation. (PP)

<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

27. Identify three phases present within the cycle of violence (PP)

28. Each phase within the cycle of violence is constant and never changing. *Please circle the correct answer.* (PP)

True

False

29. Because acute situations involving domestic violence can be highly emotional, what is priority one for EMS? (PP)

30. Define Domestic Violence in accordance with the definition in policy (Policy Manual, V-4)

31. In accordance with Policy V-4, domestic violence, describe two situations that would meet the definition of harassment. (Policy Manual, V-4)

32. In accordance with policy for DV, what reporting does IL. law require of an EMT? (Policy Manual, V-4, Section III)

33. Identify three situations in which an EMT may be presented with in which they should consider DV a possibility. (Policy Manual, V-4, Section IV)

34. When reading the article, "Treating homeless patients can present overwhelming challenges for EMS providers" the author identifies two categories of homeless, identify them. (Class handout article)

35. According to the article, identify 2 situations that create greater challenges for EMS when treating pts who are homeless? (Class handout)

36. Identify 7 areas in which elderly pts suffer from abuse. (PP)

37. In accordance with elder abuse law & system policy, an eligible adult is defined as a person _____ years of age or older who resides in a domestic situation and is, or is alleged to be abused, neglected or financially exploited by another individual, or who neglects themselves. (Policy Manual, V-3)

38. Define self-neglect. (Policy Manual, V-3)

39. As outlined in the policy manual, how should EMS treat a pt involved in an elderly abuse situation when found in the private residence environment? (Policy Manual, V-3)

40. How does that differ from the patient who presents in a healthcare facility? (Policy Manual, V-3)

Extra Credit***

Identify one thing presented in this month's material that you as an EMS provider can practically incorporate into your practice?
