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Medical Neglect: Patient Characteristics and Reporting Trends

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Background

- Improved recognition and response to medical neglect are needed.
- Insight into patient/family characteristics and reporting trends may help identify areas for intervention
- Objectives: Describe characteristics of children and families with identified concern for medical neglect; Describe trends in identification and reporting of cases of medical neglect

Methods

- Retrospective, descriptive study of subjects <18 years of age identified via Patient At Risk (PAR) database with concern for medical neglect
- Excluded subjects with concomitant physical or sexual abuse concern
- PAR: Unique institutional process for documentation of child maltreatment
- Collected demographics, medical history, health care utilization, psychosocial factors and reporting factors

Results

- N = 270 cases from 7/1/2016 – 6/30/2017
- Medical neglect was seen across all age groups
- Most patients were Caucasian (38.9%) or African American (40.0%)
- Patients were primarily publicly insured (80.4%)
- 60.7% identified in the ambulatory setting; most by physicians (43%)
- 68.5% of subjects had ≥ 5 missed or canceled appointments
- At least 1 family psychosocial risk factor present in 60% of subjects

Table 1. Health Characteristics of Patients

Primary Medical Diagnosis	N (%)
Any chronic medical condition	243 (90.0)
Asthma	48 (17.8)
FTT/ malnutrition	45 (16.7)
Prematurity related medical condition	37 (13.7)
Diabetes	24 (8.9)
Mental Health Disorder	22 (8.1)
Seizure disorder	17 (6.3)
Acute medical condition without other chronic disease	27 (10.0)

Table 2. History of prior PAR and CPS Report

Report Type	All Subjects, n (%)	Any Chronic Condition, n (%)	No chronic condition, n (%)
Total subjects	270	243	27
Prior PAR (any concern)	95 (35.2)	93 (38.3)	2 (7.4)
Prior PAR (medical neglect)	55 (20.4)	54 (22.2)	1 (3.7)
Any prior CPS	143 (53.0)	135 (55.6)	8 (29.6)

Results

Table 3. Psychosocial Risk Factors and Barriers to Care

Risk Factor or Barrier to Care	N / all cases (%)	N / only subjects screened (%)
History of caregiver substance abuse	61/270 (22.6)	61/101 (60.4)
History of caregiver mental health needs	68/270 (25.2)	68/99 (68.7)
Parental incarceration	41/270 (15.2)	41/68 (60.3)
Transportation needs	57/270 (21.1)	57/84 (67.9)
Financial needs	81/270 (30.0)	81/99 (81.8)
History of IPV between caregivers	45/270 (16.7)	45/76 (59.2)

Conclusions and Next Steps

- Chronic health conditions are common among children with concern for medical neglect
- Psychosocial risk factors occur frequently
- Medical neglect is most frequently identified in the ambulatory care setting and missed appointments are common
- Systemic monitoring of missed ambulatory appointments may identify children at risk
- Identification should be paired with processes for targeted prevention mechanisms