SUBJECT: IDENTIFICATION AND REPORTING OF SUSPECTED ABUSE/NEGLECT & EXPLOITATION SITUATIONS (ELDER ADULT, SPOUSE, CHILD)

PURPOSE: To identify potential victims of abuse or neglect of all ages and to comply with KRS 209 (Adult), 620 (Children) and 209A (Domestic Violence).

SCOPE: This policy applies to all locations owned and operated by Hardin Memorial Hospital.

POLICY STATEMENT: To identify potential victims of abuse or neglect and to help plan for the patient’s safety and relief in accordance with state law. Upon entry into the facility, every patient will be assessed for signs of abuse and/or neglect. The attached list of indicators are utilized by staff in assessing patients for signs of abuse or neglect. If any staff member, physician, student, contract employee or volunteer identifies a reasonable cause of suspicion or a report of abuse/neglect/exploitive situations, these situations are reported to the Department of Protection and Permanency.

KEY POINT: If alleged abuse or neglect occurs on hospital premises, please see Administrative Policy 0040-0014C.

Adult:
Definitions according to KRS 209.020:

1. "Vulnerable Adult" means a person eighteen (18) years of age or older who has a mental or physical dysfunction that interferes with his ability to manage his own resources, carry out the activities of daily living (feeding self, toileting self, self-mobility, bathe self, etc.), or to protect himself from neglect, abuse or hazards without help from another person OR any person that is married, without regard to age, that is a victim of spouse abuse or neglect.

2. “Child” means any unmarried person under 18 years of age.

3. "Abuse" means the infliction of injury, sexual abuse, unreasonable confinement, intimidation, or punishment that results in physical pain or injury, including mental injury;

4. "Exploitation" means obtaining or using another person's resources, including but not limited to funds, assets, or property, by deception, intimidation, or similar means, with the intent to deprive the person of those resources;
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5. "Neglect" means a situation in which an adult is unable to perform or obtain for himself or herself the goods or services that are necessary to maintain his or her health or welfare, or the deprivation of services by a caretaker that are necessary to maintain the health and welfare of an adult.
6. “Staff member” means any employee, physician, student, contract employee, and volunteer.

PROCEDURE:
A. Suspected Abuse/Neglect:
1) Once a patient has been deemed to meet one or more of the indicators (attached) for suspected abuse/neglect/exploitation, the patient is placed in a secure area as an attempt to prevent further injury by the alleged perpetrator.

   KEY POINT: Information will not be released to any party without the patient’s consent, except to the Department of Protection and Permanency and/or to the Police Department to report suspected abuse, neglect, and/or exploitation as indicated by state law.

2) The Suspected Abuse/Neglect, Dependency, or Exploitation Reporting Form (M2087), (see attached) is completed by the staff member who identifies the suspected abuse/neglect situation documents evidence (bruises, fractures, dislocations, unexplained bleeding, malnutrition/dehydration (skin turgor) unsanitary physical conditions, etc.) in the medical record.

   KEY POINT: This report should be made immediately after the staff member suspects the abuse/neglect/exploitation.

3) The physician performs a medical screening and documents any evidence of abuse (bruises, fractures, dislocations, unexplained bleeding, malnutrition/dehydration (skin turgor) unsanitary physical conditions, etc.) in the medical record.

   KEY POINT: See attached Abuse Indicators.

4) If photographs are necessary, a hospital release for taking photographs is signed by the patient and witnessed by two employees prior to any photographs. See Administrative Policy # 0030-0011, “Photographs, Interviews, Audio/Video Recordings and Other Imaging,” for further procedures related to photographing of patients.

   KEY POINT: Reference BirthPlace Policy 6200-G018 – Photographing Suspected Child Abuse.

5) Any staff member making such a report shall provide the following information, if known:

   (1) The name and address of the adult, or of any other person responsible for his care;
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(2) The age of the adult;
(3) The nature and extent of the abuse, neglect or exploitation, including any
evidence of previous abuse, neglect or exploitation;
(4) The identity of the perpetrator, if known;
(5) The identity of the complaint, if possible; and
(6) Any other information that the person believes might be helpful in
establishing the cause of abuse, neglect or exploitation.

6) If the determination of suspected abuse/neglect/exploitation is made during normal
daylight, business hours (8:00 am to 4:30 pm), the staff member notifies the Department
for Protection and Permanency (State Department for Social Services).

Methods that can be utilized to make a report to the Division of Protection and
Permanency during normal daytime business hours:

   a) For the most immediate response, make the call – Staff call 270-766-5088 and
      speak directly to intake staff.

   b) For a NON-EMERGENCY report:

      i) By Website – Go to the Kentucky Child/Adult Protective Services
         Reporting System website
         (https://prd.chfs.ky.gov/ReportAbuse/home.aspx ) and complete the
         screens as indicated. Staff will receive a confirmation email noting that
         the report was sent to the intake department for review, and staff will
         document the Web Page ID # in the medical record.

      ii) By Fax – Fax reporting form (M2087) and any documentation
          necessary to 270-766-5257.

   KEY POINT: Hardin Memorial Hospital staff member faxing the report obtains
   the fax transmission/confirmation report to confirm report was transmitted and
documents accordingly in the medical record.

7) If the determination of suspected abuse/neglect/exploitation is made after hours or on
holiday/weekend the Department of Protection and Permanency is notified at 800-752-
6200.

8) The Division of Protection and Permanency will determine (after contact), whether to
initiate immediate intervention and/or investigate the allegation with the patient and their
family.

9) A copy of the Suspected Abuse/Neglect, Dependency, or Exploitation Reporting Form
(M2087) is forwarded to the HMH Social Services office (Fax: 706-1155) for follow-up.
10) Hardin Memorial Hospital Social Services provides follow-up contact as necessary with the Division of Protection and Permanency or other agencies that may be involved with the patient to assist with continuum of care after discharge.

11) If the patient is admitted to Hardin Memorial Hospital, HMH Social Services follows the patient throughout the stay to assist with any information requests from Division of Protection and Permanency to support the investigation.

12) Hardin Memorial Hospital Social Services will also assist with discharge planning to facilitate a safe transition to a lower level of care.

13) Prior to discharge, patients are referred to Abuse Advocate for counseling and/or temporary shelter as needed.

NOTES:

- Unit Manager/House Manager is notified of any report of abuse, neglect or exploitation.
- House Manager will document any report of abuse, neglect or exploitation on the House Manager report.
- The original Suspected Abuse/Neglect, Dependency or Exploitation Reporting Form (M2087) is placed in the patient’s chart with a copy sent to Hardin Memorial Social Services office. Medical Records staff removes this form from the chart, once received, and place it in a mailbox for the Medical Records’ Secretary to be stored in the Legal Compartment, separate from the patient’s medical record.
- 6850-ED12 Suspected Sexual Assault Exam for Female, Male Adult or Child for more complete ED procedures specific to E.D., evidence collection, etc. May use Emergency Department personnel as a resource.
- See Patient Care Policy 0207-0003 Clinical Forensics.
- See Pediatric Policy 6200-G018 Photographing Suspected Child Abuse

REFERENCES:

- Child Abuse, Neglect and Dependency: A Guide for People who Work with Children in Kentucky
- National Consensus Guidelines on Identifying and Responding to Domestic Violence in Healthcare Settings
- Administrative Policy 0040-0014B Patient’s Rights for Protective Services
- Administrative Policy 0040-0014C Response to Reports of Patient Abuse, Neglect or Exploitation Occurring on Hospital Premises
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ATTACHMENTS:
- Abuse Indicators
- Adult/Disabled Abuse/Neglect/Exploitation Definitions and Characteristics
- Domestic Violence Indicators
- Domestic Abuse Definitions and Indicators
- Definition and Types of Child Abuse/Neglect/Exploitation
- Suspected Abuse/Neglect, Dependency or Exploitation Reporting Form (M2087)
- How to Report Suspected Abuse/Neglect

APPROVAL(S)
- Care Coordination Manager.................................02/22/2016
- Risk Management Director......................................02/22/2016
- Compliance Director..............................................02/23/2016
- Vice President/CNO..............................................02/23/2016
- Medical Executive Committee..............................03/09/2016
- Board of Trustees.................................................03/09/2016