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Reporting and Screening for Abuse, Neglect or Exploitation in Adults (Including Older Adults and Disabled Adults)

I. Description

Describes abuse, neglect and exploitation of adults (including older adults and disabled adults) and the screening and reporting requirements.

II. Rationale

Any person having reasonable cause to believe that a disabled adult has been abused, neglected, or exploited must report such information as soon as possible to the Department of Social Services. In addition, describes practice using current evidence and clinical guidelines for nurse screening of suspected abuse, neglect, exploitation or abandonment in all adults.

III. Policy

A. Definitions Related to Disabled Adults

1. A "disabled adult" is defined as any person eighteen (18) years of age or over or any lawfully emancipated minor who is physically or mentally incapacitated due to:
 - a. mental retardation;
 - b. cerebral palsy;
 - c. epilepsy or autism;
 - d. organic brain damage caused by advanced age or other physical degeneration in connection therewith; or
 - e. conditions incurred at any age that are the result of accident, organic brain damage, mental or physical illness, or continued consumption or absorption of substances.
2. A disabled adult is "in need of protective services" if that person, due to his physical or mental incapacity, is:
 - a. unable to perform or obtain for himself essential services; and
 - b. without able, responsible, and willing persons to perform or obtain for him essential services.

3. "Protective services" are defined as services provided by the State or other government or private organizations or individuals that are necessary to protect the disabled adult from abuse, neglect, or exploitation.
4. "Abuse" is defined as the willful infliction of physical pain, injury or mental anguish, including rape or sexual molestation, unreasonable confinement, or the willful deprivation by a caretaker of services that are necessary to maintain mental and physical health.
5. "Neglect" refers to a disabled adult who is either:
 - a. living alone and not able to provide for himself or herself the services that are necessary to maintain his or her mental or physical health; or
 - b. is not receiving services from his or her care-taker.
6. "Exploitation" means the illegal or improper use of a disabled adult or his or her resources for another's profit or advantage.
7. "Caretaker" is defined as an individual who has the responsibility for the care of the disabled adult as a result of family relationship or who has assumed the responsibility for the care of the disabled adult voluntarily or by contract.

B. Information About Abuse, Neglect, Abandonment or Exploitation in Adults Generally

Abuse can be physical, sexual, emotional, and financial.

Family violence crosses all racial, ethnic, religious, educational, and socioeconomic lines. Most research has focused on women who are battered by male partners. However, in the terms "spouse abuse" and "partner abuse" reflect the reality that violence/abuse may occur in same sex relationships and that men can also be the target of abuse. Violence/abuse may occur in assisted living and long term care facilities. Persons who are at increased risk are:

- Living in a dependent relationship
- Have a jealous and/or controlling spouse/partner
- Abusing alcohol/drugs
- Pregnant
- Separated/divorcing

Neglect and abandonment are specific to abuse of the disabled and elder adults. Factors that may increase elders' risk include:

- Mental illness/psychological/behavioral problems
- Emotional dependence/impairment
- Age >60, living with a younger relative
- Perceived as "a burden" by caregiver

A. Procedure

1. Nursing Assessment

- a. Screen at triage or upon admission for suspected abuse/neglect/mistreatment/exploitation using the Emergency Department Nursing Triage Form or one of the following admission forms or electronic

equivalent:

- i. Adult Data Screening and Assessment - HIM #22
 - ii. Interdisciplinary Psychiatry Initial Assessment – HIM # 333
 - iii. Interdisciplinary Inpatient Rehabilitation Initial Assessment – HIM #519
 - iv. Inpatient admission assessment
- b. Perform screening assessment alone with patient, excluding all visitors
- c. Use the following screening questions:
- i. Are you or do you feel safe at home?
 - ii. Is anyone physically or emotionally hurting you?

Note: The screening assessment is as follows: Explain to patient "Because so many people deal with fear and abuse in their relationships, we ask these same questions of all our patients":

- iii. Does your partner/caregiver(s) ever threaten you or try to control you?
 - iv. Is abuse, violence or sexual assault a problem for you in any way?
- d. Assess patient for these possible indicators of neglect by caregiver:
- i. dirt, fecal/urine smell
 - ii. rashes, sores, lice on patient
 - iii. inadequately clothed
 - iv. malnourished or dehydrated
 - v. non-compliance with medication/treatment
 - vi. withdrawn, tense, fearful, depressed

Note: If screening is not possible at triage or upon admission, screening must be completed prior to discharge

- e. Document all:
- i. Assessment findings;
 - ii. Interventions and patient responses/outcomes;
 - iii. Reported conditions;
 - iv. Patient/caregiver teaching and level of understanding; and
 - v. If the patient discloses that he/she has a current protective order.

2. Reporting Requirements

- a. Abuse, neglect, or exploitation by anyone of a disabled adult must be reported to the Department of Social Services.

UNCHCS employees must make a report if there is reasonable cause to believe that a disabled adult is in need of protective services.

Information, circumstances or evidence – even if slight or vague – that indicates the possibility of

abuse, neglect, or exploitation of a disabled adult is enough to justify a report. Actual knowledge of abuse, neglect or exploitation is not required prior to reporting. The Department of Social Services will determine the facts during its investigation.

- b. Reports of suspected abuse, neglect or exploitation of a disabled adult are always to be made to the Director of the Department of Social Services in the county where the disabled adult lives. If the alleged abuse, neglect or exploitation also occurs in Orange County, then also report to the Orange County Department of Social Services. If told by Department of Social Services to contact the police, then do so.
- c. A report can be made orally or in writing. The report shall include the name and address of the disabled adult; the name and address of the disabled adult's caretaker; the age of the disabled adult; the nature and extent of the disabled adult's injury or condition resulting from abuse or neglect or exploitation; and other pertinent information.
- d. The objective medical and social information, circumstances and evidence that cause one to suspect that a disabled adult may be abused, neglected, or exploited should be documented in the medical record. In addition, the fact that suspected abuse, neglect or exploitation has been reported to the County Department of Social Services should be documented in the medical record.
- e. Reports must be made promptly, and in no event any later than 24 hours after any physician, nurse, or other Hospital employee first had reasonable cause to believe that a disabled adult has been abused, neglected or exploited. In Orange County, if the report is being made outside of regular business hours, dial 911. The Sheriff's communications center will answer. Briefly explain that you are reporting a matter of alleged abuse, neglect or exploitation of a disabled adult, and the operator will put you in contact with the Department of Social Services employee who is on-call twenty-four (24) hours a day, seven (7) days a week, so reporting can be done promptly. If you cannot reach the Department of Social Services of a county, then contact law enforcement personnel in that county for assistance in reporting.
- f. While it is appropriate for a Hospital employee to consult with a supervisor before reporting, this consultation should not be allowed to delay substantially the report to the Department of Social Services. Document in the medical record all attempts at reporting and the name of the individual to whom the matter was finally reported.
- g. UNC Hospitals Clinical Care Management Department may be consulted for assistance in determining abuse, neglect, or exploitation.
- h. Once aware of the matter, the physician and treatment team should take reasonable measures to protect the disabled adult from further abuse, neglect, or exploitation while inpatient at UNC Hospitals.
- i. Reporting abuse, neglect, or exploitation to the Department of Social Services, by itself, is not a basis for detaining a disabled adult at UNC Hospitals, but the Department of Social Services should be consulted prior to discharging the alleged victim.
- j. Where abuse, neglect or exploitation of a disabled adult is alleged against anyone, the caretaker should be told of the allegation, and whether or not the allegation has been or is going to be reported to the Director of Social Services. Objection by the caretaker is not a justification for failing to report abuse, neglect or exploitation of a disabled adult to the Department of Social Services.
- k. Physicians and the treatment team of the disabled adult may disclose the disabled adult's protected health information to Department of Social Services investigators as long as there is a reasonable belief that the disabled adult is the victim of abuse, neglect or domestic violence.

- l. If law enforcement investigate for criminal prosecution, the physician and treatment team may not discuss the disabled adult's protected health information with law enforcement unless:
 - a. the disabled adult or his/her authorized representative executes the appropriate authorization form;
 - b. law enforcement properly completes and submits an Administrative Request Form (in this case, contact the Legal Department); or
 - c. a judge's order is obtained.
- m. Prior to testifying at any court proceeding on a claim of abuse, neglect, or exploitation of a disabled adult, all physicians, nurses, and UNC Hospitals employees should require that the requesting attorney subpoena them.
- n. Anyone, not acting in bad faith or with a malicious purpose, who makes a report of abuse, neglect or exploitation of a disabled adult, who participates in an investigation, or testifies in any judicial proceeding arising from the report, is immune from any civil or criminal liability for such actions.

3. Safety

- a. Notify Hospital Police if patient's safety is in question, e.g.:
 - i. known/suspected abuser is accompanying the patient
 - ii. verbal abuse/threats are overheard
- b. Limit visitation as indicated to maintain safety after assessment.
 - i. notify Hospital Police
 - ii. consider use of an "alias" in patient identification (Hospital Police will provide guidelines)
- c. Notify Beacon if the patient feels his/her safety is in question.

Resources

- 1. North Carolina General Statutes §§ 108A-99 through 110 (Disabled Adults), § 108A-102 (Reporting of Disabled Adult Abuse) and North Carolina General Statutes Chapter 50B (Domestic Violence). These may be found at [North Carolina General Statutes](#)
- 2. The Beacon Program at 984-974-0470
- 3. Department of Clinical Care Management (CCM)

Attachments:

No Attachments

Approval Signatures

Step Description	Approver	Date
	Betty George: Chief Legal Counsel	07/2018
	Sarah Fotheringham: HCS-Sr Attorney	07/2018

Applicability

UNC Medical Center

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