LOGAN HEALTH	Origination Last Approved Effective	04/2014 01/2024 01/2024	Owner	Audra Saranto: Vice President Ancillary Services Administrative Provision of Care
	Last Revised	01/2024		
	Next Review	01/2026	Applicability	Logan Health & LHMC

#### **Recognition and Reporting Abuse, A719**

#### PURPOSE

Status ( Active ) PolicyStat ID ( 15109333

- 1. To establish criteria for the identification of possible victims of abuse or neglect.
- 2. To establish Policy and Procedures for reporting by health care providers incidents of suspected abuse and/or neglect.

# POLICY

Logan Health will comply with all Montana and federal law and regulations regarding the mandatory reporting of known or suspected (1) child abuse or neglect; or (2) abuse, neglect or exploitation of an adult, elderly adult or disabled adult. Any health-care provider who has reasonable cause to suspect that abuse, neglect or exploitation of a child, adult, elderly older adult or disabled person has occurred is required by law to contact the Department of Public Health and Human Services (**DPHHS**).

In Montana, health care workers are mandated reporters when they know or have reasonable cause to suspect that a child is suffering from abuse, neglect, or exploitation. According to MCA 41-3-201, a mandated reporter can not refuse to make a report, based on the grounds of physician-patient relationship, or other privilege.

## PROCEDURE

- 1. Reporting abuse or neglect of children under 18 years of age:
  - A. Any health care provider who suspects that abuse, sexual abuse, exploitation, or neglect of a minor is occurring, is required to promptly contact DPHHS at 1-866-820-5437, twenty-four hours a day, 7 days per week.
  - B. Any health care provider involved in the delivery or care of an infant shall report any infant known to the professional to be affected by a dangerous drug as defined by Montana law.
  - C. The report will contain:
    - 1. The names and addresses of the child and the child's parents or other persons responsible for the child's care;

- 2. To the extent known, the child's age and the nature and extent of the child's injuries, including any evidence of previous injuries;
- 3. Any other information that the maker of the report believes might be helpful in establishing the cause of the injuries or showing the willful neglect and the identity of the person(s) responsible for the injury or neglect;
- 4. The facts that led the person reporting to believe that the child has suffered injury(ies) or willful neglect.
- D. When a person required to report finds visible evidence that a child has suffered abuse or neglect, the reporting person shall include in the report either a written description or photographs of the evidence.
- 2. All CPS reports are entered into the event management system (**MIDAS**) for internal tracking purposes, and to ensure that all required parties are aware that a report was made.
- 3. Reporting abuse, neglect or exploitation of any vulnerable adult 18 years of age or older and any adult 60 years of age or older:
  - A. Any health care provider who suspects that abuse, sexual abuse, exploitation or neglect of an adult, elderly adult or disabled person is occurring is required to contact DPHHS Adult Protective Services at (844) 277-9300 during normal business hours, Monday-Friday. After hours, call the Flathead County Sheriff at (406) 758-5610.
  - B. If the suspected victim is a resident of long-term care, the report should be made to the County Ombudsman at 406-758-5737.
  - C. The report will contain:
    - 1. The names and addresses of the adult, the older person or the person with a developmental disability and the person, if any, responsible for that person's care;
    - 2. The name and address, if available, of the person who is alleged to have abused, sexually abused, neglected, or exploited the older person or the person with a developmental disability;
    - 3. To the extent known, the person's age and the nature and extent of the abuse, sexual abuse, neglect, or exploitation, including any evidence of previous injuries, abuse, sexual abuse, neglect, or exploitation sustained by the older person or the person with a developmental disability and any evidence of prior instances of abuse, sexual abuse, neglect, or exploitation of other older persons or persons with developmental disabilities committed by the person alleged to have committed abuse, sexual abuse, neglect, or exploitation; and
    - 4. The name and address of the person making the report.
- 4. All APS reports are entered into MIDAS for internal tracking purposes, and to ensure that all required parties are aware that a report was made.
- 5. For all reports made, the reporting person documents the referral in the medical records indicating which agency was notified.
- 6. When making a report, individuals should not give information received from a third party; only information directly heard or seen.
- 7. A health care provider may not refuse to make a report as required by law on the grounds of a physicianpatient relationship or similar privilege.
- 8. After the initial report is made, all follow-up information requested from either APS or CPS is subject to applicable privacy laws and must involve Risk Management.

## DEFINITIONS

- 1. "Child abuse or neglect" means: (i) actual physical or psychological harm to a child; (ii) substantial risk of physical or psychological harm to a child; or (iii) abandonment.
- 2. "Vulnerable Adult" is an individual over the age of 60 years, or is at least 18 years of age:
  - 1. And is a person with a physical or mental impairment that substantially limits or restricts the person's ability to provider for their own care or protection.
  - 2. Or has a developmental disability as defined in 53-20-102:
    - a. Is attributable to intellectual disability, cerebral palsy, epilepsy, autism, or any other neurologically disabling condition closely related to intellectual disability
    - b. Requires treatment similar to that required by intellectually disabled individuals
    - c. originated before the individual attained age 18
    - d. Has continue or can be expected to continue indefinitely, and
    - e. Results in the person having a substantial disability

#### 3. Abuse means:

- 1. The infliction of physical or mental injury
- 2. The deprivation of food, shelter, clothing, or services necessary to maintain the physical or mental health of a vulnerable adult without lawful authority
- 3. The causing of personal degradation of a vulnerable adult in a place where the vulnerable adult has a reasonable expectation of privacy
- 4. Neglect means:
  - 1. The failure of a person who has assumed legal responsibility or a contractual obligation for caring for a vulnerable person, or who has voluntarily assumed responsibility for the vulnerable individuals' care, including an employee of a public or private residential institution, facility, home, or agency, to provide food, shelter, clothing, or services necessary to maintain the physical or mental health of a vulnerable or dependent individual
- 5. Exploitation means:
  - The unreasonable use of a vulnerable adult or of a power of attorney, conservatorship, or guardianship with regard to a vulnerable adult in order to obtain control of or to divert to the advantage of another the ownership, use, benefit, or possession of or interest in the vulnerable adult's money, assets, or property by means of deception, duress, menace, fraud, undue influence, or intimidation with the intent or result of permanently depriving the vulnerable adult of the ownership, use, benefit, or possession of or interest in the vulnerable adult's money, assets, or property
  - 2. An act taken by a person who has the trust and confidence or a vulnerable adult to obtain control of or to divert to the advantage of another the ownership, use, benefit, or possession of or interest in the vulnerable adult's money, assets, or property by means of deception, duress, menace, fraud, undue influence, or intimidation with the intent or result of permanently depriving the vulnerable adult of the ownership, use, benefit, or possession of or interest in the vulnerable adult of the ownership, use, benefit, or possession of or interest in the vulnerable adult of the ownership, use, benefit, or possession of or interest in the vulnerable adult of the ownership.
  - 3. The unreasonable use of a vulnerable adult or of a power of attorney, conservatorship, or guardianship with regard to a vulnerable adult done in the course of an offer or sale of insurance or securities in order to obtain control of or to divert to the advantage of another the ownership, use, benefit, or possession of the vulnerable adult's money, assets, or property by

means of deception, duress, menace, fraud, undue influence, or intimidation with the intent or result of permanently depriving the vulnerable adult of the ownership, use, benefit, or possession of the vulnerable adult's money, assets, or property

- 6. Personal degradation means:
  - publication or distribution of a printed or electronic photograph or video of a vulnerable adult when the person publishing or distributing intends to demean or humiliate the vulnerable adult or knows or reasonably should know that the publication or distribution would demean or humiliate a reasonable person. Personal degradation does not include the recording and dissemination of images or video for treatment, diagnosis, regulatory compliance, or law enforcement purposes, as part of an investigation, or in accordance with a facility or program's confidentiality policy and release of information or consent policy.
- 7. Physical injury means:
  - 1. means an intentional act, an intentional omission, or gross negligence resulting in substantial skin bruising, internal bleeding, substantial injury to skin, subdural hematoma, burns, bone fractures, extreme pain, permanent or temporary disfigurement, impairment of any bodily organ or function, or death.
- 8. "Health-care providers," who are required to report under this Policy, include: physicians, residents, interns, social workers, nurses, any other health or mental health professional, child-care staff, and members of Logan Health's staff who are engaged in the admission, examination, care or treatment of persons.

### REFERENCES

Abuse of Patients within the Organization: Definitions, Reporting, Education and Prevention, HR525

Montana Code Annotated: Title 41 Minors, Chapter 3 Child Abuse and Neglect, Part 2 Reports and Investigations. Retrieved from : <u>https://www.leg.mt.gov/bills/mca/title\_0410/chapter\_0030/part\_0020/</u> section\_0010/0410-0030-0020-0010.html

Montana Code Annotated: Title 52. Family Services. Chapter 3 Adult Services, Part 8 Montana Vulnerable Adult Prevention of Abuse Act, Retrieved from: <u>https://leg.mt.gov/bills/mca/title\_0520/chapter\_0030/</u> part\_0080/section\_0030/

0520-0030-0080-0030.html#:~:text=(a)%20the%20infliction%20of%20physical,9%2D103%20constitutes%20la wful%20authority

#### **Approval Signatures**

Step Description	Approver	Date
Admin Approval	Audra Saranto: Executive Director Service Line	01/2024
Policy Committee	Kelly Stimpson: Associate General Counsel	01/2024

Owner

Audra Saranto: Executive Director Service Line 01/2024

#### Applicability

Logan Health (locations excluding LHMC), Logan Health Medical Center

