



POLICIES AND PROCEDURES MANUAL

System Department

Supersedes: BMC ADM 01_008; UNMCP PE03

Section: Assessment of Patients (PE)

Subject: Reporting Abuse, Neglect or Injury

Number: PE 03

Attachments: [Community Resources](#)
[Affidavit for Reporting Condition of Minor Child Suspected Child Abuse-Neglect protective Custody](#)
[Acknowledgement of Receipt of Custody of Newborn-Child](#)

Date Effective:

Date Reviewed: 2/1/01, 10/08/03, 7/06, 2/09, 7/11, 7/13, 5/17, 5/21

**REPORTING OF
ABUSE, NEGLECT, OR INJURY**

POLICY

It is the policy of Nebraska Medicine (Nebraska Medical Center, Bellevue Medical Center, and UNMCP), to report suspected abuse or neglect of children and vulnerable adults as well as injury or violence involving non-vulnerable adults.

Documentation of patient assessment and actions taken are documented in the patient's medical record. All disclosures/reports must be documented to comply with IM22 Accounting of Disclosures policy.

A list of community resources for this population **is attached to this policy.**

DEFINITIONS: (based on Nebraska Statutes)

1. Abuse of a Child causes or permits a minor child to be:
 - a. Placed in a situation that endangers his or her life or physical or mental health; or
 - b. Cruelly confined or cruelly punished; or
 - c. Deprived of necessary food, clothing, shelter, or care; or
 - d. Left unattended in a motor vehicle if such minor child is 6 years of age or younger; or
 - e. Sexually abused; or
 - f. Sexually exploited by allowing, encouraging, or forcing such person to solicit for or engage in prostitution, debauchery, public indecency, or obscene or pornographic photography, films, or depictions.
2. Abuse of a Vulnerable Adult is defined as "abuse shall mean any knowing, intentional, or negligent act or omission on the part of a caregiver, a vulnerable adult, or any other person which results in physical injury, unreasonable confinement, cruel punishment, sexual abuse, exploitation, or denial of essential services to a vulnerable adult."
3. Domestic Violence and Abuse are defined by the relationships that may include spouses or former spouses, individuals who are cohabiting or have formerly cohabited, current or past boyfriends, girlfriends or fiancés, as well as persons with whom parenthood of a child is shared, may be suspects or victims in domestic violence situations. These categories may also apply to same sex relationships.
4. Failure to Report abuse or neglect of children or vulnerable adults, or injury or violence connected with commission of a criminal offense is a Class III misdemeanor. Confidential communication is suspended under these circumstances.
5. Protective Custody: (Children only)
 - a. Law Enforcement - If probable cause exists that the welfare of a child is in jeopardy, the police officer will place the child in the care of Nebraska Health and Human Services - Child Protective Services.
 - b. County Attorney - The protective custody of a child under Nebraska Health and Human Services - Child Protective Services will be in effect for two working days (48 hours excluding weekends and holidays). Court orders may be granted for protective custody or placement to ensure continuity of safe care for a child during investigation of abuse/neglect situations.
 - c. The child is in custody of the Nebraska Health and Human Services

6. Reporter: For this policy "Reporter" shall refer to any health care worker who has reason to believe that another person is a victim of abuse, neglect or violence.
7. Reporting for Vulnerable Adults: Nebraska Revised Statute 28-372 requires any physician, psychologist, physician assistant, nurse, nurse aide, other medical, developmental disability, or mental health professional, law enforcement personnel, caregiver or employee of a caregiver, operator or employee of a sheltered workshop, owner, operator, or employee of any facility licensed by the department, or human services professional or paraprofessional not including a member of the clergy has reasonable cause to believe that a vulnerable adult has been subjected to abuse, neglect, or exploitation or observes such adult being subjected to conditions or circumstances which reasonably would result in abuse, neglect, or exploitation, he or she shall report the incident or cause a report to be made to the appropriate law enforcement agency or to the department.
8. Reporting for Children: shall comply with Nebraska Revised Statute 28-711. (1) When any physician, any medical institution, any nurse, any school employee, any social worker, the Inspector General appointed under section 43-4317, or any other person has reasonable cause to believe that a child has been subjected to child abuse or neglect or observes such child being subjected to conditions or circumstances which reasonably would result in child abuse or neglect, he or she shall report such incident or cause a report of child abuse or neglect to be made to the proper law enforcement agency or to the department on the toll-free number established by subsection (2) of this section.

NOTE: Under HIPAA, protected health information (PHI) may be disclosed to agencies responsible for receiving reports of, or investigating suspected child/dependent adult abuse or neglect. Staff shall use their professional judgment in determining what information is related to the report/investigation. For example, the mother's PHI may be disclosed, if, in the professional judgment of the staff member, it is related to the suspicion of potential child abuse or neglect being reported/investigated.

9. Reporting for Injury Involving Other Adults (non-vulnerable): State Statute 28-902 requires every health care provider shall immediately report to law enforcement every case in which the health care provider is consulted for medical care for physical injury which appears to have been received in connection with, or as a result of, the commission of a criminal offense.
10. Suspected Child Abuse/Neglect Team (SCAN) is an interdisciplinary forum for education and support in the area of child abuse and neglect. The team shall be made up of the following positions: pediatric attending, child abuse expert physician, psychologist, social worker, inpatient and outpatient nursing, other Nebraska Medicine staff as needed. For education, consultation, and support, contact the SCAN Team Coordinator at 402-559-4420
11. Vulnerable Adult is defined as any person eighteen years of age or older who has a substantial mental or functional impairment, or for whom a guardian has been appointed under Nebraska Probate Code.

General Information: If suspected abuse occurs in another State or patient resides in another State, call the Abuse Hotline (1-800-652-1999) for direction

I. PROCEDURE - NEBRASKA

A. Reporting of Suspected Abuse or Neglect of Children

1. **When an individual suspects neglect** and the child is NOT in imminent danger, the individual should call the Child Protective Services Division (CPS) of the Nebraska Department of Health and Human Services through the Child/Adult-Abuse/Neglect Hotline, 1-800-652-1999.
2. **If the health care employee suspects abuse/neglect** and the child IS in imminent danger, call the appropriate legal jurisdiction by determining the locale in which the alleged abuse/neglect occurred. If in Omaha, notify the Omaha Police Dept., Child Victim/Sexual Assault Unit, between the hours of 0700 and 2300 at 402-444-5636 or 402-444-4135. If there is no answer, on weekends or after 11 p.m., call 911. In Sarpy County, call Bellevue Police Dept at 402-293-3100 or appropriate local policy department. If outside Omaha area, contact 911. If the Attending Physician is not the reporter, staff will assure that the Attending Physician is aware that a report was made.

3. **Consultation:** The General Pediatric Attending Physician may be contacted through the Nebraska Medicine Operator for consultation concerning child sexual abuse or any physical abuse cases needing clarification or assistance. If after 5 p.m., Monday-Friday, or on the weekend, call General Pediatric Staff on call. Child Abuse Pediatrics consultation can be obtained by calling the Children's Hospital operator and asking for the Child Abuse pediatrician on call. For suspected sexual abuse, refer to the Emergency Department. If patient is followed by Family Medicine, Family Medicine may be consulted at 402-559-7200 or, after hours, Family Medicine Resident on call.
4. **Also call Child/Adult Abuse/Neglect Hotline**, 1-800-652-1999, to report the case referred to the police, to ensure that the case will be followed in a timely manner. Person making report should be the first person witness. In most cases the reporter will immediately inform the family that a report was made; in certain cases a delay may be necessary for safety of child and for those involved. For example, if awaiting police presence for safety of child/staff.
5. The reporter shall then **immediately document** in the patient's medical record that such communications were made and the events surrounding the suspected abuse or neglect incident. If patient has ongoing medical needs, update team following. Example, a pediatric transplant patient that is seen outpatient for ongoing medical needs.
6. The staff person reporting to CPS will complete Accounting of Disclosure by using Quick Disclosure in One Chart
7. Social Work is available for clarification on the reporting process or if other consultation is needed. Social Work can be reached at 402-559-4420 (Nebraska Medicine or Bellevue Medical Center). After hours the on-call social worker can be reached through the hospital operator.
8. **For sexual assault**, refer to the Emergency Department.
9. **When the police arrive**, the reporter will:
 - a. Provide information that supports your suspicion/evidence of abuse or neglect, including
 1. Information from the medical record (e.g., x-rays, lab result).
 2. Answer any questions as needed to support the investigation.
 3. Make sure the police have informed the parents/guardian of any actions or protective custody placement.
 4. Ask police if there are visitation restrictions for family members.
 5. Note the visitation arrangements on Suspected Child Abuse/Neglect Protective Custody form (**Form MIS-MR-0220 attached**). Place this form in the front of the patient chart. Note visitation arrangements in progress note and notify nursing staff.
 6. Get name and serial (badge) number of the Officer taking the report and/or placing the protective custody.
10. **While waiting for Protective Custody:**
 - a. The reporter will inform the department manager or designee that CPS or Police have been contacted and are awaiting their decision if child will be placed in Protective Custody. The manager/designee will coordinate with staff for closer observation of the parties involved, using professional judgment appropriate to the situation.
 - b. Although a child is placed in Protective Custody, the parent/guardian rights remain intact and have access to child. Police or CPS will define family visitation privileges. The safety of the child is our primary duty.
11. **If the child is placed in Protective Custody:**
 - a. If the child is not hospitalized. The Police will contact Child Protective Services (CPS), who will arrange for foster care and assign a worker to be available to make all decisions for child's care (medical and otherwise).
 - b. If the child is hospitalized. The Police or CPS will: a) define visitation privileges; b) inform the parents of the interview and placement in protective custody; and c) report the actions to CPS and the County Attorney. CPS will assign a worker to make all decisions for the child's care (medical and otherwise).
 - c. If requested, an affidavit is completed by the reporter to support the protective custody ("Affidavit for Reporting Condition of Minor Child "**(form MIS-MR-0178 attached)**). The

reporter sends the completed form to the County Attorney. Call for method of sending the affidavit form: Douglas County Attorney- Juvenile at 402-444-7051; Sarpy County Attorney at 402-593-2230.

- d. The person receiving information from police re: protective custody will fill out the Suspected Child Abuse/Neglect Protective Custody (form MIS-MR-0220 - attached) and place it in the front of the patient's chart. Place this form in the front of the patient chart. Note visitation arrangements in progress note and notify nursing staff.
- e. The County Attorney facilitates a decision within 48 working hours to continue protective custody. If continuing the protective custody, the County Attorney will deliver or fax formal papers signed by a judge at the earliest possible date.
- f. If a Court Order is not received near the end of the 48 hour hold, please contact Social Work, who will contact Juvenile Court (Douglas County 402-444-7051; Sarpy County 402-593-2230) to determine if the court order is currently being processed and document its status.
- g. A representative of CPS must give consent for medical treatment or procedures when the patient is a state ward. If problems arise in obtaining consent, contact the hospital social worker.
- h. Parents may be consulted when possible and advised of the plan of care at the discretion of the CPS worker.
- i. When the child is ready to leave the hospital:
 - He/She should be released only to a CPS worker or a police officer, or foster parent who was identified by CPS. CPS provides the name of the foster family to the nursing staff.
 - This information should be documented in the medical record: "discharge to foster parent as identified by caseworker, " (include name of caseworker) "" . **DO NOT LIST THE NAME OF THE FOSTER PARENT** in the medical record. Obtain and make copy of foster parent photo identification.
 - An "Acknowledgment of Receipt of Newborn/Child" (form CON-MR-0044) will be completed by the foster parent and this will be maintained in an administrative file in the Health Information Management Department, separate from the child's medical record.
 - Hospital staff will send document and the copy of foster parent photo identification in a confidential envelope to Social Work Department (zip 1130).
 - Social Worker place note on documents for the medical record staff, "HIM Operations Manager for an administrative file."
 - Social Worker send documents in a "Confidential" envelope to the Health Information Management– zip 9100, Attention: HIM Operations Manager.
- j. The Social Worker shall: (a) confirm that the Police Officer contacted CPS; b) verify that Protective Custody Order has been placed; (c) attempt to obtain copies of the Court Order; (d) verify visitation orders; (e) facilitate the discharge; (f) liaison with the court appointed guardian; g) notify the following: Attending Physician and/or House Officer, Staff Nurse, Patient Unit Manager/On-Call Manager, Security, and CPS; (h) ensure that written reports are submitted when required; and (i) provide copies of Protective Custody Order to Security; (j) confirm that parent(s) are informed about protective custody.

12. **If the investigating officer does not believe there is probable cause that the child is in jeopardy and you believe there is significant evidence to warrant such:**

- a. Clearly explain to the officer why you think the protective custody should be instituted.
- b. If the officer still refuses,
 - i. Douglas County: call Omaha Police Department, Child Victim / Sexual Assault Unit at 402-444-5636. If after hours or on weekends, call the officer's administrative lieutenant in charge (402-444-4133 or 402-444-5652) and plead your case while the officer is present.
 - ii. Sarpy County: Call Bellevue Police Dept at 402-293-3100
- c. If protective custody is still refused, call
 - i. Douglas County Juvenile Court office at 402-444-7051 or 402-444- 1751. Call while the officer is still present so there can be a three-way conversation. There is a county attorney on call 24 hours a day on pager 402-444-0246.
 - ii. Sarpy County Juvenile Court at 402-593-2230

13 When abuse/neglect occurs in any institution or clinic (including Nebraska Medicine), the reporter will contact CPS and/or law enforcement. In some instances CPS will refer report to Health Facilities Investigation (in Department of Health & Human Services) at 1-402-471- 0316 for investigation.

- a. If the suspected perpetrator is another patient or an employee at Nebraska Medicine, the nurse in charge will:
 - i. Separate the patients or patient and staff member immediately so they do not have access to one another until the incident is investigated.
 - ii. Assess the physical and emotional status of the patients,
 - iii. Notify the patient's attending physician,
 - iv. Notify the department manager who will notify:
 - the department director
 - Administrator On-Call who will:
 - Notify other disciplines as appropriate
 - Determine the urgency of the investigation of the event and direct personnel accordingly
 - v. After hours and on weekends, notify the Nursing Resource Coordinator in addition to the above.
- b. Disclosure regarding the incident will follow the guidelines established in the Nebraska Medicine Policy LD-08, "Disclosure for Unanticipated Outcomes".
- c. Complete Incident Report
- d. If an employee is the perpetrator, refer to Nebraska Medicine Policy HR-7, "Corrective Action"

14. If patient is discharging to out of state and report has been made in Nebraska/Iowa to CPS during hospital stay or while receiving outpatient care, eg. transplant patient here for extended stay, notify home state Hotline of CPS contact and notify local providers of concern.

B. Reporting of Abuse or Neglect of Vulnerable Adults

1. **The health care employee suspecting abuse/neglect (reporter) shall notify the Adult Protective Services (APS)** in the appropriate county in which the suspected abuse occurred. Call 1-800-652-1999 (Child/Adult Abuse Line). Person making report should be the first person witness.
2. If the reporter deems that the **patient is in imminent danger**, she/he should also contact the Police Department at 911. OPD can make a referral to the appropriate jurisdiction. Inform APS/Hotline if the police have been contacted
3. **For sexual assault**, refer to the Emergency Department.
4. The reporter shall then **immediately document** in the patient's medical record that such communications were made and the events surrounding the suspected abuse or neglect incident.
5. The staff person reporting to APS will complete Accounting of Disclosure by using Quick Disclosure in One Chart
6. Social Work is available for clarification on the reporting process or if other consultation is needed. Social Work can be reached by 402-559-4420 (Nebraska Medicine and Bellevue Medical Center). After hours the on-call social worker can be reached through the hospital operator.
7. **If a vulnerable adult is being released** to what appears **to be an unsafe environment**, APS (or police if there seems to be imminent danger) should be contacted to assess and arrange appropriate interventions and/or short-term placement.
8. **When abuse/neglect occurs in any institution or clinic** (including Nebraska Medicine) the reporter will contact APS and/or law enforcement. In some instances, APS will report to Health Facilities Investigation (Department of Health & Human Services) at 1-402-471-0316 for investigation.
 - a. If the suspected perpetrator is another patient or an employee at Nebraska Medicine, the nurse in charge will:
 - i. Separate the patients or patient and staff member immediately so they do not have access to one another until the incident is investigated
 - ii. Assess the physical and emotional status of the patients,
 - iii. Notify the patient's attending physician,
 - iv. Notify the department manager who will notify:
 - the department director
 - Administrator On-Call who will:
 - Notify other disciplines as appropriate

- Determine the urgency of the investigation of the event and direct personnel accordingly
- v. After hours and on weekends, notify the Nursing Resource Coordinator in addition to the above.
- b. Disclosure regarding the incident will follow the guidelines established in the Nebraska Medicine Policy LD-08, "Disclosure for Unanticipated Outcomes".
- c. Complete Incident Report.
- d. If an employee is the perpetrator, refer to Nebraska Medicine Policy HR-7, "Corrective Action"

C. Reporting Procedure for Injury Involving Other Adults (non-vulnerable) – Domestic Violence

1. If the patient is being treated for an injury due to violence:
 - a. The attending physician or designee must call the 911.
 - b. Notification of police and the serial/badge number of the police officer taking the report are to be noted on the chart.
 - c. For sexual assault, refer to the Emergency Department.
2. If the patient is not being treated for an injury, but staff suspect patient is experiencing domestic violence:
 - a. A primary need of those that are experiencing domestic violence is assistance in accessing their own resources and support systems. Hospital staff are encouraged to provide information and education to the patient to facilitate self-reporting in situations of violence.
 - b. Community resources for domestic violence include Women Against Violence (Women's Center for Advancement, 402-345-7273;), The Shelter (402-558-5700), Domestic Violence Squad (402-444-5825), or Victim Assistance Unit (402-444-4597). For Sarpy County contact Heartland Family Service: 1-800-523-3666
 - c. For health care professionals only: to request an advocate call 402-618-YWCA (9922). Available 24 hours a day.
 - d. As appropriate, contact National Human Sex Trafficking hotline: 888-373-7888.
3. The Social Work Department staff are available for consultation. Nursing Resource Coordinators are also available after business hours and on weekends

II. PROCEDURE - IOWA

A. Reporting Suspected Abuse or Neglect of Children

1. **The health care employee suspecting abuse or neglect must make an oral report** within 24 hours of a determination being made that situation is reportable to the Iowa Department of Human Services Abuse Hotline at 800-362-2178. Person making report should be the first person witness. The Hotline will direct the reporter to contact law enforcement if the reporter has reason to believe that **immediate protection for the child is advisable.**
2. **For Sexual Assault**, refer to the Emergency Department.
3. **When abuse/neglect occurs in an institution or clinic** (including Nebraska Medicine) the reporter will contact CPS and/or law enforcement. Also make contact with Iowa Department of Inspections & Appeals at 877-686-0027.
 - a. If the suspected perpetrator is another patient or an employee at Nebraska Medicine, the nurse in charge will:
 - i. Separate the patients or patient and staff member immediately so they do not have access to one another until the incident is investigated
 - ii. Assess the physical and emotional status of the patients,
 - iii. Notify the patient's attending physician,
 - ii. Notify the department manager who will notify:
 - the department director
 - Administrator On-Call who will:
 - Notify other disciplines as appropriate
 - Determine the urgency of the investigation of the event and direct personnel

- accordingly
- v. After hours and on weekends, notify the Nursing Resource Coordinator in addition to the above.
- b. Disclosure regarding the incident will follow the guidelines established in the Nebraska Medicine Policy LD-08, "Disclosure for Unanticipated Outcomes".
- c. Complete Incident Report
- d. If an employee is the perpetrator, refer to Nebraska Medicine Policy HR-7, "Corrective Action"

B. Reporting of Abuse or Neglect of Vulnerable Adults

1. **The health care employee suspecting abuse of a Dependent Adult must make an oral report** within 24 hours to the Iowa Department of Human Services Abuse Hotline at 800-362-2178. The Hotline will direct the reporter to contact law enforcement if the reporter has reason to believe that **immediate protection for the dependent adult is advisable.**
3. **For sexual assault**, refer to the Emergency Department
4. **When abuse/neglect occurs in an institution or facility** (including Nebraska Medicine) the reporter will contact APS and/or law enforcement. Also make contact with the Iowa Department of Inspections & Appeals-877-686-0027.
 - a. If the suspected perpetrator is another patient or an employee at Nebraska Medicine, the nurse in charge will:
 - i. Separate the patients or patient and staff member immediately so they do not have access to one another until the incident is investigated
 - ii. Assess the physical and emotional status of the patients,
 - iii. Notify the patient's attending physician,
 - iv. Notify the department manager who will notify:
 - the department director
 - Administrator On-Call who will:
 - Notify other disciplines as appropriate
 - Determine the urgency of the investigation of the event and direct personnel accordingly
 - v. After hours and on weekends, notify the Nursing Resource Coordinator in addition to the above.
 - b. Disclosure regarding the incident will follow the guidelines established in the Nebraska Medicine Policy LD-08, "Disclosure for Unanticipated Outcomes".
 - c. Complete Incident Report
 - d. If an employee is the perpetrator, refer to Nebraska Medicine Policy HR-7, "Corrective Action"

C. Reporting Procedure for Injury Involving other Adults (non-vulnerable) – Domestic Violence

1. If the patient is being treated for an injury due to violence:
 - a. The attending physician or designee must call 911.
 - b. Notification of police and documentation of the police officer's name and badge/serial number taking the report.
 - c. Discuss report with patient
 - d. For sexual assault, refer to the Emergency Department.
2. If the patient is not being treated for an injury, but staff suspect patient is experiencing domestic violence:
 - a. A primary need of those experiencing domestic violence is assistance accessing their own resources and support systems. Hospital staff are encouraged to provide information and education to the patient to facilitate self-reporting of situations of violence.
 - b. Community resources in Iowa for domestic violence include: Hotline for Domestic Violence at 800-942-0333 (if calling from Iowa); Catholic Charities Domestic Violence/Sexual Abuse Program / Phoenix House at 712-256-2059 and 24 hours crisis line at 712-328-0266/888-612-0266.
 - c. As appropriate, contact National Human Sex Trafficking hotline: 888-373-7888.

3. The Social Work Department staff are available for consultation. Nursing Resource Coordinators are also available for consultation after business hours and on weekends

Related Policies:

- PE 02 – Identification of Abuse or Neglect
- PE 04 - Safe Haven
- IM 22 – Accounting of Disclosure

Staff Accountability:

- Suspected Child Abuse/Neglect Team (SCAN) – April 2021
- Social Work Department – May 2021
- Management of Emergency Department – May 2021

Department Approval

Signed | s |: Andrea Lonowski, MSN, RN

Title: Director of Care Continuum

Department: Care Transitions

Administrative Approval

Signed | s |: Suzanne Nuss, MBA, PhD, RN

Title: Chief Nursing Officer, Nebraska Medicine