PURPOSE:

- To establish a unified process for identifying, assessing, and reporting:
  - Suspected or confirmed abuse, neglect, exploitation, or molestation;
  - Self-harm, suicidal ideation, or mental health crises;
  - Threats to staff safety during home visits or interactions with patients;

- To ensure mandated reporting and safety process maintains compliance with state and federal reporting requirements and protects the rights and well-being of patients and staff.

DEFINITIONS:

- Abuse: Physical, sexual, emotional, or verbal mistreatment.
- Neglect: Failure to provide necessary care, supervision, or services.
- Exploitation: Improper use of a patient's resources or vulnerability.
- Self-Harm/Suicidal Ideation: Verbal, written, or behavioral indicators of intent or thoughts to harm oneself.
- Hostile or Unsafe Behavior: Actions, threats, or statements that make a nurse feel unsafe during service provision.

POLICY:

- The Agency and its representatives are committed to:
  - Protecting patients from abuse, neglect, exploitation, and self-harm;
  - Maintaining a safe environment for all staff during service delivery;
  - Meeting all mandated reporting responsibilities across all states of operation;
  - Encouraging early identification and intervention in situations that may escalate to violence or self-harm.

- Healthcare professionals and other mandated reporters shall not be held liable for good-faith reporting, and may face civil or criminal penalties for failing to report.

- The Agency recognizes that there can be no guarantee of the patient's protection from neglect, exploitation, or abuse because abuse is generally intermittent and Agency services account for a minimal amount of time and interaction between Agency staff and family in the home environment.

PROCEDURE:

- Initial and Ongoing Assessment

  Upon admission and during ongoing care, the nurse will assess for risk factors of abuse, neglect, or self-harm. Risk indicators will be documented in the patient's chart.

- Identification and Response

  If a patient:
  - Expresses suicidal ideation;
  - Appears to be under the influence and is making threatening or irrational statements;
  - Admits to or shows signs of abuse, neglect, or exploitation;
  - Makes the nurse feel unsafe;

  The nurse should:
  - Maintain professional distance and de-escalate as needed;
  - Leave the residence if personal safety is at risk;
  - Contact 911 for immediate danger;
  - Contact the Clinical Supervisor to report the event.

- Documentation

  The nurse must document what was said or observed, the questions asked, and answers received, any action taken (911 call, exit, APS/CPS contact), and notification to the pharmacy or care team (if applicable).

Reference: PDN Policy 10016, 10017 & 10018

- Reporting

  The Clinical Supervisor, Director of Nursing, or Agency Director is responsible for ensuring timely reporting to:

  - Adult or Child Protective Services (APS/CPS);
  - Local crisis services or 988 for suicidal ideation;
  - Law enforcement, if necessary;
  - The contracting pharmacy & ordering provider with respect for HIPAA and safety.

State	Child Abuse Hotline	Adult Abuse Hotline	Crisis	Additional Crisis Hotline(s)
NC	800-4-A-CHILD Local DSS	Local DSS	988	—
GA	855-422-4453	same	988	800-715-4225
SC	800-645-9789	803-898-7601	988	833-364-2274
VA	800-552-7096	888-832-3858	988	—
KY	877-597-2331	same	988	800-273-8255
IN	800-800-5556	800-992-6978	988	800-273-8255
WV	800-352-6513	same	988	844-HELP4WV 866-903-3787

- Staff Training

  All clinical staff will receive training at hire and annually:
  - On recognizing signs of abuse, neglect, exploitation, and self-harm;
  - On mandated reporting laws and procedures in each service state;
  - On nurse safety and de-escalation strategies in the home.

- Legal Protections

  Mandated reporters are immune from liability for good faith reports.
  - Failure to report can result in civil or criminal penalties.
  - Non-mandated reporters are encouraged to report and also receive liability protection, unless reports are made maliciously.