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CENTRAL STATE HOSPITAL
PROTOCOL

SUBJECT: ALLEGATIONS OF INDIVIDUAL VERBAL AND PHYSICAL ABUSE
AND/OR NEGLECT

ANNUAL REVIEW MONTH: April

RESPONSIBLE FOR REVIEW: Chairperson of Individual Rights
Committee/Human Resources Director

LAST REVISION DATE: September 2010

The purpose of this procedure is to establish guidelines to insure that individuals are not exposed to verbal and physical abuse and/or neglect and to assure that corrective action is taken when necessary.

Participants: Service Chief/
Department Managers
Professional and
Direct Care Supervisors
Employee
Immediate Supervisor
Physician or
Officer of the Day (O.D.)
Service Director
CSH Police Chief
Director of Staff Development
and Training Department
Regional Hospital Administrator (RHA)
/Designee
Human Resource Director
Director of Legal and Special
Services/Designee (LSSO)

RESPONSIBLE PERSON

RESPONSIBILITY

Service Chief, Department
Managers

Initiate written internal monitoring system to reduce the risk of abuse and/or neglect of individuals.

**Professional and Direct
Care Supervisors**

Make frequent and intermittent surveys of assigned work area and its programs to discover:

- a. possible instances of individual abuse/exploitation and/or neglect; and
- b. conditions that may result in abuse/exploitation and/or neglect.

Employee

Report to immediate supervisor when a witness to an overt or covert act of abuse/exploitation and/or neglect, or when there is reason to suspect abuse and/or neglect.

Immediate Supervisor

1. Notify appropriate service director, department head or office director.
2. Call the attending physician or O.D., if appropriate.
3. Notify Police Department and report incident to dispatcher.
4. Draft CIR and submit within 22 hours on all alleged abuse and/or neglect and submit in compliance with CSH Policies and Procedures, 4.00A-Individual Rights and CSH Ethics Forum and Department of Behavioral Health and Developmental Disabilities (DBHDD) Policy 03-515 Incident Management.

Physician or O.D.

1. Report to the area of incident.
2. Complete a thorough examination of the individual, insuring documentation in the individual's clinical record.
3. Estimate how injury may have occurred (e.g., appearance of hand mark,

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cigarette burn, etc.) and age of injury (e.g., appears to have occurred within last hour, etc.) to extent possible where physical evidence of injury is present.

**Service Director/
Designee**

1. Report to the area immediately.
2. Insure that the Critical Incident Report (CIR) has been completed.
3. Review the CIR with the person(s) making the charge of individual abuse/exploitation and/or neglect.
4. Notify the employee charged with abuse/exploitation and/or neglect and take his/her statement.
5. Immediately contact the CSH Human Resources Office, about any proposed suspension or reassignment of subject employee.
6. Immediately remove the employee charged with abuse and/or neglect from the work area. Reassign or suspend with pay pending the outcome of the investigation. The service director, department head or office director must inform the employee of the work assignment during the investigation or, if the employee is suspended with pay, of the policy regarding suspensions with pay.
7. Ensure that a complete physical examination has been completed by a physician, when appropriate.
8. Ensure that CSH Police Department has been notified.

CSH Police Chief

If the investigative results indicate abuse has occurred, contact the Director of LSSO about potential pursuit of

criminal charges.

**Service Chief,
Department Managers**

1. If abuse and/or neglect have occurred, take disciplinary action after consultation with Human Resources Director.
2. Complete Corrective Action Plan (CAP) and submit to LSSO.
3. Ensure that all employees receive training on a quarterly or biannual basis, as appropriate, to reduce the possibility of abuse/exploitation and/or neglect.
4. Ensure that all employees are knowledgeable about this procedure.

**Service Director,
Department Head or
Office Director**

1. Consider all reports of individual abuse.
2. If the service director, department head or office director is unavailable, the identified administrative duty person of the area will execute the above listed steps. If any difficulty is encountered in securing the services of a physician, the service area clinical director is to be notified immediately.

Human Resources

Assist Service Chief with coordinating any needed personnel actions relating to reassignment and disciplinary actions resulting from individual abuse allegations.

**Director of Staff
Development and
Training Department**

1. Develop and provide individual rights

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training to all new employees and as requested by service chiefs, department heads and office directors.

2. Training is to include, but not be limited to, areas such as:
 - a. rights of individuals
 - b. human dignity
 - c. normalization
 - d. relevant policies and procedures

The following is applicable for initiating intervention in cases of alleged abuse and/or neglect occurring outside this facility to individuals for whom the hospital has some responsibility. Examples would include occurrences found upon admission, upon return of the individual from a temporary visit, and occurring during the hospital's follow-along process subsequent to an individual's release to an intermediate care facility, community group home, etc., (Please refer to Policy 4.46, Victims of Suspected Abuse or Neglect). Occurrences while the individual is on the hospital grounds, residing on the hospital grounds, or attending off-campus activities (e.g., baseball games, camping trips) under the auspices and supervision of the hospital, shall be handled in accordance with this CSH policy.

Approved:

This protocol has been approved by the RHA and CMO.