

ENLOE MEDICAL CENTER

**ADULT/CHILD ABUSE AND DOMESTIC VIOLENCE
REPORTING REQUIREMENTS**

Sections 11160-11166 and 15632 of the California Health and Welfare Code and Enloe Medical Center policy require that all employees be provided with a copy and sign this statement. It will be retained in the employee's personnel file. The Health and Welfare Code provides as follows:

For Suspected Child Abuse or Neglect

Any employee who has knowledge of or observes a child in his/her professional capacity or within the scope of his/her employment who he/she knows or reasonably suspects has been the victim of child abuse shall report the known or suspected instance of child abuse to a child protective agency. The report is to be made immediately or as soon as practically possible by telephone and a written report is to be sent within 36 hours of receiving the information concerning the incident.

For Elder or Dependent Adult Abuse

Any administrator or employee in his/her professional capacity or within the scope of his/her employment who has observed or has knowledge of an incident that reasonably appears to be physical abuse, abandonment, isolation, financial abuse, or neglect, or has been told by an elder or dependent adult that he or she has experienced behavior constituting physical abuse, abandonment, isolation, financial abuse, or neglect, or who reasonably suspects abuse shall report the known or suspected instance of abuse. The report shall be made immediately or as soon as practically possible by telephone and a written report is to be sent within two working days of receiving the information.

If the abuse has occurred in a long-term care facility, except a state mental hospital or state developmental center, the report shall be made to the local ombudsman or the local law enforcement agency. If the abuse has occurred any place other than above, the report shall be made to the adult protective services agency or local law enforcement.

For Domestic Violence

Any employee who in his/her professional capacity or within the scope of his/her employment, who has knowledge of or has observed domestic violence or injuries caused by a deadly weapon, or whom he/she knows or reasonably suspects has been the victim of domestic violence shall report the known or suspected incident of domestic violence to the appropriate police or sheriff's department. The report is to be made immediately or as soon as practically possible by telephone. A written report is to be sent within two working days of receiving the information concerning the incident.

A copy of the Child Abuse, Elder or Dependent Adult Abuse or Domestic Violence report will be placed in the patient's medical record to alert staff of the situation. If you have any questions regarding this reporting requirement, contact your supervisor or Enloe Medical Center Administration. **Refer to Chapter II, Patient Care, in the Organization wide Policy and Procedure Manual for specific definitions of abuse and neglect and for additional resource information.**

I certify that I have read and understand the reporting requirements for Elder or Dependent Adult/Child Abuse and Domestic Violence and will comply with my reporting obligations as an employee of Enloe Medical Center

Name of Employee (please print)

Employee's Job Classification

Signature

Date