


Name of Policy: <u>Duty to Protect</u> Policy Number: 3364-122-42 Department: Nursing Service – Kobacker Inpatient Psychiatric Hospital Approving Officer: Chief Nursing Officer Responsible Agent: Administrative Director Scope: The University of Toledo Medical Center	 Effective Date: 12/01/2021 Initial Effective Date: 3/2007				
<table> <tr> <td><input type="checkbox"/> New policy proposal</td> <td><input type="checkbox"/> Minor/technical revision of existing policy</td> </tr> <tr> <td><input type="checkbox"/> Major revision of existing policy</td> <td><input checked="" type="checkbox"/> Reaffirmation of existing policy</td> </tr> </table>		<input type="checkbox"/> New policy proposal	<input type="checkbox"/> Minor/technical revision of existing policy	<input type="checkbox"/> Major revision of existing policy	<input checked="" type="checkbox"/> Reaffirmation of existing policy
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(A) Policy Statement

Implement the duty to protect requirements per Ohio Revised Code Section 5122.301 and 2305.51 in order to protect against existing threat to life or serious bodily injury to another person.

(B) Purpose of Policy

To ensure the safety and protection from harm of any identifiable individuals or structures that a mental health professional believes to be at risk due to credible threat(s) of serious physical harm or death made by a patient.

(C) Procedure

- Any mental health professional to whom an explicit threat of serious physical harm to another person or persons or identifiable structure is made, or who is made aware by a knowledgeable person of an explicit threat made by a patient, will complete the Duty to Protect Form and initiate the process.
- Any explicit threat by a patient shall be promptly communicated by the individual who heard the threat or was made aware of the threat, to the patient's treatment provider or designee. This provider shall determine, based on the patient's history and current condition, whether the threat represents a credible danger to others.
 - If the provider does not consider the threat to be a credible danger to others, this decision and the reason for this determination shall be documented in the clinical record.
 - If the provider considers the threat to be a credible danger, provider will complete the Duty to Protect form, initiate the process, and document the actions taken in the progress notes of the medical record.
- The Duty to Protect form will be completed fully as prescribed on the form and follow up actions will be taken as indicated.
- The original Duty to Protect form will be kept in the patient's medical record and copies will be available to all appropriate parties as necessary.
- Disclosure of PHI will be documented in accordance with the University Medical Center Policy 3364-100-90-11(change to reflect new #), *Accounting and Documentation of Disclosures of Protected Health Information other than Treatment, Payment or Healthcare Operations*.

Approved by:		Review/Revision Date:
		3/2007
		5/17/2010
		7/29/2014
		9/25/17
		10/1/2020
		12/1/21
_____ Lindsay Watson, LISW, MISW Administrative Director	_____ Date	
_____ Tanvir Singh, MD Medical Director, Kobacker Inpatient Unit Professor Psychiatry	_____ Date	
_____ Kurt Kless, MSN, MBA, RN, NE-BC Chief Nursing Officer	_____ Date	
<i>Review/Revision Completed By:</i> <i>Administrator Ambulatory Services & Behavioral Health</i> <i>Tammy Cerrone, Staff Nurse A. Mullins, LISW-S</i>		
		Next Review Date: 12/01/2024
Policies Superseded by This Policy: 1-M-46		