(A) Policy Statement

It is the policy of the Rehabilitation Services Department that our patients will be given competent and timely medical care, and that they will be treated in a consistently kind and respectful manner.

Certain types of behaviors are inconsistent with this philosophy and may constitute abuse or neglect of patients and/or their families and visitors.

All staff are required to report instances of actual or suspected abuse, neglect, or exploitation of patients, families, and visitors which occur as the result of staff conduct.

(B) Purpose of Policy

To identify attitudes and behaviors which constitute patient abuse or neglect, and to assure that any incidents of suspected or actual abuse/neglect are reported, investigated, and resolved.

(C) Procedure

A. Identification Of Abuse And/Or Neglect

1. Inadequate supervision of patients whose physical or mental condition may result in poor judgment, and who are therefore at risk of injury or illness without supervision.

Failure to investigate unusual incidents or sounds which may indicate a patient's need for medical services, protection, or control.

Failure to take therapeutic action when such action is indicated, or to notify the appropriate personnel.

2. Engaging in sexual conduct of any kind with a patient.

3. Failure to correctly follow procedures related to actions which may restrict a patient's freedom, such as behavior management procedures.

4. Certain acts or gestures:
   - Threatening acts or gestures which cause feelings of fear or intimidation.
   - Derogatory acts or gestures which cause feelings of ridicule, scorn, or shame.
   - Acts or gestures that show disrespect or lack of concern for the patient's feelings.

5. Assault, battery, false imprisonment, or extortion of patients via words or actions.

6. When choosing language to motivate patients to actively participate in therapeutic activities, staff should be aware of possible unintended consequences of their words. "Unintended consequences" may include emotional upset or harm to patients, or misinterpretation by observers.
Before using intense or potentially controversial language, staff should consider whether another form of communication could be used and should first try other alternatives that are less intense or emotionally laden.

The following language should NEVER be used:

- Language that might be perceived as threatening or coercive, and which might cause a patient to feel fearful, intimidated, or limited in freedom to act or make choices.
- Language which could be perceived as derogatory or insulting to the patient.
- Curse words or profanities.

B. Reporting Abuse And/Or Neglect Of Patients

Staff are required to report any incident which they believe might constitute abuse or neglect of patients. Because safety of patients is our first concern, a reasonable suspicion about the observed behavior is sufficient to warrant reporting the situation so that any necessary corrections can be made to prevent or reduce harm to the patient.

1. Staff members who have a reasonable basis to believe that abuse, neglect, or exploitation of a patient has occurred will immediately:
   - Take all appropriate and feasible steps necessary to protect the patient.
   - Report the incident to their immediate supervisor.

2. The supervisor and/or charge nurse will:
   a. determine the immediacy of possible danger to the patient(s) involved,
   b. decide whether further immediate action is required to protect patients,
   c. initiate corrective action, if appropriate, as appropriate.
   d. Report the incident and the follow-up measures taken to the appropriate Rehabilitation Services Director, depending on staff involved.

3. Prevention of instances of patient abuse/neglect is a goal of this facility. Consequently, education of all staff, and particularly those involved in the incident, will be a primary goal of the investigation process.

4. Report will be completed according to UTMC policy and procedures as necessary and appropriate.

5. If appropriate, disciplinary procedures will be implemented by the supervisor of the employee(s) involved, as outlined in UTMC policy and procedures manuals.
It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.