

**VA EASTERN COLORADO HEALTH CARE SYSTEM  
VETERANS HEALTH ADMINISTRATION  
DEPARTMENT OF VETERANS AFFAIRS**

DEC 18 2012

00-78

(OI)

**PATIENT ABUSE**

**1. PURPOSE:** To establish a health care system policy and procedures to be followed in cases of alleged or suspected patient abuse.

**2. POLICY:** It is the policy of the Eastern Colorado Health Care System (ECHCS) that no patient will be mistreated or abused, in any way by an employee.

**3. DEFINITIONS:**

a. Patient Abuse is defined as an act that involves physical, psychological, sexual, and/or verbal abuse, such as the following:

- (1) Intentional omission of care.
- (2) Willful violations of a patient's privacy.
- (3) Intimidation, harassment, or ridicule of a patient.
- (4) Willful physical injury.
- (5) Unintended injury as stated above, through employee's course of actions.

(a) VA Police (and some clinicians) oftentimes must use physical force as part of their job to protect themselves, other patients, and/or to control a specific patient. Injuries to the patient can occur when force is being applied.

1. Each employee is responsible for applying only the minimal level of force that is reasonably necessary to control a given situation. This applies during both emergent and routine operations.

(6) Any action or behavior that conflicts with patient's rights, identified in ECHCS Policy 00-14, Patient Rights and Responsibilities.

b. Administrative Board of Investigation (AIB) is defined as: An investigative process defined under VHA Handbook and Directive 0700, Administrative Investigations.

**4. RESPONSIBILITY:**

a. It is the responsibility of all employees to report any actual or suspected incidents of

patient abuse to his/her immediate supervisor within one hour of awareness of the event, or immediately to prevent further endangerment of the veteran.

b. It is the responsibility of each employee to become familiar with the contents of this policy. Every employee should avoid any act which could be construed as abuse or mistreatment of patients.

c. It is the responsibility of all supervisors in the organization to assure each employee has reviewed this Directive annually and signs the Patient Abuse Statement of Understanding (Attachment A).

d. It is the responsibility of the informed Supervisor to notify a member of the Executive Leadership Team (ELT) and if criminal acts or suspected criminal acts occur, to report those events to the VA Police and/or the VA Office of the Inspector General (OIG). Failure to report an incident of patient abuse may result in administrative action.

e. It is the responsibility of VA Police to investigate and refer criminal acts for prosecution.

f. It is the responsibility of the Director to assure compliance with this Directive.

## 5. PROCEDURES:

a. Documentation of understanding of the policy and expectations to report:

(1) Human Resources Management Service (HRMS) will provide every new employee a copy of this policy at new employee orientation.

(2) The Patient Abuse Statement of Understanding (Attachment A) will be signed by the new employee and filed in the employee's Official Personnel Folder (OPF) and Competency Assessment file, which is maintained by HRMS.

(3) Supervisors will re-distribute and/or discuss this policy in a staff meeting and assure that every employee in his/her department signs the Patient Abuse Statement of Understanding (Attachment A) on an annual basis. The Patient Abuse Statement of Understanding will be maintained in the employee's unit 6 sided Competency Assessment file.

b. Reporting and investigation of abuse:

(1) The employee will notify his/her immediate supervisor on duty within one hour of awareness of the event, or immediately to prevent further endangerment of the veteran.

(2) Employees who become aware of possible abuse of a patient will initiate one of the following procedures within 24 hours: 1) the electronic Patient Incident Report form (ePIR); or 2) call the patient safety Hotline **1-SAFE (7233)**.

(3) The supervisor will subsequently notify a member of the ELT within two hours of being informed of the alleged abuse, as outlined in the Patient Safety Improvement Program Policy (00-107).

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(4) Actual or possible criminal acts must be reported to the VA Police without delay. If the actual or possible criminal act is felonious, the OIG must be notified immediately. This will be determined by the appropriate Supervisor and/or ELT member.

(5) VA Police will investigate allegations of criminal acts. If the act was felonious, the OIG will be notified without delay. If criminal behavior is substantiated, the VA Police will refer the case for prosecutorial review.

(6) An administrative inquiry or investigation of alleged incidents of patient abuse and/or mistreatment will be initiated by the Director.

(7) Allegations of patient abuse must be investigated by an AIB. Exceptions to the requirement for an Administrative Investigation (AI) are when the patient is known by the treatment team to use allegations of this nature or the threat of making such allegations to manipulate staff, and when the condition of the patient making the allegation is such that the patient could not possibly have been aware of what was, in reality, occurring. If the employee admits to patient abuse, the AI is discretionary. If, during the course of an AIB, it appears a criminal act occurred or may have occurred, the AI must be suspended immediately and the matter be referred to VA law enforcement.

(8) The patient's perception of how he/she was treated is seriously considered when determining whether abuse occurred. Even without direct patient input, such as patients with limited or no cognitive ability, abuse can be substantiated.

(9) Administrative investigations will be conducted in accordance with VHA Handbook 1050.01, VHA National Patient Safety Improvement Handbook; ECHCS Policy 00-107, Patient Safety Improvement Program; and VA Directive 0700, Administrative Investigations.

**6. CONCURRENCES:** 11, 001, 001P/118, 07B, 00PS, 05, AFGE (Locals 2241 & 2430), and NNU Local 21.

If there is a conflict between the provisions of this policy and the applicable bargaining unit agreement, the terms of the bargaining unit agreement will prevail.

**7. REFERENCES:**

38 CFR §§ 1, 14, and 17 Referrals of Information Regarding Criminal Investigations

Colorado Revised Statutes (CRS) §§ 19-3-304 and 26-3.1-102 Reporting Requirements

VHA Directive 2012-022 Reporting Cases of Abuse and Neglect

VHA Directive 2012-026 Sexual Assaults and Other Defined Public Safety Incidents in Veterans Health Administration (VHA) Facilities

VHA Directive 2010-014 Assessment and Management of Veterans Who Have Been Victims of Alleged Acute Sexual Assault

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VHA Handbook 1605.1 Privacy and Release of Information

VHA Handbook 0720, Procedures to Arm Department of Veterans Affairs Police

VA Directive 0700, Administrative Investigations

VA Handbook 5021, Employee Management Relations

Accreditation Manual for Hospitals, 2012, The Joint Commission, Provision of Care, Treatment, and Services (PC.01.02.09) and Right and Responsibilities of the Individual (RI.01.06.03).

ECHCS Policy 00-14, Patient Rights and Responsibilities

ECHCS Policy 00-76, Integrated Risk Management Program

ECHCS Policy 00Q-5, Quality Management Program

ECHCS Policy 00-107, Patient Safety Improvement Program

ECHCS Policy 05-12, Disciplinary and Adverse Actions

**8. RESCISSION:** ECHCS Policy 00-78, Patient Abuse, dated June 15, 2009.

**9. REVIEW DATE:** September 2015

This policy will remain in effect until renewed, replaced or rescinded.

  
Lynette A. Roff  
Director, VA Eastern Colorado Health Care System

Attachment: A – Patient Abuse Statement of Understanding

**PATIENT ABUSE STATEMENT OF UNDERSTANDING**

*Do Not Remove from Official Personnel Folder While Employed at Department of Veterans Affairs, Eastern Colorado Health Care System Denver, Colorado.*

This is to certify that I have read and understand the VA policy on Patient Abuse. I understand that abuse, verbal and/or physical, involving VA patients will not be tolerated. I understand that if an allegation of patient abuse is substantiated, I will be subject to appropriate administrative actions, up to and including removal from my position within the health care system.

I also understand that criminal behavior must be reported to the VA Police or the VA Office of Inspector General (OIG) immediately and that substantiated criminal behavior will be referred to the Unites States Attorney or local Prosecutor as appropriate.

Receipt of a copy of ECHCS Policy 00-78, Patient Abuse, is hereby acknowledged.

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date