

Allegation of abuse by a patient against a staff person Sample: Activation checklist

Checklist may be customized to your setting and utilized as a training tool for leaders or written into the policy.

Tasks/Steps

Upon learning from a patient/staff member/other party of an allegation of abuse, rough handling or inappropriate touching/sexual conduct, the staff person shall contact their manager for further direction.

Manager:

- Ensure for the safety of the affected patient, other patients, and staff on the affected unit or in the impacted department
- Notify the attending and other physicians caring for the patient who in turn perform a physical assessment if appropriate
- Implement actions such as placing affected employee(s) on administrative leave pending investigation
- Recommend that the affected employee not be reassigned to another unit/position/location until the conclusion of the investigation

Manager/Leadership:

Investigation:

- Should law enforcement be called in by the patient, the patient's legal representative or the facility, the leadership team will allow them to investigate without any interference
- Determine who will conduct investigation if law enforcement is not involved or has concluded their investigation
- Obtain a list of all the involved parties (including alleged victim, witness, name of attending, family, etc.)
- Obtain patient name, dates of admission/service and diagnosis

Communication:

- Contact risk management
- Ensure that other departments where patient may need care while the investigation is underway are notified of the allegation or abuse
- Notify the patient's legal representative if patient is unable



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Notification

Leadership/Designee:

- Perform additional notifications to physician leadership, legal, marketing, and will provide periodic updates as investigation progresses
- Risk management will support leadership/designee in the investigation; verify the incident/event report is submitted; and ensure that a thorough and credible documentation trail is created

Communication

Leadership/Manager/Designee:

- Diffuse the situation as needed with other staff
- Identify one person to serve as primary contact to the patient and family

Investigation

Leadership/designee:

- interview patient/guest with location/facility manager, and/or security (involve law enforcement early and/or as needed) present.
- interview accused staff member and other identified staff.
- Interview witnesses

Reporting requirements

Risk management/compliance, legal, senior leadership, facility/department leadership and human resources will determine if the incident will require a report to regulatory, licensing and/or law enforcement agencies

As such incidents may warrant CMS or DOH survey, be survey ready



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	Action items to finalize review
	Finalize documentation of the investigation (HR maintains affected employee files; risk management/compliance maintains the patient/guest file.)
	Debrief key unit staff of disposition of impacted employee as per policy as needed.
	Return impacted staff to duty or take progressive steps as needed.
	Closure:
	Upon notification of completion of the case review risk management/compliance will close the case file
	Documentation (interviews and supportive documentation of accused staff) will be maintained by Human Resources and documentation (documents related to patient, witness statements, this document, etc.) will be maintained in risk management/compliance

Post event assessment/debrief

May include the following areas for improvement:

- Staff and leadership could benefit from education on need for urgency with organizational response to allegations of abuse
- Better documentation of dates/times when key leaders were notified
- Development of measurable goals



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