



Training Reps



Date: January 25, 2023

Issue: 23-04

Reporting Requirements for Adult/Child Protective Services

EMS Lieutenant Amanda Wensel, HQ

First responders are in the unique position to enter people's homes during times of crisis. This allows the responder to see conditions of not only the patient, but also the environment. At times, the responder will identify a situation where there is possible abuse, neglect, or self-neglect of an adult or child. As mandated reporters, Adult or Child Protective Services or Law Enforcement must be contacted.

The Maryland Medical Protocol states, "All health care clinicians are obligated by law to report cases of suspected child or vulnerable adult abuse and/or neglect to either the local police or to Adult/Child Protective Services Agencies." Do not initiate the report in front of the patient, parent or caregiver (MD code, family law, 5-704). Under Maryland law, EMS clinicians are protected from liability if they make a report of child/vulnerable adult abuse and neglect in good faith (courts and judicial proceedings article 5-620).

Reporting the suspected abuse/neglect to receiving hospital **does not** satisfy this requirement. Clinicians of any level may make the report to protective services or law enforcement. An EMS officer may be requested for guidance if needed. It is not recommended that information be given to another party for a report to be made as first-hand information is invaluable to investigators. Also, questions cannot be answered if not all information was relayed to another party.

Who is defined as a vulnerable adult? According to the Digest of Criminal Law, a vulnerable adult is an adult who lacks the physical or mental capacity to provide for his or her daily needs.

Examples of a neglected adult may include someone with cognitive impairment whose caregiver is not providing food or water, attending to hygiene needs such as toileting or diaper changes, or access to healthcare. It could also include someone who has mental capacity but is bedbound and basic needs are not being attended to.

Examples of physical abuse may include bruising or wounds in various stages of healing, burns, unusual injuries, or stories inconsistent with the injury pattern. In children under the age of 4, neck injuries, bruising to ears, and torso injuries can be indicative of abuse.

Self-neglect is when a vulnerable adult who is unwilling or unable to conduct necessary self-care. Examples of self-neglect include malnourishment, wearing clothes that are soiled or unsuitable for the weather conditions, living in unsanitary conditions, or not receiving adequate medical care.

Early notification of law enforcement is recommended. This way, an investigation can be initiated before evidence can be moved or destroyed. If a patient is critical and it is impractical to notify law enforcement on the scene, law enforcement should be requested to respond to the receiving hospital.



Training Reps



Adult or Child Protective Services can be contacted by dialing 410-887-8463. The caller will be prompted to choose if the report is concerning a child or adult. A member of the Screening Unit will gather the information. A determination will be made if the case will be accepted. Please note- the caller will not be told if the case is accepted or not. After hours, an answering service will take the call. An on-call social worker will call back and gather the information.

When contacting Adult or Child Protective Services, the following information is required:

- Reporting party's name and contact information
- Patient's name, date of birth, address, and phone number
- What has occurred
- Conditions that would make an adult/child vulnerable (Cognitive impairment, bed-bound, serious health conditions)

Adult and Child Protective services does not immediately respond if the case is accepted. If a situation is emergent, a visit will occur within 24 hours. If the situation is determined not to be emergent, a visit will occur within five (5) business days. In regard to adults, the majority of services are voluntary. If the individual has the ability to make decisions for themselves, Adult Protective Services will not force the individual to accept services and will close the case.

Please note that Adult Protective Services does not have jurisdiction over skilled nursing facilities or assisted living facilities.

What is the role of ICARE in an abuse or neglect case? ICARE will determine if the case was accepted by Adult/Child Protective Services. If the case was accepted, ICARE will provide updates to the case worker. This information will include if the individual has more calls for service. It will also include informing the case worker of transports and discharges from hospitals. If the case was not accepted, ICARE will determine what other resources may be utilized to mitigate the problem. 

