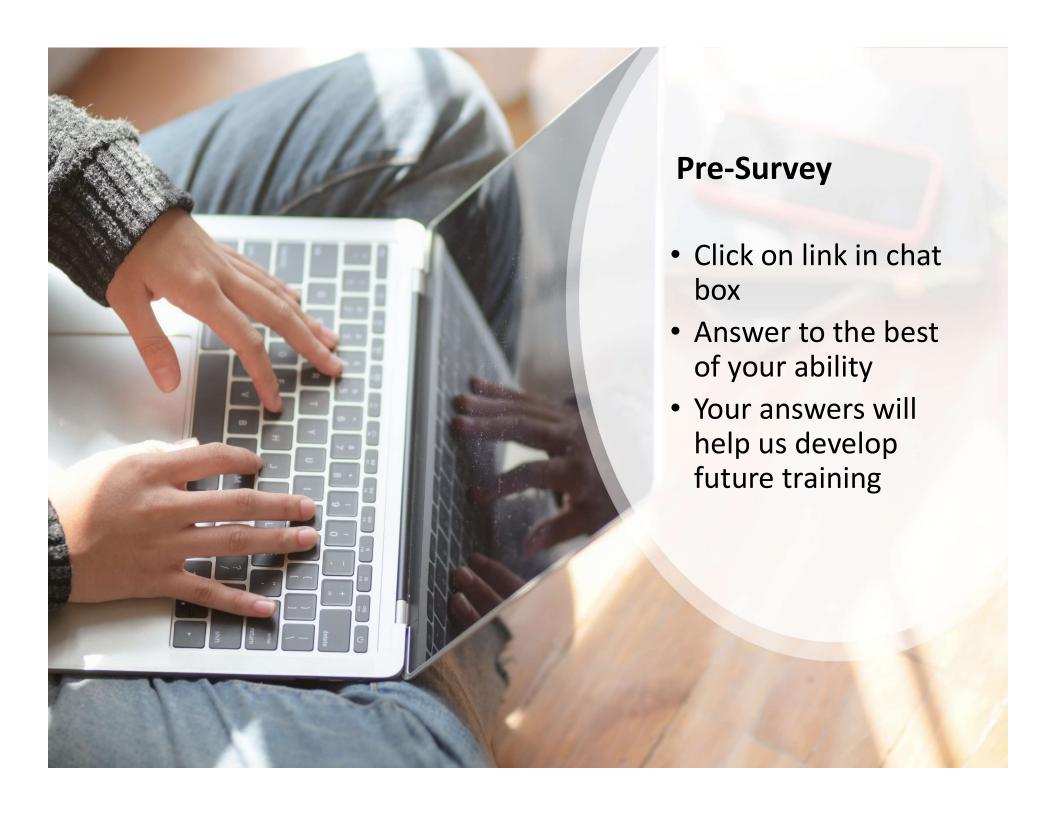
Domestic Violence Medical Reporting Options



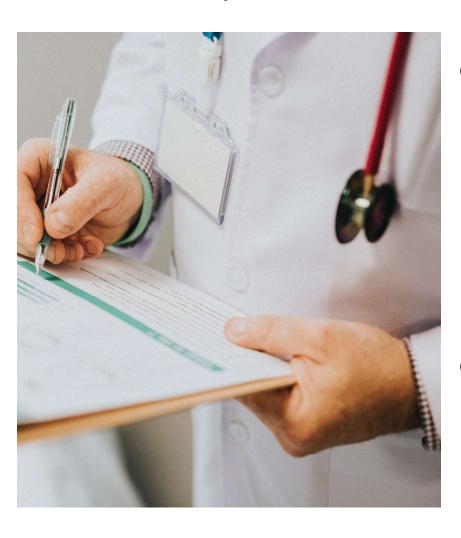


What is domestic violence?

A pattern of coercive behavior, rather than an isolated incident, used by one person to gain power and control over another in an intimate or formerly intimate relationship



Why do we talk about domestic violence with health care providers?

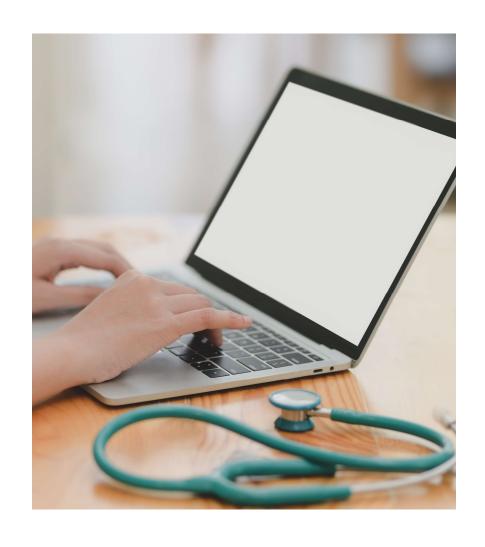


- You're already seeing survivors on a regular basis
- It makes a difference



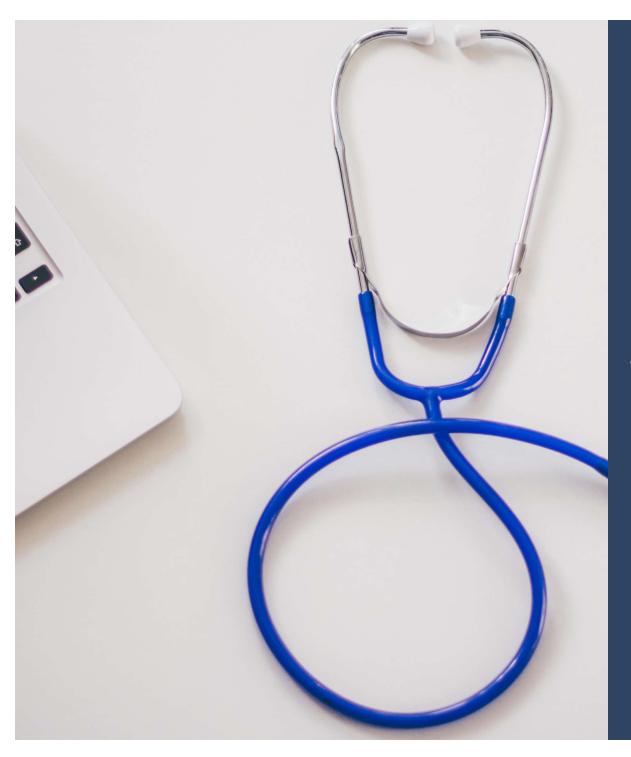
How much does disclosure matter?

Evidenced-based interventions show that it is more important to give all patients information (universal education) about safety resources in your community than it is that the patient discloses to the provider the specifics of their situation





Flashbacks KidneyInfectionsSuicidalBehavior
CirculatoryConditions SleepDisturbances
ChronicPainGastrointestinalDisorders UnintendedPregancy
BladderInfections IrritableBowel SexuallyTransmittedInfections
Anxiety CentralNervousSystemDisorders UnintendedPregnancy
CardiovascularDisease PelvicInflammatoryDisease
AsthmaDepressionGynecologicalDisorders
Fibromyalgia PostTraumaticStressDisorder
JointDisease SexualDysfunction
Headaches



17% of abused women reported that a partner prevented them from accessing health care, compared to **2%** of nonabused women.





Goals of HB17- 1322: Reporting by Licensed Medical Professionals



Allow medical professionals to respect the patient's wishes regarding contacting law enforcement



Provide self autonomy and traumainformed choices for survivors



Restores
professional
discretion for
licensed
medical
professionals
"licensees"



This law does not change...

Mandatory reporting laws about:

- Suspected or known child abuse
- Sexual assault
- Serious bodily injury
- Gunshot wounds
- Vulnerable adult

 (18 years+) or elder
 (70 years+) abuse
- Injuries resulting from other crimes

Who is required to follow this law?

- A licensee is specifically defined in Colorado statute as a physician (MD/DO), physician assistant (PA), anesthesiologist, or anesthesiologist assistant.
- What about nurses and nurse practitioners (NP)?
 - Guidance from HIPAA unless they are acting as a designee for a licensee. HIPAA bends to state law, and HB 1322 outlines reporting requirements. Nurses and NPs should notify the physician they are operating under about adult disclosures of domestic violence and if they are choosing to report it to law enforcement.

Mandatory Reporting for Health Care Providers

- For adults who report experiencing domestic violence, medical providers have discretion about reporting the injuries or experiences of their patient to law enforcement.
- If medical providers choose to make a report, they must confidentially notify the patient beforehand <u>and</u> make a warm referral to a local domestic violence agency.
- If medical providers choose <u>not</u> to make a report, they must make warm referral to a local domestic violence agency.



If you choose to report...

- If you choose to report: You must <u>confidentially</u> notify the survivor of your intention to call law enforcement <u>before</u> you make the report/call.
- Whether there is a report made or not: Licensees or their designee must make a confidential referral to a confidential victims' advocate.



If you choose not to report...

- At the request of the survivor: You can choose to not report to law enforcement, and still have professional and personal immunity.
- If there is a report made or not: Licensees or their designee must make a confidential referral to a confidential victims' advocate.

Documentation

If you are not calling law enforcement:

- What you observed
- What you heard from the patient, specifically their request <u>not</u> to call law enforcement
- Confidential Advocate Referral made

If you are calling law enforcement:

- What you observed only
- Documentation that you <u>confidentially</u> informed the victim you have made the decision to call law enforcement
- Confidential Advocate Referral made

Required Referral

- If there is a law enforcement report made or not: You must make a confidential referral to a confidential victim advocate.
- Best practice is to allow/encourage the person to call confidential advocate from the privacy of the office/ER.
- While the referral is only mandated for domestic violence survivors, you may also want to also refer sex assault victims to the local program for free counseling and advocacy support.
- Medical licensee has no liability attached to the services rendered by the confidential advocate.

What does an advocate do?

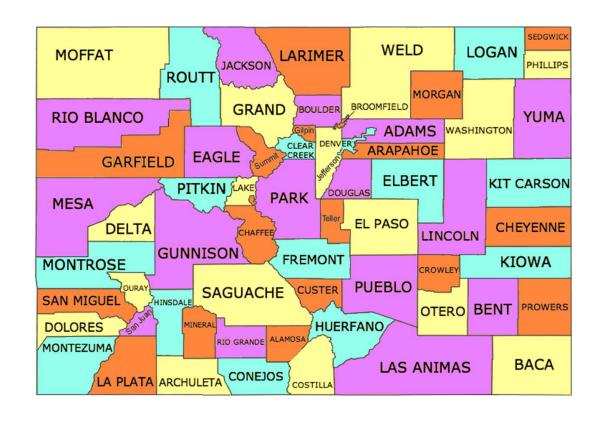
- Confidentiality above most other social service professionals
- Safety planning
- Connecting with resources
- Emergency shelter
- 24-hour hotline



Refer

National Domestic Violence Hotline:

(800) 799-SAFE (7233)



Find a local program: violencefreecolorado.org

Things to consider when deciding if you want to make a report...

- Evidence-based best practice is to let the survivor/patient choose if there is a report made
- Survivors know what is best for them
- Abusers can react strongly to law enforcement involvement

Review

- At the request of the survivor:
 Licensees can choose to not report to law enforcement, and still have professional and personal immunity
- If you choose to report: You must confidentially notify the survivor of your intention to call law enforcement before you make the report/call

What do survivors need from you?

1. Safe and nonjudgmental listening

2. Resources



Tips

- Don't set yourself up to fail by saying "I'm sorry, I
 have to ask this" or framing negatively "I know
 this doesn't apply to you..."
- Talk to the person alone, if possible
- Don't focus on disclosure, the goal is for <u>you</u> to share information, not get information from them
- Have a plan for dealing with difficult disclosures, who do you talk to? How do you cope?
- Watch for judgmental behavior and body language

Use supportive language

Victim Blaming

- "What did you do to make your partner so mad?"
- What could you have done to stop your partner from hitting you?"
- "Why didn't you just leave?"
- "Why do you put up with the violence?"
- "If you are concerned about your children, you shouldn't return to your partner."

Supportive

- "The abuse is not your fault."
- "It sounds like sometimes your partner's behavior escalates."
- "I know there are many reasons why leaving isn't an option."
- "There isn't one right answer or one right thing to do in this situation."
- "Let's talk about how to increase your and your children's safety if you return to your partner."



 "Thank you so much for trusting me with your story."

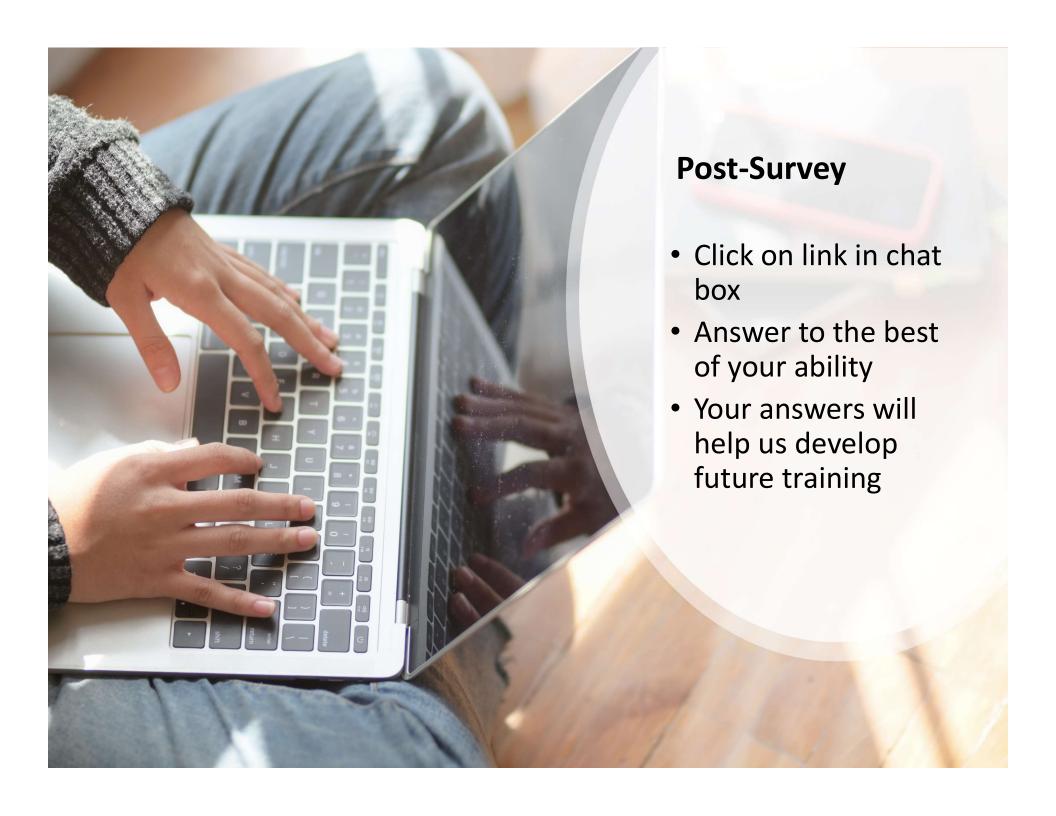
"What can I do to support you?"

"I believe you."



Use Supportive Language

"I know feeling safe again can be complicated and we will not be able to solve everything for you today, but can we call a program together? We can get you connected with professionals that can help navigate the next steps. We can call together. All of their services are free and confidential."



Review

- If you're a medical licensee and an adult patient discloses that they have experienced domestic violence, you must do these things:
 - Make a warm referral to a confidential advocate
 - Document the information
 - Decide if you are going to report to law enforcement
 - If you are going to report to law enforcement you must notify the patient confidentiality of your intentions before the report is made



Questions?

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