Child Abuse, Elder/Dependent Adult, Firearm and Assaultive Conduct Injuries Reporting Obligations

Employee Acknowledgment

We are required by law to obtain signed statements from employees acknowledging their awareness and understanding of the responsibility to report child abuse. We are also required to ensure that incidents of elder abuse and dependent adult abuse, and injuries arising from firearms or other forms of assaultive or abusive conduct are reported to appropriate authorities. This acknowledgment form sets forth your reporting obligations. Also, please refer to Queen of the Valley Policy Abuse: Child, Domestic, Elder/Dependent Adult, Sexual #126, which describes Queen of the Valley Medical Center policy for complying with these reporting obligations.

I. Child Abuse

Section 11166 of the Penal Code requires any child care custodian, health practitioner, or employee of a child protective agency who has knowledge of or who observes a child in his/her professional capacity or within the scope of his/her employment whom he/she knows or reasonably suspects has been the victim of child abuse to report the known or suspected instance of child abuse to a child protective agency immediately or as soon as practically possible by telephone and to prepare and send a written report thereof within 36 hours of receiving the information concerning the incident.

"Child care custodian" includes teachers, an instructional aide, or a teacher's assistant employed by any public or private school, who has been trained in the duties imposed by Penal Code section 11166, if the school district has so warranted to the State Department of Education; administrative officers, supervisors of child welfare and attendance, or certified pupil personnel employees of any public or private school; administrators of a public or private day camp; licensed day care facilities; head start teachers; licensing workers or licensing evaluators; public assistance workers; employees of a child care institution including, but not limited to, foster parents, group home personnel, and personnel of residential care facilities; and social workers or probation officers; or any person who is an administrator or presenter of, or counselor in, a child abuse prevention program in any public or private school, a district attorney investigator, inspector or family support officer, or a peace officer.
"Health practitioner" includes Physicians and Surgeons, Psychiatrists, Psychologists, Dentists, Residents, Interns, Podiatrists, Chiropractors, Registered Nurses, Licensed Vocational Nurses, Dental Hygienists, Optometrists or any other person who is currently licensed under Division 2 (commencing with section 500) of the Business and Professions Code (which professions include Clinical Laboratory Technologists, Speech Pathologists and Audiologists, Dispensing Opticians, Occupational Therapists, Dietitians, Physical Therapists, Physician Assistants, Respiratory Therapists, Pharmacists, Psychiatric Technicians and Licensed Social Workers, Marriage, Family and Child Counselors, Emergency Medical Technicians I or II, Paramedics, or other persons certified pursuant to Division 2.5 (commencing with section 1797) of the Health and Safety Code; Psychological Assistants registered pursuant to section 2913 of the Business and Professions Code, unlicensed (or trainee) Marriage, Family and Child Counselor Interns registered under section 4980.44 of the Business and Professions Code, state or county public health employees who treat minors for venereal disease or any other condition or who treat elders or dependent adults for any condition; Coroners, Paramedics, and Religious Practitioners who diagnose, examine, or treat children, elders or dependent adults.

II. Elder/Dependent Adult Abuse

Section 15630 of the Welfare and Institutions Code requires that any elder or dependent adult care custodian, employee of a county adult protective services agency or local law enforcement agency, or any health practitioner (as defined above), who in his/her professional capacity or within the scope of his/her employment has either:

1. Observed an incident that reasonably appears to be physical abuse,
2. Observed a physical injury where the nature of the injury, its location on the body, or the repetition of the injury, clearly indicates that physical abuse has occurred, or
3. Is told by an elder or dependent adult that he or she has experienced behavior constituting physical abuse,

shall report the known or suspected instance of physical abuse either to the long-term care ombudsman coordinator or to a local law enforcement agency when the physical abuse is alleged to have occurred in a long term care facility, or to either the county adult protective services agency or to a local law enforcement agency when the physical abuse is alleged to have occurred anywhere else, immediately as soon as possible by telephone, and shall prepare and send a written report thereof within two working days.

III. Reporting Firearm Injuries and Injuries Arising From Assultive or Abusive Conduct

Section 11160 of the Penal Code requires a health practitioner who, in his/her professional capacity or within the scope of his/her employment, provides medical
services to a patient for a physical condition or injury that he/she knows or reasonably suspects arises from:

1. A firearm (whether the condition or injury is self-inflected or inflicted by another), or
2. Assaultive or abusive conduct (see below for examples of such conduct), shall report the incident to a local law enforcement agency immediately or as soon as practically possible by telephone and shall prepare and send a written report thereof within two working days of receiving the information concerning the incident.

Assaultive or abusive conduct includes any of the following offenses:

2. Manslaughter, in violation of Penal Code Section 192 or 192.5.
5. Torture, in violation of Penal Code Section 206.
6. Assault with intent to commit mayhem, rape, sodomy, or oral copulation in violation of Penal Code Section 220.
7. Administering controlled substances or anesthetic to aid in commission of a felony, in violation of Penal Code Section 222.
11. Throwing any vitriol, corrosive acid, or caustic chemical with intent to injure or disfigure, in violation of Penal Code Section 244.
12. Assault with a stun gun or taser, in violation of Penal Code Section 244.5.
13. Assault with a deadly weapon, firearm, assault weapon, or machine gun, or by means likely to produce great bodily injury, in violation of Penal Code Section 245.
15. Spousal rape, in violation of Penal Code Section 262.
16. Procuring any female to have sex with another man, in violation of Penal Code Section 266, 266a, 266b, 266c.
17. Child abuse or endangerment, in violation of Penal Code Section 273a or 273d.
21. Abuse of spouse or cohabitant, in violation of Penal Code Section 273.5.

22. Sodomy, in violation of Penal Code Section 286.

23. Lewd and lascivious acts with a child, in violation of Penal Code Section 288.


25. Genital or anal penetration by a foreign object, in violation of Penal Code Section 289 or 289.5. Elder abuse, in violation of Penal Code Section 368.

26. An attempt to commit any crime specified in paragraphs (1) to (23), inclusive.

Note that assaultive and abusive conduct includes conduct that is separately reportable under Section I (child abuse) and Section II (elder/dependent adult abuse). However, injuries arising from other forms of abusive conduct (sexual abuses, spousal/cohabitant abuse) is reportable as assaultive/abusive conduct under this Section, even though there are no specific statutes dealing exclusively with such conduct.

IV. Acknowledgment

Queen of the Valley Medical Center shall retain this signed statement, and the cost of printing, distribution and filing of this statement shall be borne by Queen of the Valley Medical Center.

I have read and understand the above statement and will comply with the Abuse Reporting requirements of California Penal Code Sections 11160 and 11166, and Welfare & Institutions Code Section 15630.