

At-Risk Adults Mandated Reporter's Resource Guide



Georgia Law

Georgia law requires the reporting of abuse, neglect and exploitation (A/N/E) of at-risk adults (elder persons and adults with disabilities) by mandated reporters. The legal definitions of A/N/E can be found in O.C.G.A. § 16-5-100. Requirements for mandatory reporters can be found in O.C.G.A. § 30-5-4 (for individuals living in the community) and O.C.G.A. § 31-8-82 (for individuals living in a long-term care facility).

You can access the Official Code of Georgia Annotated at:

<http://www.lexisnexis.com/hottopics/gacode/>

Mandated Reporters

Mandatory reporters play a key role in protecting elder persons and adults with disabilities. The list of mandatory reporters is as follows:

- Physicians licensed to practice medicine, interns, or residents
- Hospital or Medical Personnel
- Dentists
- Licensed Psychologists and Persons Participating in Internships to Obtain Licensing
- Podiatrists
- Registered Professional Nurses or Licensed Practical Nurses or Nurse's Aides
- Professional Counselors, Social Workers, or Marriage and Family Therapists
- School Teachers
- School Administrators
- School Guidance Counselors, Visiting Teachers, School Social Workers, or School Psychologists
- Child Welfare Agency Personnel
- Child-Counseling Personnel
- Child Service Organization Personnel
- Law Enforcement Personnel
- Reproductive Health Care Facility or Pregnancy Resource Center Personnel and Volunteers
- Physical Therapists/Occupational Therapists
- Day-Care personnel
- Coroners/ Medical Examiners
- EMS Personnel/EMT/Paramedics, Cardiac Techs or First Responder
- Employees of a Public or Private Agency Engaged in Professional Health Related Services (to this population)
- Clergy Members
- Any Employee of a Financial Institution

Responsibility of Mandatory Reporters

Mandated reporters are required to report abuse, neglect, and exploitation when they have a reasonable cause to believe.

Reasonable cause to believe means you have knowledge of facts that do not have to amount to direct knowledge but would cause a reasonable person, knowing the same facts, to reasonably conclude the same thing. A report of suspected abuse, neglect and exploitation of an at-risk adult is a request for an investigation and not an accusation. The person reporting does not have to be absolutely certain that abuse, neglect or exploitation has occurred.

Reporting Obligations

When the potential victim lives in the community:

- Mandated reporters are required to report to Adult Protective Services (APS) **AND** an appropriate law enforcement agency or prosecuting attorney.
- The report can be made by oral or written communication.
- The report shall include the name, address, and age of the at-risk adult, the name and address of their caretaker, the nature and extent of the injury or condition resulting from abuse, exploitation, or neglect, and other pertinent information. If you do not have all of this information, you should still report with what you have.

When the potential victim lives in a long-term care facility:

- Mandated reporters are required to report to Healthcare Facility Regulation (HFR) **AND** an appropriate law enforcement agency or prosecuting attorney.
- The report can be made by telephone or in person. A written report should be provided to HFR within 24 hours of making the initial report.
- The report should include the name and address of the person making the report, the name and address of the resident or former resident, the name and address of the long-term care facility, the nature and extent of any injuries or the condition resulting from the suspected abuse or exploitation, the suspected cause of the abuse or exploitation and any other information which the reporter believes might be helpful in determining the cause of the resident's injuries or condition and in determining the identity of the person

or persons responsible. If you do not have all of this information, you should still report with what you have.

Contact Information

Adult Protective Services (APS)

- Call: 1-866-552-4464; Follow Prompts
- Online: www.aging.ga.gov
 - Go to: “Report Elder Abuse”
- Fax: 770-408-3001

Healthcare Facility Regulation (HFR)

- Call: 1-800-878-6442
- Online: www.dch.georgia.gov
 - Go to: “Healthcare Facility Regulation”
 - Go to: “File A Complaint”

Immunity

Mandated reporters are immune from any civil or criminal liability on account of their report or testimony or participation unless that person acted in bad faith, with a malicious purpose or was a party to such crime or fraud.

What If I Don't Report

It is unlawful for any person or official required to report abuse, neglect, and exploitation to fail knowingly and willfully to make such a report. Any person violating the provisions of this code section shall be guilty of a misdemeanor.

Notice: Even though every effort has been made to ensure the information presented in this document is correct and current, the material should be used only for general guidance. This is not a legal document, nor is it intended to fully explain all of the provisions or exclusions of relevant laws.

Definitions

The definitions provided below are those found in the Official Code of Georgia Annotated (O.C.G.A.).

Abuse: The willful infliction of physical pain, physical injury, sexual abuse, mental anguish, unreasonable confinement, or willful deprivation of essential services.

Alzheimer's Disease: means a progressive, degenerative disease or condition that attacks the brain and results in impaired memory, thinking, and behavior.

Caretaker: A person who has the responsibility for the care of a disabled adult or elder person as a result of family relationship, contract, voluntary assumption of responsibility or by operation of law.

Dementia: (A) An irreversible global loss of cognitive function causing evident intellectual impairment which always includes memory loss, without alteration of state of consciousness, as diagnosed by a physician, and is severe enough to interfere with work or social activities, or both, and to require at least intermittent care or supervision; or (B) The comatose state of an adult resulting from any head injury.

Disabled Adult: A person 18 years of age or older who is mentally or physically incapacitated or has Alzheimer's disease or dementia. *The law uses the term disabled adult but adults with disabilities is used in this publication to encourage the use of person-first language.*

Elder Person: A person 65 years of age or older.

Essential Services: Social, medical, psychiatric, or legal services necessary to safeguard a disabled adult's, elder person's, or resident's rights and resources and to maintain the physical and mental well-being of such person. Such services may include, but not be limited to, the provision of medical care for physical and mental health needs, assistance in personal hygiene, food, clothing, adequately heated and ventilated shelter, and protection from health and safety hazards.

Exploit: Illegally or improperly using a disabled adult or elder person or that person's resources through undue influence, coercion, harassment, duress, deception, false representation, false pretense, or other similar means for one's own or another person's profit or advantage.

Long-Term Care Facility: Any skilled nursing facility, intermediate care home, assisted living community, community living arrangement, or personal care home subject to regulation and licensure by the Department of Community Health.

Neglect: Willful deprivation of a disabled adult, elder person, or resident of health care, shelter, or necessary sustenance to the extent that the health or well-being of such person is jeopardized.

Resident: Any person who is receiving treatment or care in any long-term care facility.

Sexual Abuse: The coercion for the purpose of self-gratification by a guardian or other person supervising the welfare or having immediate charge, control, or custody of a disabled adult, elder person, or resident to engage in any of the following conduct: (A) Lewd exhibition of the genitals or pubic area of any person; (B) Flagellation or torture by or upon a person who is unclothed or partially unclothed; (C) Condition of being fettered, bound, or otherwise physically restrained on the part of a person who is unclothed or partially clothed unless physical restraint is medically indicated; (D) Physical contact in an act of sexual stimulation or gratification with any person's unclothed genitals, pubic area, or buttocks or with a female's nude breasts; (E) Defecation or urination for the purpose of sexual stimulation of the viewer; or (F) Penetration of the vagina or rectum by any object except when done as part of a recognized medical or nursing procedure.

Indicators of Possible A/N/E

Type	Signs/Symptoms
Abuse	<ul style="list-style-type: none"> • Bruises, black eyes, welts, lacerations, and rope marks • Bone fractures, broken bones, and skull fractures • Open wounds, cuts, punctures, untreated injuries in various stages of healing • Sprains, dislocations, and internal injuries/bleeding • Broken eyeglasses/frames, physical signs of being subjected to punishment, and signs of being restrained • Laboratory findings of medication overdose or underutilization of prescribed drugs • An at-risk adult's report • An at-risk adult's sudden change in behavior • The caregiver's refusal to allow visitors to see an at-risk adult alone
Sexual Abuse	<ul style="list-style-type: none"> • Bruises around the breasts or genital area • Unexplained venereal disease or genital infections • Unexplained vaginal or anal bleeding • Torn, stained, or bloody underclothing and • An at-risk adult's report
Neglect	<ul style="list-style-type: none"> • Dehydration, malnutrition, untreated bed sores, and poor personal hygiene • Unattended or untreated health problems • Hazardous or unsafe living condition/arrangements (e.g., improper wiring, no heat, or no running water) • Unsanitary and unclean living conditions (e.g. dirt, fleas, lice on person, soiled bedding, fecal/urine smell, inadequate clothing) • An at-risk adult's report
Exploitation	<ul style="list-style-type: none"> • Sudden changes in bank account or banking practice • The inclusion of additional names on an at-risk adult's bank signature card • Unauthorized withdrawal of the at-risk adult's funds using the at-risk adult's ATM card • Abrupt changes in a will or other financial documents • Unexplained disappearance of funds or valuable possessions • Substandard care being provided or bills unpaid despite the availability of adequate financial resources • Discovery of an at-risk adult's signature being forged for financial transactions or for the titles of his/her possessions • Sudden appearance of previously uninvolved relatives claiming their rights to an at-risk adult's affairs and possessions • Unexplained sudden transfer of assets to a family member or someone outside the family • The provision of services that are not necessary and • An at-risk adult's report

What Happens after a Report is made to APS

