

Policy	Patient Care		
Section			
#	PC 102	Date 8/2023	
	Human Trafficking, Abuse/Neglect		
Title	Victims:		
	Child, Domest	tic, Elder	
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Purpose

Offering immediate and adequate information regarding services available to victims of human trafficking, abuse or neglect, or for any person suspected to be a victim of domestic abuse.

Policy

- 1) Human Trafficking
 - a. North Region EMS Providers shall report suspected cases of human trafficking to the appropriate authorities promptly. EMS personnel are required to be vigilant in recognizing potential signs of human trafficking and are expected to report such cases following the guidelines outlined in this policy.
 - b. Recognizing Signs of Human Trafficking:
 - i. Potential signs of human trafficking, which may include but are not limited to:
 - 1. Unexplained injuries or physical abuse
 - 2. Visible signs of malnutrition or neglect
 - 3. Evidence of control or domination by others
 - 4. Fear, anxiety, or reluctance to speak
 - 5. Inability to provide identification or travel documents
 - 6. Inconsistencies in the victim's story
 - c. Reporting Procedure:
 - i. If EMS personnel suspect that a patient is a victim of human trafficking, they should ensure the immediate safety and medical needs of the patient are addressed.
 - ii. Once the patient's condition is stable and appropriate medical care has been provided, EMS personnel should document any relevant information related to the suspected human trafficking case, such as observations, statements made by the patient, or any other pertinent details in the patient's care report.
 - iii. EMS personnel should promptly notify the following to inform of the suspected human trafficking case:
 - If transported: The receiving facilities Emergency Department Charge Nurse
 - 2. Local Law Enforcement
 - 3. The National Human Trafficking Hotline (1-888-373-7888)
 - 4. North Region EMS System Coordinator or Medical Director
 - 5. The EMS Providers immediate supervisor



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2) Child Abuse & Neglect

- a. The following should raise the suspicion of child abuse and indicate need for more investigation:
 - i. Discrepancy between history and physical exam
 - ii. Prolonged interval between injury and seeking medical care
 - iii. History/suspicion of repeated trauma
 - iv. Parent/guardian respond inappropriately or do not comply with or refuse assessment, treatment or transport of child
 - v. Apathetic child, e.g., does not seek comfort from parent/guardian
 - vi. Poor nutritional status
 - vii. Environment that puts the child in potential risk
 - viii. Perioral and perianal injuries
 - ix. Long bone fracture under three (3) years of age
 - x. Multiple soft tissue injuries
 - xi. Frequent injuries old scars, multiple bruises and abrasions in varying stages of healing
 - xii. Injuries such as bites, cigarette burns, rope marks
 - xiii. Trauma to genital or perianal areas
 - xiv. Sharply demarcated burns in unusual areas
- b. Illinois law (Abused and Neglected Child Reporting Act 325 ILCS 5/4) designates EMS personnel as mandated reporters of suspected child abuse or neglect. "Mandated reporters are required to report suspected child abuse or neglect immediately when they have "reasonable cause to believe" that a child known to them in their professional or official capacity may be an abused or neglected child."
 - Emergent reports should be made immediately by telephone to the DCFS Hotline (800-25-ABUSE, 800-252-2873). Telephone reports must be confirmed in writing using the DCFS CANTS 4 form via the U.S. Mail, postage prepaid, within 48 hours of the initial report.
 - ii. Non-emergent reports can be reported using the Online Reporting System available at https://www2.illinois.gov/dcfs/safekids/reporting/Pages/index.aspx.
 - iii. EMS personnel shall also report their observations and suspicion to the emergency department physician and/or charge nurse and document findings on patient care report.
- c. Treat patient per SOP.



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- d. If parent/guardian refuses to let you treat and/or transport the child, remain at the scene. Contact OLMC/Resource Hospital and request law enforcement assistance.
- e. A law enforcement officer, physician or a designated Department of Children and Family Services (DCFS) employee may take or retain temporary protective custody of the child.
- f. Any person acting in good faith in the removal of a child shall be granted immunity from any liability as a result of such removal.

3) Domestic

- a. EMS personnel who suspect a patient is the victim of domestic abuse are required by law to provide immediate and adequate information regarding services available to victims of abuse.
- b. All licensed EMS vehicles will carry information to provide domestic abuse victims information regarding services available.
- c. EMS personnel shall make every reasonable effort to transport the patient. If transport is refused, request law enforcement assistance if indicated.
- d. Report your suspicions to the emergency department physician and/or charge nurse.

4) Elder/Disabled Persons

- a. EMS personnel who suspect an elderly or disabled adult patient may be abused or neglected shall report the circumstances to the appropriate authority upon completion of patient care in compliance with the Adult Protective Services Act.
 - i. Who/what must be reported: According to the Adult Protective Services Act, any abuse, neglect or financial exploitation of a person 60 years of age or older, or 18-59 living with a disability, must be reported when it is determined, or unable to be determine, that the individual is unable to self-report. Self neglect is included, however is not listed for mandatory reporting.
 - If a provider is in doubt to the ability of the person to self-report, suspected abuse, neglect or financial exploitation must be reported.
- b. Elder/Disabled Persons Abuse/Neglect Notification:



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- i. 1-866-800-1409 for 24-hour Adult Protective Services Hotline (For elders/disabled persons not in a nursing home/long term care center: IL Dept of Aging, Adult Protective Services)
- In Lake County, Catholic Charities of the Archdiocese of Chicago manages Adult Protective Services cases and can be contacted directly at 1-847-546-5733.
- iii. 1-800-252-4343 (For elders/disabled persons residing in nursing homes/long term care centers: IDPH Nursing Home Hotline)
- c. Report your suspicions to the emergency department physician and/or charge nurse upon arrival.
- d. Carefully document history and physical exam findings as well as environmental and circumstantial data on the patient care report.
- 5) If there is reason to believe the elderly/disabled patient has been abused/neglected/financially exploited, EMS personnel shall make every reasonable effort to transport the patient. If transport is refused, request law enforcement assistance if indicated.
- 6) Providers fulfilling their mandated reporter requirements in good faith are protected from any civil or criminal liability by Illinois law.

References

http://www.ilga.gov/legislation/ilcs/documents/075000600K401.htm

http://www.ilga.gov/legislation/ilcs/documents/021000500K3.230.htm

https://www.illinois.gov/aging/ProtectionAdvocacy/Pages/abuse reporting.aspx

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