

# Policy Statement

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## Domestic Family Violence

Revised April 2019

Reaffirmed June 2013

Originally approved October 2007, replacing rescinded policies *Child Abuse; Domestic Violence; Emergency Medicine and Domestic Violence; Management of Elder Abuse and Neglect; Support for Victims of Family Violence; Mandatory Reporting of Domestic Violence to Law Enforcement and Criminal Justice Agencies*

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## Domestic Family Violence

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The American College of Emergency Physicians (ACEP) encourages emergency personnel to assess all patients for family violence in all its forms, including that directed toward children, elders, intimate partners, and other family members. Such patients should be appropriately referred for help and detailed evaluation. Identification and assessment can be difficult because violence and maltreatment can encompass abuse in many different forms, including neglect, physical abuse, sexual abuse, emotional abuse, financial exploitation, and intimidation.

ACEP opposes mandatory reporting of domestic violence to the criminal justice system. Instead, ACEP encourages partnering with and reporting of domestic violence to local social services, victims' services, the criminal justice system, or any other appropriate resource agency to provide confidential counseling and assistance, in accordance with the patient's wishes. Safety planning should be an important component of any screening process. In jurisdictions that have mandatory reporting requirements, persons reporting in good faith should be immune from liability for compliance.

ACEP recommends that

- emergency personnel assess patients for intimate partner violence, child and elder maltreatment, and neglect;

- emergency physicians, nurse practitioners, and physician assistants be familiar with signs and symptoms of intimate partner violence, child and elder maltreatment, and neglect;
- emergency medical services, medical schools, and emergency medicine residency curricula include education and training in recognition, assessment, and interventions in intimate partner violence, child and elder maltreatment, and neglect;
- hospitals and emergency departments (EDs) encourage research in regard to the epidemiology of intimate partner violence, child and elder maltreatment, and neglect, as well as best practice approaches to screening, assessment, and intervention for victims;
- hospitals and EDs be encouraged to participate in collaborative interdisciplinary approaches for the screening, assessment, safety planning, and intervention for victims of intimate partner violence, child and elder maltreatment, and neglect; these approaches include the development of policies, protocols, and relationships with outside agencies that oversee the management and investigation of family violence; and that
- hospitals and EDs maintain appropriate education in regard to state legal requirements for reporting intimate partner violence and child and elder maltreatment.

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