

DIVISION SCOPE OF SERVICE

Division: MIDAMERICA

Classification: DOMESTIC VIOLENCE PATIENT ADVOCATE

Applicant Name:

Domestic Violence Patient Advocate:

The Domestic Violence Patient Advocate must have equivalent qualifications and competence as employed individuals performing the same or similar services at the facility.

Definition of Care or Service:

The Domestic Violence Patient Advocate will be provided to the hospital for any patient who screens positive for domestic violence after being assessed by a healthcare provider or, any employee of the healthcare agency requesting advocacy for personal reasons or, any person who walks in to the hospital seeking to speak to a domestic violence advocate. Scope of Service may include:

- Knowledge of counseling and advocacy techniques for people who have been victims of domestic violence, including crisis intervention and case management skills
- Educate clients about dynamics of domestic violence and sexual assault and options/resources available.
- Demonstrates Clinical and Service excellence behaviors to include code of HCA Healthcare conduct core fundamentals in daily interactions with patients, families, co-workers and physicians.

Setting(s):

- Healthcare facilities including but not limited to hospitals, outpatient treatment facilities, imaging centers, and physician practices
- Patient care areas, all settings

Supervision:

• Indirect supervision by the nursing department director or designee

Evaluator: Nursing Department Director or designee

Tier Level: 2

eSAF Access Required: No

Qualifications:

• High School Diploma or higher

NOTE: Where education may not be defined in qualifications area of the Scope, HCA Healthcare requires the highest level of education completed (not training or courses) confirmed on your background check.

Experience:

• N/A

Competencies:

The Patient Advocate will complete the following prior to independent advocacy services are provided: They will go through the following training:

- A general domestic violence awareness training
- Hospital specific advocacy services training
- Shadow hotline for a minimum of 4 hours
- Shadow for a minimum of 3 individual advocacy calls and demonstrate ability to perform domestic violence advocacy independently.

The patient Advocate will provide the following services:



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- After healthcare provider makes a request for services indicating that a patient needs to speak to an advocate or; a hospital employee may request to speak to an advocate or; any victim of domestic violence may walk into the hospital and request to speak to a domestic violence advocate, even if medical attention is not needed. In the latter case, a security officer will provide this individual with a safe and confidential location and request a domestic violence advocate come to the hospital.
- An advocate will arrive at the hospital within 30 minutes and identify themselves to the referring healthcare provider, security officer or employee.
- The advocate will inquire of referring healthcare provider if there are visitors in the patients' room prior to entering, to ensure a safe and confidential meeting between patient and advocate. The advocate does not meet with abusers or perpetrators.
- The advocate will read and explain the *Consent to Receive Services* form to the client. Advocate will obtain written signed consent from patient, walk- in client, or staff before providing advocacy.
- The advocate will provide support, safety assessment, extensive safety planning, domestic violence resource information and assistance accessing domestic violence services.
- The advocate will check in with the referring healthcare provider when they have finished advocacy services and report that safety planning and domestic violence services were discussed and what the patient's plan is at discharge, if known.
- The advocates report cases of child abuse, adult abuse, and domestic violence when required to do so by law. The advocate will inform the client of any such reporting requirements prior to client signing the *Consent to Receive Services* form.
- The advocate will obtain written consent from the client before providing the client services such as safe shelter or a follow up call within 72 hours.

Limitations of services:

- Hotline does not obtain patient's name or healthcare status, only the name and call back number of referring individual and the department and room number of client, if available.
- The advocate does not enter a patient's room without meeting with the referring individual first to get a verbal confirmation that the client desires advocacy services.
- The advocate does not have access to client's chart nor health records and healthcare information.
- The advocate does not provide mental health, drug and alcohol, or medical assessments of the client.
- The advocate does not meet with the abuser.
- The advocate does not discuss client's situation with the client's family, friends or coworkers. This is for the safety and confidentiality of the client.
- For client safety purposes, the advocate keeps all information provided to the advocate completely confidential.
- The advocate does not make notes on patient charts.
- The advocate does call police unless the client requests the police.
- The advocate does not remove children from the client.
- The advocate does not contact Immigration Customs and Enforcement (ICE) for undocumented clients.
- The advocate does not coerce or force the client to do anything he/she does not want to do, including but not limited to, meeting with the advocate.
- The advocate does not provide medical or healthcare advice to the client.

The Patient Advocate will demonstrate:

- Accurate patient information review and evaluation
 - Uses at least two ways to identify patients before providing services
- Maintains a safe environment
- Infection Prevention



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- Practices consistent hand hygiene
- Uses personal protective equipment (PPE) when required
- Required immunizations per Division requirements
- Complies with Isolation precautions
- Maintains sterile field

Document Control:

- Cosmetic Update 12/29/2016
- Content update 3/6/2020

Your signature confirms you will be able to comply with the Qualifications and Competencies listed within this Scope of Service and that you will confirm education via your background check.

Applicant Printed Name:	
Signature:	
Date:	