

Mandatory Reporting Requirements: The Elderly New Jersey

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Question	Answer
Who is required to report?	<ul style="list-style-type: none"> • <u>For an Institutionalized Elderly Person</u>: Any of the following, as a result of information obtained in the course of his or her employment: <ul style="list-style-type: none"> • Caretaker; • Social worker; • Physician; • Registered or licensed practical nurse; • Other professional or staff member employed at a facility; and • Any representative of a managed care entity. • <u>For a Resident of a Residential Health Care Facility, Rooming House or Boarding House</u>: <ul style="list-style-type: none"> • Any person. • <u>For a Vulnerable Adult</u>, any of the following: <ul style="list-style-type: none"> • Health care professional; • Law enforcement officer; • Firefighter; or • Paramedic or emergency medical technician. • Additionally, any other person who has reasonable cause to believe that a vulnerable adult is the subject of abuse, neglect or exploitation may so report.
When is a report required and where does it go?	<p>When is a report required?</p> <ul style="list-style-type: none"> • <u>For an Institutionalized Elderly Person</u>: Reasonable cause to suspect or believe an institutionalized elderly person is being or has been the victim of a crime (e.g., abused or exploited). • <u>For a Resident of a Residential Health Care Facility, Rooming House or Boarding House</u>: Reasonable cause to suspect that a resident of a residential health care facility, rooming house, or boarding house is suffering or has suffered abuse or exploitation. • <u>For a Vulnerable Adult</u>: Reasonable cause to believe that a vulnerable adult is the subject of abuse, neglect or exploitation. <p>Where does it go?</p> <ul style="list-style-type: none"> • <u>For an Institutionalized Elderly Person</u>: New Jersey Long-Term Care Ombudsman (1-877-582-6995). Complaints may also be made to the Office of the Ombudsman via email at ombudsman@ltco.nj.gov, via fax (1-609-943-3479), or by submitting an online complaint via https://www.nj.gov/ooie/contact/contact-complaint.shtml. If an individual reporting suspected abuse or exploitation has reasonable cause to suspect or believe that the institutionalized elderly person is or has

	<p>been the victim of a crime, the individual shall additionally report such information to the local law enforcement agency and to the health administrator of the facility.</p> <ul style="list-style-type: none"> • <u>For a Resident of a Residential Health Care Facility, Rooming House or Boarding House:</u> Commissioner of the Department of Human Services (1-609-292-3717) or Adult Protective Services (609-588-6501). • <u>For a Vulnerable Adult:</u> The relevant county adult protective services office. Contact information for each county may be found on the Department of Human Services, Division of Aging Services' list of Adult Protective Service Offices available at: https://nj.gov/humanservices/doas/services/a-k/aps/offices.shtml.
<p>What definitions are important to know?</p>	<ul style="list-style-type: none"> • “Abuse” means the willful infliction of physical pain, injury or mental anguish; unreasonable confinement; or, the willful deprivation of services which are necessary to maintain a person’s physical and mental health. • “Caretaker” means a person who has assumed the responsibility for the care of a vulnerable adult as a result of family relationship or who has assumed responsibility for the care of a vulnerable adult voluntarily, by contract, or by order of a court of competent jurisdiction, whether or not they reside together. • “Exploitation” means the act or process of using a person or his resources for another person’s profit or advantage [without legal entitlement to do so]. <i>(Bracketed language only in statutes relating to institutionalized elderly person.)</i> • “Facility” means any facility or institution, whether public or private, offering health or health related services for the institutionalized elderly, and which is subject to regulation, visitation, inspection, or supervision by any government agency. Facilities include, but are not limited to: <ul style="list-style-type: none"> • nursing homes; • skilled nursing homes; • intermediate care facilities; • extended care facilities; • convalescent homes; • rehabilitation centers; • residential health care facilities; • dementia care homes; • special hospitals; • veterans' hospitals; • chronic disease hospitals; • psychiatric hospitals; • mental hospitals; • developmental centers or facilities; • continuing care retirement communities, including independent living sections thereof; • day care facilities for the elderly; and • medical day care centers. • “Health care professional” means a health care professional who is licensed or otherwise authorized to practice a health care profession that is regulated by one of the following boards or by the Director of the Division of Consumer Affairs: the State Board of Medical Examiners, the New Jersey Board of Nursing, the New Jersey State Board of Dentistry, the New Jersey State Board of Optometrists, the New Jersey State Board of Pharmacy, the State Board of Chiropractic Examiners, the Acupuncture Examining Board, the State Board of Physical Therapy, the State Board of Respiratory Care, the Orthotics and Prosthetics Board of Examiners,

	<p>the State Board of Psychological Examiners, the State Board of Social Work Examiners, the State Board of Examiners of Ophthalmic Dispensers and Ophthalmic Technicians, the Audiology and Speech-Language Pathology Advisory Committee, the State Board of Marriage and Family Therapy Examiners, the Occupational Therapy Advisory Council, the Certified Psychoanalysts Advisory Committee, and the State Board of Polysomnography. "Health care professional" also means a nurse aide or personal care assistant who is certified by the Department of Health.</p> <ul style="list-style-type: none"> • "Institutionalized elderly person" means any person 60 years of age or older who is a patient, resident, or client of any facility or institution, whether public or private, offering health or health related services for the institutionalized elderly, and which is subject to regulation, visitation, inspection, or supervision by any government agency. • "Neglect" means an act or failure to act by a vulnerable adult or his caretaker which results in the inadequate provision of care or services necessary to maintain the physical and mental health of the vulnerable adult, and which places the vulnerable adult in a situation which can result in serious injury or which is life-threatening. • "Patient, resident or client" means any elderly person (<i>i.e.</i>, 60 years of age or older) who is receiving treatment or care in any facility in all its aspects, including, but not limited to, admission, retention, confinement, commitment, period of residence, transfer, discharge, and any instances directly related to such status. • "Vulnerable adult" means a person 18 years of age or older who resides in a community setting and who, because of a physical or mental illness, disability or deficiency, lacks sufficient understanding or capacity to make, communicate, or carry out decisions concerning his well-being and is the subject of abuse, neglect or exploitation.
<p>What timing and procedural requirements apply to reports?</p>	<ul style="list-style-type: none"> • Reports for a <u>Resident of a Residential Health Care Facility</u> or for a <u>Vulnerable Adult</u> must be made in a timely manner. • For an <u>Institutionalized Elderly Person</u>: If the events that cause the suspicion or belief: <ul style="list-style-type: none"> • Result in serious bodily injury, the individual shall report the suspicion or belief immediately, but not later than <u>2 hours</u> after forming the suspicion or belief. • Not result in serious bodily injury, the individual shall report the suspicion or belief immediately, but not later than <u>24 hours</u> after forming the suspicion or belief.
<p>What information must a report include?</p>	<ul style="list-style-type: none"> • <u>For an Institutionalized Elderly Person or Resident of a Residential Health Care Facility, Rooming House or Boarding House</u>: <ul style="list-style-type: none"> • The name and address of the elderly person or resident; • Information regarding the nature of the suspected abuse or exploitation; and • Any other information that might be helpful in the investigation of the case and the protection of the elderly person or resident. • <u>For a Vulnerable Adult</u>: <ul style="list-style-type: none"> • The name and address of the vulnerable adult; • The name and address of the caretaker, if any; • The nature and possible extent of the vulnerable adult's injury or condition as a result of abuse, neglect or exploitation; and

	<ul style="list-style-type: none"> • Any other information that the reporter believes may be helpful.
Anything else I should know?	<ul style="list-style-type: none"> • A person shall not be deemed to be the subject of abuse, neglect or exploitation or in need of protective services for the sole reason that the person is being furnished nonmedical remedial treatment by spiritual means through prayer alone or in accordance with a recognized religious method of healing in lieu of medical treatment, and in accordance with the tenets and practices of the person's established religious tradition. • <u>Institutionalized Elderly Person</u>: Any person required to report suspected abuse or exploitation of an institutionalized elderly person who fails to make such report shall be fined not more than \$500, and the facility employing the individual shall be fined not more than \$2,500. • <u>Resident of a Residential Health Care Facility, Rooming House or Boarding House or Institutionalized Elderly Person</u>: The name of any person who reports suspected abuse or exploitation pursuant to this section and the name of any person mentioned in such report shall not be disclosed unless the person who reported the abuse or exploitation specifically requests such disclosure or a judicial proceeding results from such report. • Any person who reports suspected abuse or exploitation or who testifies in any administrative or judicial proceeding arising from such report or testimony shall have immunity from any civil or criminal liability on account of such report or testimony, unless such person has acted in bad faith or with malicious purpose. • Injury does not need to be inflicted to constitute abuse. (<i>N.J. Dept. of Health vs. Bawak-Orock</i>, 2021 WL 772906 (Super. Ct. App. Div. Mar. 1, 2021)).
Statutory citation(s):	N.J. Stat. Ann. §§ 30:1A-3, 52:27D-407, 52:27D-409, 52:27G-2, 52:27G-7.1; NURSING HOMES—ABUSE—REPORTS.