inHealth health coaches are NBC-HWC board certified. Coaches do not diagnose, interpret diagnostic results, or adjust medications. This tool guides recognition, response, and escalation only. **When in doubt, escalate.**

BEFORE YOU ACT

1. Ask whether it is safe to talk right now.
2. **Do not contact the suspected abuser under any circumstances.**
3. Do not leave voicemails, send texts, or send emails that could be seen by someone in the household.
4. Confirm a safe callback method and time before ending the call.
5. Document the participant's own words. Do not editorialize or diagnose.

BEFORE YOU CALL 911

1. Confirm the participant's current physical address and a callback number. Do not assume the address on file is where they are right now.
2. You are calling from a different location than the participant, so your 911 call may route to your own local dispatch. State this immediately: give the participant's city, state, and full address, and ask to be transferred to that jurisdiction's emergency dispatch. Stay on both calls if you can.
3. Stay on the line with the participant until EMS arrives or another responsible adult takes over.
4. Do not advise a participant with emergency symptoms to drive themselves.

TYPES · RECOGNIZE AND NAME

Physical: hitting, kicking, burning, dragging, over or under medicating
Sexual: unwanted sexual contact, sexual exploitation, forced viewing of pornography
Abandonment: desertion or willful forsaking by anyone having responsibility for care
Isolation: preventing the individual from receiving mail, telephone calls, or visitors
Financial: theft, misuse of funds or property, extortion, duress, fraud
Neglect: failure to provide food, clothing, shelter, or healthcare for an individual under one's care when means to do so are available
Self-Neglect: failure to provide food, clothing, shelter, or healthcare for oneself
Mental Suffering: verbal assaults, threats causing fear

RESOURCES

Situation	Resource
Immediate danger	**911**
Adults 60+ or vulnerable adults	Adult Protective Services, via Eldercare Locator **1-800-677-1116**
Children in the household	Childhelp National Child Abuse Hotline **1-800-422-4453**, and state CPS
Intimate partner violence	National Domestic Violence Hotline **1-800-799-7233**, text START to **88788**, TTY **1-800-787-3224**
Sexual assault	National Sexual Assault Hotline **1-800-656-4673**
Human trafficking	National Human Trafficking Hotline **1-888-373-7888**

ACTIONS, IN ORDER

1. If there is immediate danger or severe injury and the participant cannot call for help, **call 911 on their behalf. Confirm their location first.**
2. Provide the relevant resource from the table above.
3. **File your own mandated report. See page 2.**
4. Notify referring provider within 24 hours, or within 1 hour if there is immediate danger.
5. Document the participant's comments in the SOAP note and complete the Crisis Management Referral/Incident Form.
6. Follow up within 24 hours using the agreed safe contact method.

MANDATED REPORTER STATUS: inHealth policy is that **every coach reports. Every state. Every time.** Your duty is personal and is not satisfied by telling anyone at inHealth. Full standard, jurisdiction table, and filing timelines on page 2.

AFTER HOURS: The hotlines above run 24/7 and are the after-hours path for this protocol. For provider notification, use the after-hours or nurse line on the participant's referral; if there is none, notify at the start of the next business day and document the delay.

IF THE PARTICIPANT DECLINES ESCALATION

Document all four: the recommendation you made, the participant's response in their own words, the risks you explained, and the alternative you offered. Notify the referring provider regardless of refusal. A refusal does not close the incident. **A refusal does not remove your reporting duty.**

CLOSING THE LOOP

Follow-up contact within 24 hours to confirm the participant reached care. Record the outcome in the SOAP note. An escalation is not complete until the outcome is documented.

TIER 1 IMMEDIATE
Call 911 now, before any other step

TIER 2 URGENT
Provider contact within 1 hour

TIER 3 SAME DAY
Provider notified same business day

TIER 4 ROUTINE
Documented in routine note within 24 hours

This page states inHealth's reporting standard. It does not replace page 1. Recognition, safety steps, and the participant-facing resources are on page 1. **When in doubt, report.**

Every coach reports. Every state. Every time.

State law varies and some states require any person to report. inHealth applies one standard so you never have to determine your legal status during a live call.

YOUR DUTY IS PERSONAL

Telling the referring provider, your manager, or inHealth leadership **does not satisfy it**. Provider notification is a separate, additional step. **No inHealth supervisor may tell you not to report.**

THRESHOLD AND PROTECTION

Report on **reasonable suspicion**. You do not need proof. You do not investigate.

You are protected: good-faith reports carry immunity in every state, including when you were not required to report.

WHERE TO REPORT · THE PARTICIPANT'S JURISDICTION, NOT YOURS

Situation	Where
Immediate danger	**911 at the participant's location**
Adult 65+ or dependent adult	County APS. Eldercare Locator **1-800-677-1116**
Adult in a care facility	That state's long-term care ombudsman
Child	County CPS or law enforcement. Childhelp **1-800-422-4453**

TIMELINES

Elder or dependent adult (WIC 15630)
Phone immediately. Written or internet report within **2 working days**. Form **SOC 341**.

Child (PC 11166)
Phone immediately. Written report within **36 hours**. Form **SS 8572**.

Contact Management if any questions arrise.

AFTER HOURS: APS, CPS, and law enforcement reporting lines accept reports 24/7. A report is never deferred to the next business day. For provider notification, use the after-hours or nurse line on the participant's referral; if there is none, notify at the start of the next business day and document the delay.

IF THE PARTICIPANT DECLINES ESCALATION

Document all four: the recommendation you made, the participant's response in their own words, the risks you explained, and the alternative you offered. Notify the referring provider regardless of refusal. A refusal does not close the incident, and it does not remove your reporting duty.

CLOSING THE LOOP

Follow-up contact within 24 hours using the agreed safe contact method. Record the report reference number and the outcome in the SOAP note. An escalation is not complete until the outcome is documented.

TIER 1 IMMEDIATE
Call 911 now, before any other step

TIER 2 URGENT
Provider contact within 1 hour

TIER 3 SAME DAY
Provider notified same business day

TIER 4 ROUTINE
Documented in routine note within 24 hours