

**ELDER JUSTICE ACT REPORT FORM FOR THE
REASONABLE SUSPICION OF A CRIME**

INSTRUCTIONS: If you have the reasonable suspicion that a crime has been committed against any individual who is a resident of, or is receiving care from, the facility you are in, YOU MUST submit this completed form to local law enforcement and the Tennessee Department of Health (TDH).

TIMEFRAME FOR REPORTING: Within **2 hours** (if there is serious bodily injury) or **24 hours** (if there is not serious bodily injury) after forming your reasonable suspicion.

[FACILITY NAME] _____
 [ADMINISTRATOR] _____
 [ADDRESS] _____
 [PHONE] _____
 [FAX]: _____
 [EMAIL] _____

<u>Report to State Survey Agency</u>	<u>Report to Local Law Enforcement</u>
Date Reported: / / Time: _____	Date Reported: / / Time: _____
REPORTED TO: Tennessee Department of Health	REPORTED TO: [LOCAL SHERIFF OR POLICE]
TDH HOTLINE: (877) 287-0010 OR (615) 253-5905	[PHONE] _____
BY FAX: (615) 253-4356	[FAX] _____
	[EMAIL] _____

BRIEF SUMMARY OF INCIDENT YOU HAVE REASONABLE SUSPICION IS A CRIME: Give RESIDENT NAME and a brief description of the location of the incident and, if available, the names of any individuals involved in the suspected crime.

Was there serious bodily injury? No ___ YES ___ (must be reported within 2 hours)

THIS REPORT MAY BE MADE BY AN INDIVIDUAL, OR BY MULTIPLE INDIVIDUALS REPORTING JOINTLY. EACH PERSON REPORTING THE ABOVE EVENTS SHOULD COMPLETE THE INFORMATION BELOW

Name:	Date/time individual developed reasonable suspicion
1.	Date: / / Time: _____
2.	Date: / / Time: _____
3.	Date: / / Time: _____
4.	Date: / / Time: _____
5.	Date: / / Time: _____
6.	Date: / / Time: _____
7.	Date: / / Time: _____

NOTE: Section 1150B of the Social Security Act (the Act), as established by section 6703(b)(3) of the Patient Protection and Affordable Care Act of 2010 (Affordable Care Act), requires specific individuals in applicable long-term care facilities to report any reasonable suspicion of crimes committed against a resident of that facility. This report is required by law and is in no way an allegation or determination by the person[s] submitting the report that a crime has or may have actually occurred. It is also not an admission of any liability by the Facility nor any individual involved or noted above.