## Abuse, Neglect and Exploitation

POLICY:

This Home will not tolerate verbal, physical, mental or sexual abuse, including involuntary seclusion of any resident by any staff member, other resident or visitor to the home.

PROCEDURES:

1. Reporting:
	1. Any staff member who has a reasonable cause to believe that an incident of resident abuse, abandonment, neglect, or financial exploitation has occurred will immediately notify the Department of Social and Health Services hotline at 1-800-562-6078. They must also report it immediately to someone within management.
	2. Any staff member who has reason to suspect an incident of sexual or physical assault has occurred will report to the hotline 1-800-562-6078 and to the local law enforcement emergency services number as soon as the home is protected from further harm. Management must also be notified immediately.
	3. If the incident involves licensed professionals, a report should also be made to professional licensing within the Department of Health.
	4. All staff members will receive training on abuse, neglect and exploitation and the mandatory reporting requirements during orientation and periodically throughout the year. A statement of understanding will be placed in the employee file.
	5. Any staff member who is suspected of abuse, neglect or exploitation will not have access to any resident until the home investigates the incident and takes action to assume the safety of the residents.
		1. If the alleged perpetrator is the owner/co-owner or other supervisor, you still must report the suspected issue and protect the resident(s) from harm.
	6. The following information will be included in the report to the hotline:
		1. Name and address of person making the report
		2. Name and address of the resident and the name of the home providing care
		3. Name and address of the legal guardian or alternate decision maker
		4. Nature and extent of the abandonment, abuse, financial exploitation, neglect or self neglect
		5. Any history of previous abandonment abuse, financial exploitation, neglect or self neglect
		6. Identity of the alleged perpetrator if known
		7. What the home is doing to protect the resident, and any other vulnerable residents and household members.
		8. Other information that may be helpful in establishing the extent of the abandonment, abuse or financial exploitation
2. Incident Report and/or Incident Log
	1. An incident report may be prepared for any suspected abuse, neglect or exploitation to determine the circumstances of the event and to determine appropriate measures to prevent similar future situations. The following information will be gathered:
		* 1. Resident information with relevant history
			2. Location and date/time of incident
			3. Notification as appropriate (eg., physician, family, owner/resident care manager, nurse, Complaint Resolution Unit, police)
			4. Description of incident
			5. Contributing factors (if known)
			6. Evaluation of resident’s condition
			7. Signature of person completing report
			8. Review and signature of management
	2. Owner/resident manager will further investigate and implement measures to prevent re-occurrence
	3. If the CRU was notified regarding the incident initially, a designated staff person will perform a follow-up call to the CRU upon the completion of the internal investigation in order to share findings and prevention measures with state staff.
3. Notifications
	1. The home staff will notify as soon as possible and write in the progress note or incident log who was notified and when, including:
		1. The resident’s family, guardian or other individual or agency responsible for or designated by the resident
		2. The resident’s physician
		3. The case manager, if applicable
		4. The provider/resident manager
		5. The CRU
		6. The local law enforcement, if necessary.
4. Documentation
	1. The staff member will document the incident in the resident health record and action of the staff related to the incident including preventative measures put in place to assure safety.
	2. Document any changes in the resident’s physical, mental, emotional and social abilities to cope with the affairs and activities of daily living, physical and mental coordination.
5. Additional Steps When You Suspect Rape or Sexual Abuse
	1. Immediate medical examination of the resident, with prior notice to the examining physician that the resident may have been raped or sexually abused. The resident has the right to refuse this examination should s/he choose.
	2. Arrange for a counselor or other professional knowledgeable in the field of rape and sexual assault to question or interview the resident and provide counseling or intervention when necessary.
	3. Allow only those with special training to deal with sexual abuse investigations to question the resident and suspected perpetrator regarding the alleged incident unless DSHS, police or prosecutor’s office instructs otherwise.
	4. All evidence will be preserved (e.g., linens, towels, bedclothes or clothing) and will not be laundered or discarded. It will be placed in a plastic bag and given to appropriate authorities. The resident will not be bathed or cleansed prior to the medical examination. We will recognize the resident’s right to refuse medical examination.
6. Staff Responsibilities
	1. It is the responsibility of each staff member to immediately contact the department directly regarding suspected or alleged abuse or other improprieties. This home will not retaliate against any resident and/or staff member who reports an alleged incident of abuse in good faith.
	2. All staff who observe the following resident incidents are responsible for notifying their supervisor or management:
		1. Falls
		2. Altercations between anyone and a resident
		3. Elopement of residents (leaving the home unattended when the person should have someone with them)
		4. Abuse, neglect, abandonment, exploitation and sexual or physical assault of residents
		5. Medication errors

**Failure to report the above listed situations may result in corrective action up to, and including, termination.**