(Agency Name) is committed to providing a safe environment for the people it serves, and to preventing abusive conduct in any form. Every member of this organization is responsible for protecting the individuals we serve and ensuring their safety and well-being.

The Zero Tolerance Policy is established for (Agency Name) employees, families, volunteers, and participants. All are expected to adhere to this policy. Abuse of any kind is not tolerated.

As per Welfare and Institutions Code (WIC) Section 15630, all (Agency Name) employees are Mandated Reporters. A Mandated Reporter is required to report any reasonable suspicion or known abuse to the (fill in appropriate entities: local police, Ombudsman, Adult Protective Services, etc.). Any reasonable suspicion or known abuse must be reported by telephone immediately, or as soon as practically possible, and by written report sent within two working days. Failure to report abuse is a misdemeanor, and is punishable with up to six months in county jail, and/or by a fine of up to $1,000.

(Agency Name) upon becoming aware of a reportable incident or allegation of abuse or neglect of a consumer shall take immediate action to ensure the health and safety of the involved consumer and all other consumers receiving services.

All allegations of abuse will be investigated. Any employee accused of abuse, neglect or mistreatment will be immediately suspended from work. If the investigation substantiates abuse, neglect or mistreatment the employee will be immediately terminated.

All (Agency Name) employees will be fully informed upon hire and annually thereafter regarding the Zero Tolerance Policy, and mandatory abuse and neglect reporting laws. Each employee will be knowledgeable of their responsibility to protect consumers from abuse and neglect, the signs of abuse and neglect, the process for reporting suspected abuse or neglect, and the consequences of failing to follow the law.

(Agency Name) will closely monitor the Zero Tolerance Policy and report its adherence to this policy annually to the vending Regional Center.

_______________________________   ____________
(Agency Authorized Representative’s Signature)           Date
Zero Tolerance

(AGENCY NAME) has a zero tolerance of any form of ABUSE, NEGLECT and/or MISTREATMENT

If you suspect ANY FORM of abuse, neglect or mistreatment of ANY INDIVIDUAL receiving services at this location, YOU MUST immediately, or as soon as you possibly can, NOTIFY your ADMINISTRATOR AND any one of the following individuals:

(Name), (Title)
Work: (XXX) XXX-XXXX  Home: (XXX) XXX-XXXX  Cell: (XXX) XXX-XXXX

(Name), (Title)
Work: (XXX) XXX-XXXX  Home: (XXX) XXX-XXXX  Cell: (XXX) XXX-XXXX

(Name), (Title)
Work: (XXX) XXX-XXXX  Home: (XXX) XXX-XXXX  Cell: (XXX) XXX-XXXX

(Name), (Title)
Work: (XXX) XXX-XXXX  Home: (XXX) XXX-XXXX  Cell: (XXX) XXX-XXXX

As an employee of (Agency Name), you are a MANDATED REPORTER (per section 15630 of the Welfare and Institutions Code) and are also required to report ANY REASONABLY SUSPECTED ABUSE to the ombudsman and/or local police. Failure to report abuse is a misdemeanor, and is punishable with up to six months in the county jail or by a fine of up $1,000 (or both).

All allegations of Abuse will be investigated and the “report” will remain confidential (unless disciplinary action requires this report to become public). Any employee engaging in abuse, which is substantiated, will be immediately terminated. Any retaliation toward a reporter by an (Agency Name)’ employee will result in immediate disciplinary action, up to and including termination from employment.
ZERO TOLERANCE POLICY FOR ABUSE AND NEGLECT

Approved: ___________________________    No.: 2.A.8
Chief Executive Officer                Original Date: September 2007

Westview is committed to providing programs for Adults with Developmental Disabilities in a safe and healthy environment which is free from abuse and neglect. The following are offenses of abuse: physical mistreatment, mishandling of finances, sexual misconduct, verbal misconduct, abandonment, isolation and abduction. Neglect is the deprivation of goods or services, by a care provider, that are necessary to avoid physical harm or mental suffering.

In keeping with this commitment, Westview Services has established a Zero Tolerance Policy for dealing with abuse and neglect. All employees are required to immediately report any abuse or neglect to the appropriate Protective Services Agencies, as well as to their supervisor. Procedures for reporting abuse and neglect are posted in every Westview Services facility. Any employee found guilty of abusing a consumer will be immediately terminated and reported to the proper authority.

If you have any questions concerning this policy, please feel free to contact the Director of Human Resources.
Procedure for Reporting Client Abuse

Elder and Dependent Adult Abuse Reporting Requirement: Integrated Rehabilitation Therapies, Inc. provides services to adults who are dependent (i.e., require assistance with their daily care). Elder and dependent adults are protected under the Welfare and Institutions code of the Department of Social Services. Anyone who works with elder or dependent adults, whether paid or volunteer, are considered mandated reporters and must report abuse to the appropriate authorities, including information gleaned from otherwise confidential therapy sessions. Information of this latter nature should be brought to the attention of IRT’s Clinical Services Manager or the Executive Director for consultation prior to reporting.

Abuse includes, but is not limited to, physical abuse, sexual abuse, neglect, financial abuse, abandonment, isolation, deprivation, abduction, or any other treatment resulting in physical harm, pain, and/or mental suffering.

Zero Tolerance

Abuse of a client, of any kind, will not be tolerated. You are required by law and by this policy to report suspected or known abuse of an elder or dependent adult immediately. Failure to do so will result in disciplinary action and legal action may be taken by the Company. Employees identified as having abused or neglected any client for any reason are subject to immediate disciplinary action, including termination and possible legal action by the Company.

Reports of abuse are to be made by the person who observed, or has reason to suspect, abuse. Verbal reports must be made immediately to your supervisor or the Executive Director, or by telephone to either:

Adult Protective Services  1.800.451.5155 (Orange County 24-hour hotline)

or

Local Law Enforcement agency   (911)

Welfare and Institutions Code Section 15630 5(e) states that the report will include the:

- name of the person making the report,
- name and age of the elder or dependent adult
- present location of the elder or dependent adult,
- names and addresses of family members or any other person responsible for the elder's or dependent adult's care,
- nature and extent of the elder's or dependent adult's condition,
- date of the incident(s),
- information that led that person to suspect elder or dependent adult abuse, and
- any other information requested by the agency receiving the report.
A written follow-up of the report (Form SOC 341) must be submitted to Adult Protective Services within 48 hours (2 days) of the telephone report.

Written reports are to be mailed to **Adult Protective Services**, at either address below.

(for Orange County)

P.O. Box 22006
Santa Ana, CA 92702

A copy of the report must also be mailed to:

**Department of Social Services**
Community Care Licensing Division
770 The City Drive South, Suite 7100
Orange, CA 92668

**Procedure for Reporting Client Incidents**

All employees are required to document client related incidents for which they are primary observer. Pursuant to Section 80061, Article 6 of the General Licensing Requirements of the State of California Health and Welfare Agency, Department of Social Services, each incident report must fulfill the following requirements:

"Each licensee or applicant shall furnish to the licensing agency reports as required by the Department, including, but not limited to, those specified in this section.

Upon the occurrence, during the operation of the facility, of any of the events specified in the agency, within the agency's next working day, during its normal business hours. In addition, a written report containing the information specified in “2.” below shall be submitted to the licensing agency within seven days following the occurrence of such event.

1. Events reported shall include the following:
   a. Death of any client from any cause.
   b. Any injury to any client which requires medical treatment.
   c. Any unusual incident or client absence which threatens the physical or emotional health or safety of any client.
   d. Any suspected physical or psychological abuse of any client.
   e. Epidemic outbreaks.
   f. Poisonings.
   g. Catastrophes.
   h. Fires or explosions which occur in or on the premises.

2. Information provided shall include the following:
   a. Client's name, age, sex, and date of admission.
b. Date of incident, date of report, time of incident, nature of event.

c. Attending physician's name, findings, and treatment if any.

d. Disposition of the case.

e. Name, title and signature of person reporting incident,
   (i.e., a person who was primary witness to the incident.)"

Copies of incident reports will be mailed (one copy each) to: Department of Social Services, the client's Regional Center service coordinator, the client's care home, and the client's parent (when applicable). The original copy will be placed in the client's file.

Writing and Filing Incident Reports

1. All incidents should be recorded in writing, by the primary person that observed the incident, as soon as feasible, ON THE SAME DAY OF THE INCIDENT. Do not wait until the next day to record the incident.

2. All incidents should be recorded whether or not you think they will be filed with agencies of authority.

3. If in doubt about whether or not to file a report with the agency of authority, FILE IT. It is better to err on the side of caution than to not report a potentially harmful situation.

4. State the names and/or titles of staff that observed the incident and of those who participated in the resolution of the incident.

5. State the name of the client who is the subject of the incident.

6. Follow the instructions on Licensing Form 624 “UNUSUAL INCIDENT/INJURY REPORT.” Fill out the form COMPLETELY.

7. Give as much OBJECTIVE detail as possible when writing the report. (See following examples.)

   [Poor example: “Jane had a seizure which lasted one minute and 20 seconds. She slid out of her chair during the seizure and as a result obtained a quarter size rug burn on the left side of her head.”

   Better example: “At 10:06 a.m. Jane was sitting at the table in the art room participating in class with 8 other students. She was observed by this teacher to roll her eyes back in her head and quickly become limp. She slid off of her chair sideways (toward the left) onto the floor, making contact with the floor, first with her leg and hip, then her shoulder and head. There were no obstacles in her way during the fall. During the ictal phase of the seizure, her head scraped against the carpet causing a small bump on her head (the size of a dime) at her left temple, and a carpet burn 1” x 1” also on her left temple. Total seizure time was 1 minute 20 seconds.”]
8. If you are uncertain as to how to write the incident, seek out assistance from your supervisor.

Child Abuse Reporting Procedures

Although IRT does not specifically serve children, all staff members are mandated to report any suspected child abuse that they become aware of during the course of their professional duties, including information gleaned from otherwise confidential therapy sessions. Information of this nature should be brought to the attention of IRT Administration for consultation prior to reporting. In the event an IRT Administrator is not available, specific procedures are in place and reports can be made by phone to:

Child Abuse Hotline
1-800-540-4000
General Summary
The purpose of this guide is to provide take home information to employees of (Agency Name) which summarizes training received during initial orientation and intermittently during employment. This is your personal copy to have with you for immediate access and guidance. This document contains a review of the following laws/regulations/policies: (1) The California Welfare and Institutions Code; (2) The California Health and Safety Code; (3) California Title 22, governing Department of Social Services (DSS) licensed services (4) California Title 22, governing Department of Public Health Services (DPHS) licensed ICF/MR facilities; (5) California Title 17 governing Regional Center Vendors and Long Term Care facilities; (6) the Center for Medicaid Services’ (CMS) federal regulations for Intermediate Care Facilities for the Mentally Retarded (ICFs/MR); (6) The Social Security Patient Protection and Affordable Care Act of 2010; and (7) (Agency Name)’ system to prevent abuse/neglect and mistreatment. Attached herein are also two Appendixes, one which provides guidelines for interaction and another which contains definitions relating to these various laws, regulations and policies.

What is Abuse?
There are state and federal laws and regulations that define abuse. The three laws/regulations/policies that you should be familiar with are the Welfare and Institutions Code definitions (abuse/neglect against dependent adults), the Penal code definitions (abuse/neglect against children) and the Federal Register definitions (abuse against anyone with a developmental disability living in an ICF/MR facility). The definitions that are found in each of these laws/regulations are located in the Appendix of Definitions at the end of this guide. The definitions include: abuse, physical abuse, neglect, fiduciary abuse, abandonment, isolation, abduction, mental suffering, verbal abuse, sexual abuse, psychological abuse, and child abuse. It is important to be familiar with the legal definitions of abuse and what needs to be reported both to the police or ombudsman as well as (Agency Name) management staff. There may be times when determining if something is abuse is difficult. It is important that if you are unsure, you at the least, discuss your concerns with an (Agency Name)’ management staff member. These management staff are available to you 24 hours a day, seven days a week and are familiar with our system and will be able to assist you in reviewing the definitions and the processes of reporting abuse, neglect and/or mistreatment.

What is a Crime?
Within the context of this guideline, a crime is any illegal activity against an individual who receives supports from (Agency Name). When you suspect or believe a crime has been committed, you need to discuss your concerns immediately with an (Agency Name)’ management staff member. These management staff are available to you 24 hours a day, seven days a week and are familiar with our system and will be able to assist you in reviewing the definitions and the processes of reporting the suspected crime.
What do you mean by mandated reporter?
A mandated reporter is anyone who works with dependent adults (adults who have mental or physical deficiencies which make them rely on others) and/or with children receiving out of home care (e.g., group homes). The Welfare and Institutions Code and the Penal Code are the laws that outline your mandated reporter responsibilities. During orientation, you watched a video developed by the Attorney General’s office and the CA Department of Justice regarding your mandated reporter responsibilities. You also signed a written statement that you understand you are a mandated reporter and would report any reasonably suspected abuse to the Ombudsman and/or local police department. Basically, what this means is that in California, when you witness abuse, have been told by someone you care for that they have been abused, or you reasonably suspect abuse has occurred, you must tell the ombudsman or the police AS SOON AS POSSIBLE. As soon as possible does not mean the next day, or the next week, it means calling as soon as you possibly can. If you don’t call the ombudsman or the police, you could be charged with failure to report which is a crime and you could spend time in prison and/or pay a substantial fine for not reporting this to one of these two agencies. If you would like your Administrator to help you when you call, this can certainly be accommodated. Remember, we have management staff available 24 hours a day, seven days a week.

What is a covered individual?
A covered individual is anyone who is an owner, operator, employee, manager, agent or contractor of (Agency Name). The Social Security Patient Protection and Affordable Care Act outline your covered individual reporter responsibilities. During orientation, you received information regarding these responsibilities. There is also posted information regarding these responsibilities and your rights when reporting suspected crimes against people supported by (Agency Name). You also signed a written statement that you understand you are a covered individual and would report any reasonably suspected crime against a person supported to the Department of Public Health and the local police department. Basically, what this means is that when you witness a crime or reasonably suspect a crime has been committed against someone we support, you must tell the Department of Public Health and the police AS SOON AS POSSIBLE. As soon as possible does not mean the next day, or the next week, it means calling as soon as you possibly can. If you would like your Administrator to help you when you call, this can certainly be accommodated. Remember, we have management staff available 24 hours a day, seven days a week.

Do I tell someone at (Agency Name)?
Yes, also during orientation, our agency’s Zero Tolerance Policy and our System to Prevent Abuse, Neglect and Mistreatment were reviewed with you. You will also receive training intermittently regarding these policies. As was reviewed with you, if you witness, suspect or hear about any crime or abuse as described above (and defined in the Appendix of Definitions), you must immediately call two people within (Agency Name). The first person you should call is the Director/Administrator of your program or the Administrator On-Call at the time. You then need to make a second call to one of the four people listed on our Zero Tolerance posters located at each program. These people are:

1. Agency person name, title and contact number
2. Agency person’s name, title and contact number
3. Agency’s person’s name, title and contact number
4. Agency’s person’s name, title and contact number
Telling a lead staff member or a fellow staff member does not substitute for making the two phone calls to management staff. You must call as soon as possible. Again, this does not mean the next day, or the next week, it means calling as soon as you possibly can (i.e., right away, at the end of the shift, or on your cell phone). Keep the above numbers with you. You were given business cards at orientation with these numbers. Try keeping them in your wallet/billfold so you always have them. They are also posted at each program. If you don’t make these calls, you are placing your employment with (Agency Name) in jeopardy. It is our expectation that you report!

What if I see something that is not a crime or abuse, but does not feel right to me?

This could possibly be mistreatment and not necessarily criminal abuse or neglect. (Agency Name) views mistreatment as any action that equates to disrespect, harshness, uncaring, callousness or is mean-spirited in nature but does not rise to the definitions of the various forms of abuse found in the Appendix of Definitions. Although you typically are not mandated to call the police or the ombudsman about this behavior, (Agency Name) has a policy to investigate mistreatment and to prevent it from happening. Mistreatment is a red flag that often means the person engaging in the behavior needs additional training, or a change in the type of job they have. It is important that the people we support feel safe in the programs we offer. It is difficult to feel safe when you have someone assisting you with your daily skills, who would rather be doing something else. It is important that our employees care about what they are doing. We also expect that if you feel a fellow employee (or anyone involved in the lives of the people we support) is engaging in any form of mistreatment, you make the two phone calls to two different (Agency Name)’ management team members (see above under ADo I Tell someone at (Agency Name)?@). Call as soon as possible. Again, this does not mean the next day, or the next week, it means calling as soon as you possibly can (i.e. right away, at the end of the shift, or on your cell phone). There may be times when deciding if something is mistreatment is difficult. It is important that if you are unsure, you at the least, discuss your concerns with an (Agency Name)’ management staff. Again, management staff are available to you 24 hours a day, seven days a week and are familiar with our system and may be able to assist you in reviewing the actions you observed and the processes of our system. Attached to this guide is an Appendix with examples of appropriate and inappropriate interactions which could assist in your interpretation of someone’s behavior.

What happens when I report a crime, abuse, neglect or mistreatment?

If you witness something that rises to the level of abuse or neglect, you will report it both to the police/ombudsman and to (Agency Name) management staff as described earlier. The police/ombudsman has the responsibility to investigate and the facility then has the responsibility to report to other entities (e.g., licensing, families, regional center). The person you reported will be suspended and will not return to work during the investigation. There will be internal and external investigations that will occur. Individuals supported by us will be interviewed. You will be interviewed, other staff will be interviewed. Your name will be given to certain agencies but will not be shared with other employees, the person you reported or anyone other than the authorized agencies/management staff. Anyone interviewed will be asked not to share information regarding the investigation. If the person you reported is charged with a criminal act, you may be asked to testify. Remember, you are protecting individuals who, in most cases, cannot protect themselves. It is also important to recognize that abuse or neglect could come from other sources (e.g., family members, day programs, transportation vendors, other consumers). You are still responsible for reporting abuse/neglect in these situations and the process described herein is the same. If what you witness consists only of mistreatment and does not rise to the level of criminal abuse, (Agency Name) will conduct an investigation and actions will be taken to either retrain or terminate the person depending on the individual circumstances and results of the
investigation. During the investigation, the person alleged to have engaged in the mistreatment will be suspended. You, the person you reported, other staff, and the people we support could all be interviewed. Again, your name will not be shared with fellow employees or the person you reported.

**What if someone accuses me of abuse?**
If you are accused of abuse/neglect or mistreatment, you will be suspended. There will be investigations as described earlier and you will be interviewed. If (Agency Name) or a co-worker reasonably suspects you have engaged in criminal abuse/neglect you will be reported to the authorities as described earlier. If you have engaged in mistreatment, (Agency Name) will decide what actions are needed, up to and possibly including termination of employment. If after an investigation, it has been substantiated that you did not commit abuse/neglect or mistreatment, you will be paid for any missed wages while the investigation was in process and there will be no negative actions in regards to your employment.

**Are there documentation responsibilities?**
As was reviewed with you at orientation and intermittently during your employment, our agency’s system to prevent abuse has many aspects. You are required to complete a suspected abuse form if you report abuse. We can help you with completing this form if you would like. It is a State form (SOC-341) which you were given a copy of at orientation and a copy is available in the system to prevent notebook at your program. We also require you to complete *AObservation Report* for minor injuries which may occur to the people we support. We have you do this so the Administrators/Directors are able to determine any patterns of injury in order to provide changes to program or intervene with changes in care. If you notice bruises, marks or other injuries and you are not sure what happened, we also ask that you complete an *AObservation Report* so we can monitor these as well, and look for patterns in determining what may have happened. If an injury is suspicious in nature (e.g., a burn, fingertip bruises in private body areas, scratches on the back, etc.), in addition to completing the *Observation Report*, you need to contact the Director/Administrator of your program as soon as you are aware of the injury. *Observation Reports* are available for your use in each program. We also have *ASpecial Incident Reports*. Special Incidents are defined in California Regulations (Title 17) and the reports are completed when more significant injuries or changes in conditions occur (emergency medical treatment, unexpected hospitalizations, etc.). These are completed by your Administrator or RN with your help. These forms are sent to Regional Centers providing case management.

**Why is all of this Important?**
This is important because it is imperative that the people (Agency Name) supports are free from abuse, neglect and all forms of mistreatment. It is important that these individuals are free to feel safe and secure in their places of work, in their homes and in the supports they receive. It is important that only the best people provide direct supports to the people we provide services to. It is important that we stop abusers from going somewhere else to work with other people and that we encourage prosecution for any criminal behavior someone may choose to engage in. It is important because having a system which is successful in the prevention of crimes, abuse, neglect and mistreatment is the RIGHT THING TO DO. You make the difference in the success of this program. You are the people providing the direct care and who need to be the primary advocates for each and every person we offer supports to.
Appendix A
Outline For Appropriate and Inappropriate Verbal
and Physical Interactions

As you take on the role of a Direct Care Staff or Direct Support Professional with (Agency Name), you take on a role which carries with it many new responsibilities and challenges. You have been entrusted with the welfare of the individuals you will be assisting and supporting in these programs. You must make sure the environment is safe for at all times. You must also take care of yourself. Working with people who are dependent on you for their needs can be stressful. This job can be very enjoyable, but can also be very demanding. Pace yourself. Ask for help. Take care not to do something that results in misunderstanding. Each of you must recognize your roles and responsibilities and uphold personal rights and respect which are due to each person we support as well as fellow employees, especially in regard to gender, race, age and cultural differences. It is recommended that each of you utilize the following guidelines to protect yourselves from any question of personal misconduct and to protect the people we provide supports to each day. The following guidelines are not intended to be a complete listing.

General Guideline DOs:
X DO: Conduct yourselves in a manner consistent with your position as staff & a role model.
X DO: Follow organizational policy and procedures.
X DO: Treat all people with respect and be open to and accepting of diversity and difference in people’s backgrounds, work styles and personal preferences.
X DO: RAISE ALL CONCERNS, issues or problems with your Administrator, On-Call Administrator or other Management Staff as soon as possible.
X DO: Make sure ANY CONCERNS regarding abuse, neglect or mistreatment are reported to your Administrator, On-Call Administrator AND another Management Staff member immediately. Someone is available 24 hours a day, seven days a week.
X DO: Remember your Mandated Reporter responsibilities.

General Guideline DON’Ts:
X DO NOT: Take the people we support to your home or any other private home, unless specifically arranged and approved by your Administrator.
X DO NOT: Engage in rough physical games, hold, kiss, cuddle, tickle or touch the individuals we support in an inappropriately and or culturally insensitive way.
X DO NOT: Use sexualized language or cursing, even as a joke.
X DO NOT: Practice favoritism when building relationships with the people we support.
X DO NOT: Intimidate through the use of unapproved discipline or redirection.
Verbal Interaction DOs:
X DO: Provide positive reinforcement
X DO: Encourage
X DO: Praise individuals for their abilities.
X DO: Use clear and positive statements regarding your expectations
X DO: Respond to instead of react to.

Verbal Interaction DON’Ts:
X DO NOT: Engage in name calling
X DO NOT: Curse to, at or in front of the people supported
X DO NOT: Tell off color jokes
X DO NOT: Shame (e.g., AIf you weren’t so lazy, I wouldn’t get so mad.@)
X DO NOT: Belittle (e.g., AYou really aren’t capable of understanding.@)
X DO NOT: Insult (e.g., AYou are so dumb, even a monkey could do this.@)
X DO NOT: Make threats (e.g., If you don’t finish what you are doing, your not going to get dinner.@)
X DO NOT: Make derogatory remarks (e.g., AYou are just retarded.@)
X DO NOT: Use harsh language that may frighten, threaten or humiliate the people supported
X DO NOT: Bully (e.g., AIf you don’t do it, I am going to make you do it.@)
X DO NOT: Ridicule (e.g., AYou will never amount to anything.@)
X DO NOT: Intimidate (e.g., AI can make you do this.@)
X DO NOT: Exclude (e.g., ignoring someone for long periods of time, socially or physically excluding or disregarding a person).
X DO NOT: Interact with others when you are angry.
X DO NOT: Engage in rumors or gossip.
X DO NOT: Engage in rude or uncivil behavior (e.g. slamming doors in angry response, making disparaging comments, purposefully blocking someone’s view or path, harshly criticizing, vulgar or obscene words)

Physical Interaction DOs:
X DO: Set limits with individuals who hang onto you or hug you often
X DO: Touch on the hand, shoulder or upper back when providing guidance
X DO: Provide needed physical contact in response to the needs of the people we support. Resistance or discomfort on the part of someone, must be respected. When assisting someone with personal hygiene, and it is necessary to touch private areas, as much as possible, use hand over hand instruction and always explain to the person what you are assisting them with.

Physical Interaction DON’Ts:
X DO NOT: Intentionally block someone’s view or path.
X DO NOT: Throw objects.
X DO NOT: Physically intimidate anyone (e.g., getting in someone’s face, obscene gestures, fist making, standing over a person in an intimidating fashion).
X DO NOT: Engage in physically touching in an intimidating, malicious or sexually harassing
manner.

X DO NOT: Physically hit, strike, restrain, bite, push, pull, shove or otherwise physically harm.

X DO NOT: Engage in physical affection which is inappropriate in nature (e.g., frequent hugs or long hugs).

X DO NOT: Ask, encourage or allow another person supported to engage in discipline or aggression toward another person.
Abuse: (Federal 483.420(a)(5) ICF/MR) The ill treatment, violation, revilement, malignment, exploitation and/or otherwise disregard of an individual, whether purposeful, or due to carelessness, inattentiveness or omission of the perpetrator. *(Note: definition is in the guideline language only and is not in regulatory language)*.

(Federal CMS Definition developed for all CMS provider categories including ICF/MR) The willful infliction of injury, unreasonable confinement, intimidation, or punishment with resulting physical harm, pain, or mental anguish.

(W&I 15610.07 California Mandated Reporter Law for Dependent Adults) Physical abuse, neglect, fiduciary abuse, abandonment, isolation, abduction, or other treatment with resulting physical harm or pain or mental suffering, or the deprivation by facility of custodial of goods or services that are necessary to avoid physical harm or mental suffering.

Exceptions to mandated reporting of the above defined abuse in W&I 15610.07 (found in W&I 15630(b)(2)(a): A mandated reporter who is a physician and surgeon, a registered nurse, or a psychotherapist shall not be required to report, as a suspected incident of abuse, as defined in Section 15610.07, an incident where all of the following conditions exist: (i) The mandated reporter has been told by a dependent adult that he or she has experienced behavior constituting physical abuse, abandonment, isolation, financial abuse, or neglect. (ii) The mandated reporter is not aware of any independent evidence that corroborates the statement that the abuse has occurred. (iii) The dependent adult has been diagnosed with a mental illness, defect, dementia, or is the subject of a court-ordered conservatorship because of a mental illness, defect, dementia. (iv) In the exercise of clinical judgment, the physician and surgeon, the registered nurse, or the psychotherapist, reasonably believes that the abuse did not occur.

And

W&I 15630(b)(3)(a): In a long term care facility, a mandated reporter shall not be required to report as a suspected incident of abuse, as defined in Section 15610.07, an incident where all of the following conditions exist: (i)The mandated reporter is aware that there is a proper plan of care. (ii) The mandated reporter is aware that the plan of care was properly provided or executed. (iii) A physical, mental, or medical injury occurred as a result of care provided pursuant to clause (i) or (ii). (iv) The mandated reporter reasonably believes that the injury was not the result of abuse.

Abandonment: (W&I 15610.05 California Mandated Reporter Law for Dependent Adults) The desertion or willful forsaking of a dependent adult by anyone having care or custody of that person under circumstances in which a reasonable person would continue to provide care and custody.

Abduction: (W&I 15610.06 California Mandated Reporter Law for Dependent Adults) The removal from California combined with the restraint from returning to California or a restraint from returning to California of any dependent adult who does not have the capacity to consent or is conserved and is removed or restrained from returning without consent of the conservator. *(Definition Summarized)*

Alleged Abuse: (As Defined by (Agency Name) Inc. policies and procedure manual): A report by any person to a representative of (Agency Name), Inc. of alleged abuse (as defined in the Welfare and Institutions Code Section 15630) toward a person receiving services when no convincing contradicting information and/or knowledge exists.

Assault: (California Penal Code 240): An unlawful attempt, coupled with a present ability, to commit a violent injury on the person of another.

Assault with a Deadly Weapon: (California Penal Code 245): An lawful attempt, coupled with a present ability to commit a violent injury on the person of another with a deadly weapon including but not limited to: a deadly weapon or instrument other than a firearm; a firearm; machine gun; or semiautomatic firearm. *(Definition Summarized)*
Assaultive Behavior: *(Title 22 84001(a)(4a) Children’s Group Home)*: Violent, physical actions which are likely to Cause immediate physical harm or danger to an individual or others. Verbal assault is not considered a form of assaultive behavior.

Automated External Defibrillator: *(Title 22 80001(a)(10) General CCF)*: a light-weight, portable device used to administer an electric shock through the chest wall to the heart. Built-in computers assess the patient’s heart rhythm to determine whether defibrillation (electric shock) is needed and then administer the shock. Audible and/or visual prompts guide the user through the process.

Battery: *(California Penal Code 242)*: Any willful and unlawful use of force or violence upon the person of another.

California Clearance: *(Title 22 80001(c)(1) General CCF)*: an individual has no felony or misdemeanor convictions reported by the California Department of Justice. However, the individual may have been arrested with on criminal conviction, convicted of a minor traffic offense or adjudicated as a juvenile.

Child Abuse: *(CA Penal Code 11165.6 California Mandated Reporter Law for Children)* a physical injury which is inflicted by other than accidental means on a child by another person. It is also the sexual abuse of a child or any act or omission proscribed by Section 273a (willful cruelty or unjustifiable punishment of a child) or 273(d) (unlawful corporal punishment or injury). It is also the neglect of a child or abuse in out-of-home care, as defined in this article. It does not mean a mutual affray between minors. It does not include an injury caused by reasonable and necessary force used by a peace officer acting within the course & scope of his or her employment as a peace officer.

Child Abuse Central Index: *(Title 22 80001(c)(7) General CCF)*: the California Department of Justice maintained statewide, multi-jurisdictional, centralized index of child abuse investigation reports. These reports pertain to alleged incidents of physical abuse, sexual abuse, mental/emotional abuse and/or severe neglect. Each child protection agency (police, sheriff, county welfare and probation departments) is required by law to forward to the California Department of Justice a report of every child abuse incident it investigates, unless an incident is determined to be unfounded.

Child Abuse Central Index Clearance: *(Title 22 80001(c)(8) General CCF)* the California Department of Justice has conducted a name search of the index and the search did not result in a match or the search resulted in a match but the California Department of Social services determined after an investigation that the allegation of child abuse or neglect was not substantiated.

Conviction: *(Title 22 80001(c)(19) General CCF)*: a criminal conviction in California or any criminal conviction of another state, federal, military or other jurisdiction, which if committed or attempted in California, would have been punishable as a crime in California.

Covered Individual: *(Social Security Patient Protection and Affordable Care Act)*: anyone who is an owner, operator, employee, manager, agent or contractor of the long term care facility.

Crime: *(Social Security Patient Protection and Affordable Care Act)*: a crime is identified by law of the applicable political subdivision where a LTC facility is located.

Criminal Record Clearance: *(Title 22 80001(c)(20) General CCF)*: an individual has a California and FBI clearance.

Client to Client abuse: *(Agency initiated definition - NOT IN LAW)* The willful physical motion or action, (e.g., hitting, slapping, punching, kicking, pinching, etc.) from one individual receiving services to another individual receiving services, by which bodily harm or trauma occurs and by which requires the provision of emergency medical treatment.

or

The willful physical motion or action, (e.g., hitting, slapping, punching, kicking, pinching, etc.) from one individual receiving services to another individual receiving services, by which bodily harm or trauma occurs not requiring emergency medical treatment and by which a pattern has been established and no interventions to protect the individual subjected to the abuse have been established by the facility.
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Discipline: (Title 22 84001(d)(1) Children's Group Home): a penalty assessed by the facility against a child for violation of the group home’s rules, commitment of illegal actions or damage to property.

Drugs to Manage Behavior: (Federal 483.450(b)(1)(iv) ICF/MR): medications prescribed and administered for purposes of modifying the maladaptive behavior of an individual. (Note: definition is in the guideline language only and is not in regulatory language).

Emergency Intervention: (Title 22 84001(e)(2) Children's Group Home): The justified use of early intervention and/or otherwise prohibited manual restraints to protect the child or others from harm.

Emergency Intervention Plan: (Title 22 84001(e)(3) Children's Group Home): a written plan which addresses how emergency intervention techniques will be implemented by the licensee in compliance with the requirements for Group Homes (Title 22 84322).

Emergency Intervention Staff Training Plan: (Title 22 84001(e)(4) Children's Group Home): a written plan which specifies the training provided to group home personnel regarding the use of emergency interventions, as specified for Group Homes [Title 22 84322(g)]. The emergency intervention staff training plan is a component of the Emergency Intervention Plan.

Exploitation: (Social Security Patient Protection and Affordable Care Act): the fraudulent or otherwise illegal, unauthorized, or improper act or process of an individual, including a caregiver or fiduciary, that uses the resources of an elder for monetary or personal benefit, profit, or gain, or that results in depriving an elder of rightful access to, or use of, benefits, resources, belongings, or assets.

False Imprisonment: (California CA Penal Code 236) the unlawful violation of the personal liberty of another.

Federal Bureau of Investigation Clearance: (Title 22 80001(f)(1) General CCF): an individual has no felony or misdemeanor convictions reported by the FBI. However, the individual may have been arrested with no criminal conviction, convicted of a minor traffic offense or adjudicated as a juvenile.

Fiduciary Abuse: (W&I 15610.30 California Mandated Reporter Law for Dependent Adults ) A situation in which one or both of the following apply: (1) a person who stands in a position of trust to the dependent adult takes, secretes or appropriates their money or property, to any wrongful use, or for any purpose not in the due and lawful execution of his or her trust; (2) a situation in which all the following happen (a) an individual or representative requests transfer or property held by someone who has care or custodial control (b) in spite of the request, the transfer does not take place and, (c) the person in control has committed acts in bad faith. (Definition Summarized)

Goods and services necessary to avoid physical harm or mental suffering: (W&I 15610.35 California Mandated Reporter Law for Dependent Adults ) include, but are not limited to, all of the following: (a) The provision of medical care for physical and mental health needs (b) Assistance in personal hygiene (c) Adequate clothing (d) Adequately heated and ventilated shelter (e) Protection from health and safety hazards (f) Protection from malnutrition, under those circumstances where the results include, but are not limited to, malnutrition and deprivation of necessities or physical punishment (g) Transportation and assistance necessary to secure any of the needs in subdivisions (a) to (f).

Immediate Danger: (Title 17 56002(a)(18) Regional Center Vendor): conditions which constitute an impending threat to the health and safety of a consumer(s) and which require immediate action by the regional center to safeguard the health and safety of the consumers in the facility.

Incident Report: (Title 22 84001(i)(1) Children’s Group Home) a written report required by the Department (DSS) to report incidents as specified in Title 22 80061 and 84061.

Injuries of Unknown Source: (CMS Ref:S&C-05-09 ICF/MR) - an injury should be classified as an “injury of unknown source” when both of the following conditions are met:

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* The source of the injury was not observed by any person or the source of the injury could not be explained by the person with the injury; and.
* The injury is suspicious because of the extent of the injury or the location of the injury (e.g., the injury is located in an area not generally vulnerable to trauma) or the number of injuries observed at one particular point in time or the incidence of injuries over time.

Isolation: *(W&I 15610.43 California Mandated Reporter Law for Dependent Adults)* Any of the following*:
- acts intentionally committed for the purpose of preventing, and that do serve to prevent an individual from receiving his or her mail or telephone calls
- a facility representative telling a caller or prospective visitor that an individual is not present, or does not wish to talk with the caller, or does not wish to meet with the visitor where the statement is false, is contrary to the express wishes of the individual, whether he or she is competent or not and is made for the purpose of preventing the individual from having contact with family, friends, or concerned persons.
- false imprisonment (penal code)
- physical restraint of an individual for the purpose of preventing the individual from meeting with visitors *(Definition Summarized)*

* These do not apply if they are performed pursuant instructions of a physician who is licensed & caring for the individual and the instructions are part of the individual’s medical care or if they are performed in response to a reasonably perceived threat of danger to property or physical safety.

Manual Restraint: *(Title 22 84001(m)(1) Children’s Group Home)* the use of hands-on or other physically applied technique to physically limit the freedom of movement of a child. Techniques include but are not limited to, forced escorts; holding; prone restraints; or other containment techniques, including protective separation.

Manual Restraint Plan: *(Title 22 84001(m)(2) Children’s Group Home)* a written plan which addresses how manual restraints will or will not be implemented by the licensee in compliance with the requirements specified in Group Home regulations *(Title 22 84322(e&f))*. The manual restraint plan is a component of the emergency interventions plan.

Mechanical Restraint: *(Title 22 84001(m)(3) Children’s Group Home)* any physical device or equipment which restricts the movement of the whole or a portion of a child’s body, including, but not limited to, handcuffs, restraining sheets, restraining chairs, leather cuffs and belts or any other similar method.

Medical Treatment Beyond First Aid: *(Agency Initiated Definition - NOT IN LAW)* The provision of medical treatment by a medically licensed individual which extends beyond first aid procedures as outlined by the American Red Cross.

Mental Suffering: *(W&I 15610.53 California Mandated Reporter Law for Dependent Adults)* Fear, agitation, confusion, severe depression, or other forms of serious emotional distress that is brought about by forms of intimidating behavior, threats, harassment, or by deceptive acts performed or false or misleading statements made with malicious intent to agitate, confuse, frighten, or cause severe depression or serious emotional distress of the elder or dependent adult.

Mistreatment: *(Federal 483.420(d)(1) ICF/MR)*: Behavior/facility practices that result in any type of individual exploitation such as financial, sexual or criminal. *(Note: in guideline language only and not in regulatory language)*.

Neglect: *(Federal 483.420(d)(1) ICF/MR)*: The failure to provide goods or services necessary to avoid physical or psychological harm. *(Note: in guideline language only and not in regulatory language)*.

*(Social Security Patient Protection and Affordable Care Act)*: failure of a caregiver or fiduciary to provide the goods or services that are necessary to maintain the health or safety of an elder, or self neglect (see definition).
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Neglect: (con't): (W&I The California Mandated Reporter Law for Dependent Adults ) The negligent failure of anyone having care or custody to exercise the degree of care which a reasonable person in a like position would exercise. This includes all of the following:
- failure to assist in personal hygiene or to provide food/clothing/shelter
- failure to provide medical care for physical and mental health needs
- failure to protect from health and safety hazards
- failure to prevent malnutrition.

Neglect: Children Only - (CA Penal Code 11165.2 California Mandated Reporter Law for Children ) The negligent treatment or the maltreatment of a child by a person responsible for the child’s welfare under circumstances indicating harm or threatened harm to the child’s health or welfare. The term includes both acts and omissions on the part of the responsible person.

Severe Neglect (CA Penal Code 11165.2 California Mandated Reporter Law for Children): means the negligent failure of a person having care or custody to protect the child from severe malnutrition or medically diagnosed non-organic failure to where any person having care or custody willfully causes or permits the person or health of the child to be placed in a situation such that his or her person or health is endangered, including the intentional failure to provide adequate food, clothing, shelter, or medical care.

General Neglect (CA Penal Code 11165.2 California Mandated Reporter Law for Children) is the failure of a person having care or custody of a child to provide adequate food clothing, shelter, medical care, or supervision where no physical injury to the child has occurred.

Physical Abuse: (Federal 483.420(a)(5) ICF/MR): Any physical motion or action, (e.g., hitting, slapping, punching, kicking, pinching, etc.) by which bodily harm or trauma occurs. It includes use of corporal punishment as well as the use of any restrictive, intrusive procedure to control inappropriate behavior for the purposes of punishment. (Note: in guideline language and not in regulatory language).

(W&I 15610.63 California Mandated Reporter Law for Dependent Adults) Any of the following:
- assault (penal code Section 240)
  - battery (penal code Section 242)
  - assault with a deadly weapon (penal code Section 245)
  - unreasonable physical constraint, or prolonged or continual deprivation of food or water
  - sexual assault (penal code Sections 243.4, 261, 264.1, 262, 285, 286, 288a, 289)
- use of a physical or chemical restraint or psychotropic medication under any of the following conditions: (1) punishment, (2) for a period beyond that for which the medication was ordered by a physician giving care to the individual or (3) for any purpose not authorized by the physician

Physical Restraining Device: (Title 22 84001(p)(1) Children’s Group Home) any physical or mechanical device, material, or equipment attached or adjacent to a child’s body which the child cannot remove easily and which restricts the child’s freedom of movement. Restraining devices include leg restraints, arm restraints, soft ties or vests, wheel chair safety bars, and full length bedrails.

Psychological Abuse: (Federal 483.420(a)(5) ICF/MR): Humiliation, harassment, and treats of punishment or deprivation, sexual coercion, intimidation, whereby individuals suffer psychological harm or trauma. (Note: definition is in the guideline language only and is not in regulatory language).

Protective Separation: (Title 22 84001(p)(2) Children’s Group Home): the voluntary or involuntary removal of a child for the purpose of protecting the child from injuring himself, herself or others.

Protective Separation Room: (Title 22 84001(p)(3) Children’s Group Home): an unlocked room specifically designated and designed for the involuntary removal of a child for the purpose of protecting the child from injuring himself, herself or others.

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Reasonable Suspicion: *(W&I 15610.65 California Mandated Reporter Law for Dependent Adults)*: An objectively reasonable suspicion that a person would entertain, based upon facts that could cause a reasonable person in a like position, drawing when appropriate upon his or her training and experience, to suspect abuse.

Self Neglect: *(Social Security Patient Protection and Affordable Care Act)*: an adult’s inability, due to physical or mental impairment or diminished capacity, to perform essential self-care tasks including, (1) obtaining essential food, clothing, shelter, and medical care; (b) obtaining goods and services necessary to maintain physical health, mental health, or general safety; or (c) managing one’s own financial affairs.

Serious Bodily Injury: *(Social Security Patient Protection and Affordable Care Act)*: an injury involving extreme physical pain; involving protracted loss or impairment of the function of a bodily member, organ, or mental faculty; or requiring medical intervention such as surgery, hospitalization, or physical rehabilitation.

Sexual Abuse (Child) *(CA Penal Code 11165.1 California Mandated Reporter Law for Children)* sexual assault or sexual exploitation as defined by the following: (a) Sexual assault means conduct in violation of one or more of the following sections: 261 (rape), 261.5 (statutory rape), 264.1 (rape in concert), 285 (incest), 286 (sodomy), 288 (lewd or lascivious acts), 288a (oral copulation), 289 (penetration of a genital or anal opening by a foreign object), or 647.6 (child molestation); (b) conduct described as sexual assault includes but is not limited to all of the following: (1) any penetration however slight of the vagina or anal opening of one person by the penis of another person; (2) any contact between the genitals of anal opening of one person and the mouth or tongue of another person; (3) any intrusion by one person into the genitals or anal opening of another person, including the use of any object for this purpose except acts performed for a valid medical purpose; (4) the intentional touching of the genitals or intimate parts (breasts, genital area, groin, inner thighs, and buttocks) or the clothing covering them, of a child, or of the perpetrator by a child, for purposes of sexual arousal or gratification (exceptions of normal caretaker responsibilities; interaction, demonstrations of affection, or valid medical purpose); (5) the intentional masturbation of the perpetrator’s genitals in the presence of a child. (c) Sexual exploitation refers to any of the following: (1) conduct involving matter depicting a minor engaged in obscene acts in violation of Section 311.2 (preparing, selling, or distributing obscene matter) or Section 311.4 (employment of minor to perform obscene acts); (2) any person who knowingly promotes, aids, or assists, employs, uses, persuades, induces, or coerces a child. Or any person responsible for a child’s welfare, who knowingly permits or encourages a child to engage in, or assist others to engage in, prostitution or a live performance involving obscene sexual conduct, or to either pose or model alone or with others for purposes of preparing a film, photograph negative, slide, drawing, painting, or other pictorial depiction sexual Abuse (child) involving obscene sexual conduct; (3) any person who depicts a child in, or who knowingly develops, duplicates, prints, or exchanges, any film, photograph, video tape, negative, or slide in which a child is engaged in a act of obscene sexual conduct. *(Definition Summarized in part)*.

Sexual Assault: Referenced in the *W&I Code California Mandated Reporter Law for Dependent Adults* under Physical Abuse; Defined in the Penal Code Sections 243.4, 261, 264.1, 262, 285, 286, 288a, 289

Section 243.4: Sexual Battery Any person who touches (physical contact with another person, whether accomplished directly or through clothing) an intimate part (sexual organ, anus, groin, or buttocks of and person and the breast of a female) of another person while that person is (1) unlawfully restrained or is (2) institutionalized for medical treatment and who is seriously disabled or is medically incapacitated, if the touching is against the will of the person touched and is for the purpose of sexual arousal, sexual gratification, or sexual abuse is guilty of sexual battery. Any person who, for the purpose of sexual arousal, sexual gratification, or sexual abuse, causes another, against that person’s will to masturbate or touch an intimate part of either of these persons or a third person while that person is (1) unlawfully restrained or is (2) institutionalized for medical treatment and who is seriously disabled or is medically incapacitated is guilty of sexual battery.
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Sexual Assault: Any person who touches an intimate part of another person, if the touching is against the will of the person touched, and is for the specific purpose of sexual arousal, sexual gratification, or sexual abuse, is guilty of misdemeanor sexual battery. (Definition Summarized)

Section 261: Rape Rape is an act of sexual intercourse accomplished with a person not the spouse of the perpetrator, under any of the following circumstances: (1) when the person is incapable of giving legal consent because of a mental disorder, developmental or physical disability and this is known or reasonably known by the person committing the act; (2) where it is accomplished against a person's will by means of force, violence, duress, menace, or fear of immediate and unlawful bodily injury on the person or another; (3) where a person is prevented from resisting by any intoxicating or anesthetic substance, or any controlled substance, and this condition was known, or reasonably should have been known by the accused; (4) where a person is at the time unconscious of the nature of the act and this is known to the accused; (5) where a person submits under the belief that the person committing the act is the victim's spouse, and this belief is induced by any artifice, pretense, or concealment practiced by the accused with the intent to induce this belief; (6) where the act is accomplished against the victim's will by threatening to retaliate in the future against the victim or any other person, and there is a reasonable possibility that the perpetrator will execute the threat; (7) where the act is accomplished against the victim's will by threatening to use the authority of a public official to incarcerate, arrest, or deport the victim or another, and the victim has a reasonable belief that the perpetrator is a public official. (Definition Summarized)

Section 264.1: Aiding and abetting Aiding and abetting voluntarily in concert with another person by force or violence and against the will of the victim as in regards to penal codes 261, 262, 286, or 289. (Definition Summarized)

Section 262: Rape by a Spouse: Rape of a person who is the spouse of the perpetrator is an act of sexual intercourse accomplished under any of the following circumstances: (1) where it is accomplished against a person's will by means of force, violence, duress, menace, or fear of immediate and unlawful bodily injury on the person or another; (2) where a person is prevented from resisting by any intoxicating or anesthetic substance, or any controlled substance and this condition was known or reasonable should have been known, by the accused; (3) where a person is at the time unconscious of the nature of the act and this is known to the accused; (4) where the act is accomplished against the victim's will by threatening to retaliate in the future against the victim or any other person, and there is a reasonable possibility that the perpetrator will execute the threat; (5) where the act is accomplished against the victim's will by threatening to use the authority of a public official to incarcerate, arrest, or deport the victim or another, and the victim has a reasonable belief that the perpetrator is a public official. (Definition Summarized)

Section 285: Incest: Persons being within the degrees of consanguinity within which marriages are declared by law to be incestuous and void, who intermarry with each other, or who commit fornication or adultery with each other. (Definition Summarized)

Section 286: Sodomy: Sodomy is sexual conduct consisting of contact between the penis of one person and the anus of another person. Any sexual penetration, however slight, is sufficient to complete the crime of sodomy when (1) the victim is a minor; (2) when the act is accomplished against the victim's will by means of force, violence, duress, menace, or fear of immediate and unlawful bodily injury on the victim or another person; (3) where the act is accomplished against the victim's will by threatening to retaliate in the future against the victim or any other person, and there is a reasonable possibility that the perpetrator will execute the threat; (4) where a person is at the time unconscious of the nature of the act and this is known to the accused; (5) when the person is incapable of giving legal consent because of a mental disorder, developmental or physical disability and this is known or reasonably known by the person committing the act; (6) where a person is prevented from resisting by any intoxicating or anesthetic substance, or any controlled substance and this condition was known or reasonable should have been known, by the accused; (7) where a person submits under the belief that the person committing the act is the victim's spouse, and this belief is induced by any artifice, pretense, or concealment practiced by the accused with the intent to induce this belief; (8) where the act is accomplished against the victim's will by threatening to use the authority of a public official to incarcerate, arrest, or deport the victim or another, and the victim has a reasonable belief that the perpetrator is a public official. (Definition Summarized)
Special Incident: [Title 17 54327(b)(1)&(2) Regional Center Vendors]:

(1) The following if they occurred during the time the consumer was receiving services and supports from any vendor or long-term health care facility:

(A) The consumer is missing and the vendor or long-term health care facility has filed a missing persons report with a law enforcement agency;

(B) Reasonably suspected abuse/exploitation including:
(1) Physical;
(2) Sexual;
(3) Fiduciary;
(4) Emotional/mental; or
(5) Physical and/or chemical restraint.

(C) Reasonably suspected neglect including failure to:
(1) Provide medical care for physical and mental health needs
(2) Prevent malnutrition or dehydration;
(3) Protect from health and safety hazards; or
(4) Assist in personal hygiene or the provision of food, clothing or shelter.

(5) Exercise the degree of care that a reasonable person would exercise in the position of having the care and custody of an elder or a dependent adult.

(D) A serious injury/accident including:
(1) Lacerations requiring sutures or staples;
(2) Puncture wounds requiring medical treatment beyond first aid;
(3) Fractures;
(4) Dislocations;
(5) Bites that break the skin and require medical treatment beyond first aid;
(6) Internal bleeding requiring medical treatment beyond first aid;
(7) Any medication errors;
(8) Medication reactions that require medical treatment beyond first aid; or
(9) Burns that require medical treatment beyond first aid.

(E) Any unplanned or unscheduled hospitalization due to the following conditions:
(1) Respiratory illness, including but not limited to, asthma; tuberculosis; and chronic obstructive pulmonary disease;
(2) Seizure related;
(3) Cardiac-related, including but not limited to, congestive heart failure; hypertension; and angina;
(4) Internal infections, including but not limited to, ear, nose and throat; gastrointestinal; kidney; dental; pelvic; or urinary tract;
(5) Diabetes, including diabetes-related complications;
(6) Wound/skin care, including but not limited to, cellulitis and decubitus;
(7) Nutritional deficiencies, including but not limited to, anemia and dehydration; or
(8) Involuntary psychiatric admission.

(2) The following incidents regardless of when or where they occurred:

(A) Death of any consumer, regardless of cause;

(B) The consumer is the victim of a crime including the following:
(1) Robbery, including theft using a firearm, knife, or cutting instrument or other dangerous weapons or methods which force or threaten a victim;
(2) Aggravated assault, including a physical attack on a victim using hands, fist, feet, or a firearm, knife or cutting instrument or other dangerous weapon;
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Special Incident Con’t: (3) Larceny, including the unlawful taking, carrying, leading, or riding away of property, except for motor vehicles, from the possession or constructive possession of another person;
(4) Burglary, including forcible entry; unlawful non-forcible entry; and, attempted forcible entry of a structure to commit a felony or theft therein;
(5) Rape, including rape and attempts to commit rape.

Special Incident Report: (Title 17 54302(a)(61) Regional Center Vendors): The documentation prepared by vendor staff or long-term care facility staff detailing a special incident and provided to the Regional Center.

Suspected Abuse: (As Defined by (Agency Name) Inc. policies and procedure manual): A report by any person to a representative of (Agency Name), Inc. of suspected abuse (as defined in the Welfare and Institutions Code Section 15630) toward a person receiving services when no convincing contradicting information and/or knowledge exists.

Threat: (Federal 483.340(a)(5) ICF/MR): Any condition/situation which could cause or result in severe, temporary or permanent injury or harm to the mental or physical condition of individual, or in their death. (Note: definition is in the guideline language only and is not in regulatory language).

Unusual Occurrence: (Title 22 73924 ICF/DD-N) Occurrences such as, but not limited to, epidemic outbreaks of any disease, prevalence of communicable disease, whether or not such communicable disease is required to be reported by Title 17, California Code of Regulations Section 2500, or infestation by parasites or vectors, poisonings, fires, major accidents, deaths from unnatural causes or other catastrophes which threaten the safety or health of clients, personnel or visitors or which the facility reports to its insurer are deemed to be unusual occurrences.

(Title 2276551 ICF/DD) Occurrences such as epidemic outbreaks, poisonings, fires, major accidents, deaths from unnatural causes or other catastrophes and unusual occurrences which threaten the welfare, safety or health of clients, personnel or visitors.

(Title 22 76923 ICF/DD-H) Occurrences such as but not limited to, epidemic outbreaks of any disease, prevalence of communicable disease, whether or not such communicable disease is required to be reported by Title 17, California Administrative Code, Section 2500 or infestation by parasites or vectors, poisonings, fires, major accidents, deaths from unnatural causes or other catastrophes which threaten the safety or health of clients, personnel or visitors are deemed to be unusual occurrences.

Verbal Abuse: (Federal 483.420(a)(5) ICF/MR) Any use of oral, written or gestured language by which abuse occurs. (Note: definition is in the guideline language only and is not in regulatory language).

Current as of 8-1-11
Employee Information for the Implementation of our System to Prevent Crime, Abuse, Neglect and Mistreatment

On this date __________________________, I have received (Agency Name)'s Employee Guide for Implementation of the System to Prevent Crime, Abuse, Neglect and Mistreatment. I have also been given a copy of Appendix A outlining Appropriate & Inappropriate Verbal and Physical Interactions (two pages) and the Appendix B containing definitions (nine pages) regarding crime/abuse/neglect/mistreatment. I understand I am a Mandated Reporter and a Covered Individual. I understand I must, as soon as possible, report any crime, criminal abuse and neglect committed against a person receiving supports from (Agency Name) to police and/or the ombudsman and to the Department of Public Health if I work in a DPH licensed facility. I understand failure to do so is a crime. I also understand I have to inform (Agency Name)' management staff (e.g. my Administrator). I understand (Agency Name) does not tolerate criminal activity, abuse, neglect or mistreatment and this agency clearly expects me to immediately report any crime, abuse or neglect in accordance with the law, and also to management staff named in this guide. I understand that communicating information about any observed or suspected incident of crime/abuse/neglect/mistreatment to only my fellow direct care employees does not meet the standards of reporting outlined in this guide. Definitions found in the Appendix of Definitions have been reviewed, in detail with me. I have been given guidelines which will assist me in engaging in appropriate verbal and physical interactions with the people I have been hired to support. I understand that if I am unsure of or uneasy about anything I have observed or heard, there is an (Agency Name) management staff on call and available 24 hours a day, seven days a week to talk to. I understand there is no bad time to report or to talk with someone about these types of events. I understand there is NO excuse for waiting to report. I understand I am personally responsible for any failure on my part to implement (Agency Name)' established procedures as the agency's expectations have clearly been communicated to me.

___________________________________________ ________________________
Print Name        Print Date

________________________________________________________________________
Signature

(Agency Name), Inc. FAQs Employee responsibilities for reporting abuse, neglect and mistreatment