

TITLE: PREVENTION OF ABUSE AND NEGLECT PROGRAM

POLICY 22.02

Authority:

RCW 74.34

RCW 18.130.180 WAC 246.16.245

Reference:

Trouves Policy - Abuse and Neglect Reporting

PURPOSE:

This policy outlines Trouves Health Care's prevention of abuse and neglect program.

SCOPE:

This policy applies to all Trouves Health Care employees.

DEFINITIONS:

Abandonment: Action or inaction by a person or entity with a duty of care for a vulnerable adult that leaves the vulnerable person without the means or ability to obtain necessary food, clothing, shelter, or health care <u>RCW 74.34.020(1)</u>.

Abuse: The willful action or inaction that inflicts injury, unreasonable confinement, intimidation, or punishment on a vulnerable adult. In instances of abuse of vulnerable adult who is unable to express or demonstrate physical harm, pain, or mental anguish, the abuse is presumed to cause physical harm, pain, or mental anguish. Abuse includes sexual abuse, mental abuse, physical abuse, and personal exploitation of a vulnerable adult, and improper use of restraint against a vulnerable adult which have the following meanings:

(a) **Sexual abuse** means any form of nonconsensual sexual conduct, including but not limited to unwanted or inappropriate touching, rape, sodomy, sexual coercion, sexually explicit photographing, and sexual harassment. Sexual abuse also includes any sexual conduct between a staff person, who is not also a resident or client, of a facility or a staff person of a program authorized under RCW 71A.12, and a vulnerable adult living in that facility or receiving service from a program authorized under RCW 71A.12, whether or not it is consensual.

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- (b) **Physical abuse** means the willful action of inflicting bodily injury or physical mistreatment. Physical abuse includes, but is not limited to, striking with or without an object, slapping, pinching, choking, kicking, shoving, or prodding.
- (c) **Mental abuse** means a willful verbal or nonverbal action that threatens, humiliates, harasses, coerces, intimidates, isolates, unreasonably confines, or punishes a vulnerable adult. Mental abuse may include ridiculing, yelling, or swearing.
- (d) **Personal exploitation** means an act of forcing, compelling, or exerting undue influence over a vulnerable adult causing the vulnerable adult to act in a waythat is inconsistent with relevant past behavior, or causing the vulnerable adult to perform services for the benefit of another.
- (e) **Improper use of restraint** means the inappropriate use of chemical, physical, or mechanical restraints for convenience or discipline or in a manner that: (i) Is inconsistent with federal or state licensing or certification requirements for facilities, hospitals, or programs authorized under RCW 71A.12; (ii) is not medically authorized; or (iii) otherwise constitutes abuse under RCW 74.34.025.

Chemical restraint: The administration of any drug to manage a vulnerable adult's behavior in a way that reduces the safety risk to the vulnerable adult or others, has the temporary effect of restricting the vulnerable adult's freedom of movement, and is not standard treatment for the vulnerable adult's medical or psychiatric condition.

The Department: Department of Social and Health Services

Financial exploitation: The illegal or improper use, control over, or withholding of the property, income, resources, or trust funds of the vulnerable adult by any person or entity for any person's or entity's profit or advantage other than for the vulnerable adult's profit or advantage. "Financial exploitation" includes, but is not limited to:

(a) The use of deception, intimidation, or undue influence by a person or entity in a position of trust and confidence with a vulnerable adult to obtain or use the property, income, resources, or trust funds of the vulnerable adult for the benefit of a person or entity other than the vulnerable adult;



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- (b) The breach of a fiduciary duty, including, but not limited to, the misuse of a power of attorney, trust, or a guardianship appointment, that results in the unauthorized appropriation, sale, or transfer of the property, income, resources, or trust funds of the vulnerable adult for the benefit of a person or entity other than the vulnerable adult; or
- (c) Obtaining or using a vulnerable adult's property, income, resources, or trust funds without lawful authority, by a person or entity who knows or clearly should know that the vulnerable adult lacks the capacity to consent to the release or use of his or her property, income, resources, or trust funds.

Mandated reporter: An employee of the department (i.e., DSHS); law enforcement officer; social worker; professional school personnel; individual provider; an employee of a facility; an operator of a facility; an employee of a social service, welfare, mental health, adult day health, adult day care, home health, home care, or hospice agency; county coroner or medical examiner; Christian Science practitioner; or health care provider subject to chapter <u>18.130 RCW</u>.

Neglect: (a) a pattern of conduct or inaction by a person or entity with a duty of care that fails to provide the goods and services that maintain physical or mental health of a vulnerable adult, or that fails to avoid or prevent physical or mental harm or pain to a vulnerable adult; or (b) an act or omission by a person or entity with a duty of care that demonstrates a serious disregard of consequences of such a magnitude as to constitute a clear and present danger to the vulnerable adult's health, welfare, or safety, including but not limited to conduct prohibited under <u>RCW 9A.42.100</u>.

Vulnerable adult: A person who:

- (a) Is 60 years of age or older who has the functional, mental, or physical inability to care for himself or herself; or
- (b) Is Found incapacitated under chapter 11.88 RCW; or
- (c) Has a developmental disability as defined under RCW 71A.10.020; or
- (d) Admitted to any facility; or
- (e) Is Receiving services from home health, hospice or home care agencies licensed or required to be licensed under chapter RCW 70.127; or
- (f) Is Receiving services from an individual provider; or
- (g) Who self-directs his or her own care and receives services from a personal aide



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under chapter RCW 74.39.

POLICY:

- A. Trouves Health Care seeks to ensure all residents are free from all form of abuse, neglect, chemical restraint, financial exploitation or harassment. Trouves does not tolerate abuse, neglect, chemical restraint, exploitation or harassment.
- B. Trouves takes all allegations of resident abuse, neglect, chemical restraint, exploitation or harassment seriously. Actions are immediately taken to provide resident safety and thoroughly investigate every allegation.
- C. Trouves program to prevent abuse and neglect include these elements:
 - 1. Prevention
 - 2. Training
 - 3. Identification
 - 4. Screening
 - 5. Protecting
 - 6. Reporting and Responding
 - 7. Investigating

PROCEDURE:

Prevention

- A. Trouves provides residents and employees information on how to report concerns of abuse, neglect, chemical restraint, exploitation, harassment or other issues without fear of retaliation.
- B. Resident rights are provided to the resident upon admission and annually thereafter.
- C. Employees attend training on the abuse and neglect program, mandatory reporting and Trouves policies and procedures for report abuse, upon hire and annually thereafter. The training includes the legal reporting requirements and notification that

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failure to report may result in disciplinary action and legal action. Failure to report is a gross misdemeanor under RCW 74.34.

- D. Trouves posts information on each hall and appropriate locations around the facility to remind employees of their legal obligation to report patient abuse, neglect or exploitation and how to report if they believe a crime has been committed against a resident.
- E. Trouves evaluates the physical environment each shift to ensure the facility physical environment does not promote abuse and/or neglect.

Training

- A. Employees are trained on how to prevent, identify, protect, and report abuse, neglect, abandonment, and exploitation of residents, during New Employee Orientation.
- B. Employees receive annual training on prevention, identification, protection, and reporting allegations of patient abuse and neglect.
- C. Abuse and Neglect prevention posters are located in halls and other predominate places around the facility to assist in a quick reference of their legal obligation to report. This include RCW 70.124.100 regarding protection for whistleblowers and patients.

Identify

- A. Trouves identify events and occurrences that may constitute or contribute to abuse and neglect.
- B. Every report of injury or neglect is analyzed for trends and patterns that may suggest a possibility of abuse, neglect, chemical restraint, or financial exploitation.
- C. Resident comment boxes are checked daily by designated staff and immediately forwarded to the Quality Department for review.
- D. Trouves has developed a variety of tools to assist in the identification of abuse and neglect, including:
 - 1. Abuse and Neglect Reporting Line;



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- 2. Resident Comment form;
- 3. The distribution of Resident rights which educates residents about identification and reporting of abuse; and
- 4. Abuse and Neglect posters located throughout the facility and on every hall to identify and report abuse and neglect.

Screening

- A. Trouves uses background checks, professional license, and reference checks in an effort to screen potential employees for a history of abuse, neglect or mistreatment. This screening applies to all newly hired employees, rehired employees, reinstated employees, volunteers, students and contractors.
 - 1. Trouves conducts background checks in accordance with <u>RCW 43.43.832</u> and WAC 388.78A.2461
 - 2. Screens professional/licensed/certified applicants using the online Washington State Department of Health (DOH) Health Provider Credential Search at the time of hire. Out of state credentialing agencies will be checked as appropriate. Credentials will be reviewed annually to ensure they remain valid.
- B. Trouves also used Incident Reports and the Abuse and Neglect Hotline calls as screening tools for potential abuse, neglect, chemical restraint, or financial exploitation.

Protect

- A. Trouves has zero tolerance for the mistreatment of residents.
- B. Any employee who witnesses or has reason to suspect an incident of resident abuse, abandonment, financial exploitation, or neglect has occurred must follow Trouves Policy Abuse and Neglect Reporting. First ensuring the resident is safe.



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- C. During any investigation into an allegation of abuse or neglect, the employee alleged to have committed the mistreatment will be given alternative work assignments outside of resident care areas.
- D. An employee alleged to have committed abuse, abandonment, financial exploitation, or neglect of a patient will be immediately investigated in accordance with state law.
- E. When misconduct is substantiated in regard to abuse, neglect, abandonment, and/or financial exploitation of a resident, the employee is subject to immediate dismissal and prosecution to the full extent of the law.

Investigate

A. Trouves will provide timely, thorough and objective investigations of all allegations of mistreatment. As well, as comply will all investigations of the Department.

Report and Respond

- A. Trouves establishes a culture of employees reporting all allegations of mistreatment through policy, procedure, federal and state law.
- B. All Trouves employees, interns, students, volunteers, visitors, and contractors will adhere to the reporting requirements and process described in Trouves Abuse and Neglect Reporting Policy.

EXCEPTIONS:

No exceptions to this policy may be granted without the prior written approval of the Director.

SUPERCEDES:

None