

6002-G ABUSE AND NEGLECT

REVISION DATE: 9/4/2019, 11/29/2017, 10/1/2014

EFFECTIVE DATE: July 31, 1993

REFERENCES: A.R.S. §§ 36-561(B), 13-3620, 46-454, 46-451.

Definitions

A. Abuse (any of the following) -

1. Intentional infliction of physical harm
2. Injury caused by negligent acts or omissions
3. Unreasonable confinement or unlawful imprisonment
4. Sexual abuse or sexual assault.

B. Abusive treatment (any of the following) -

1. Physical abuse by inflicting pain or injury to a member. This includes hitting, kicking, pinching, slapping, pulling hair, or any sexual abuses
2. Emotional abuse which includes ridiculing or demeaning a member, making derogatory remarks to an member or cursing directed towards an member
3. Programmatic abuse which is the use of an aversive stimuli technique that has not been approved as part of such person's Individual Support Plan (ISP) and which is not contained in the rules and regulations adopted pursuant to A.R.S. § 36-561(B). This includes isolation or restraint of a member.

C. Child, youth or juvenile - a member who is under the age of eighteen years.

D. Exploitation: - the illegal or improper use of an incapacitated or vulnerable adult or his/her resources for another's profit or advantage.

E. Incapacity: - an impairment by reason of mental illness, mental deficiency, mental disorder, physical illness or disability, advanced age, chronic use of drugs, chronic intoxication, or other cause to the extent that the person lacks sufficient understanding or capacity to make or communicate informed decisions concerning his/her person.

F. Neglect: - the deprivation of food, water, medication, medical services, shelter, cooling, heating, or other services necessary to maintain minimum physical or mental health. Neglect also means any of the following:

1. Intentional lack of attention to physical needs of members such as toileting, bathing, meals, and safety.
2. Intentional failure to report health problems or changes in health condition to immediate supervisor or nurse.
3. Sleeping on duty or abandoning work station.
4. Intentional failure to carry out a prescribed treatment plan for a member.

- G. Physical injury - the impairment of physical condition, including, but not limited to any of the following: skin bruising, pressure sores, bleeding, failure to thrive, malnutrition, dehydration, burns, fracture of any bone, subdural hematoma, soft tissue swelling, injury to any internal organ, or any physical condition which imperils health or welfare.
- H. Serious physical injury - physical injury which creates a reasonable risk of death or which causes serious or permanent disfigurement, serious impairment of health or loss, or protracted impairment of the function of any bodily organ or limb.
- I. Vulnerable adult - a member who is eighteen years of age or older who is unable to protect himself/herself from abuse, neglect, or exploitation by others because of a mental or physical impairment.

Department of Child Safety

When a Support Coordinator suspects abuse or neglect, as a mandated reporter, the Support Coordinator must immediately report to Department of Child Safety (DCS). Additionally, any allegation of abuse or neglect must be reported in accordance with A.R.S. §13-3620 as outlined below. Upon reporting, the Support Coordinator should provide sufficient information regarding the alleged abuse and/or neglect to allow the DCS worker to set the appropriate priority to the case. The Support Coordinator must cooperate during investigations, and follow-up as required.

Reports made regarding American Indians will be in accordance with tribal procedures. Reports made to DCS must contain all of the following:

- A. The names and addresses of the minor and his/her parents or person or persons having custody of such minor.
- B. The minor's age, and the nature, and extent of his/her injuries or physical neglect, including any evidence of previous injuries or physical neglect.
- C. Any other information that such person believes might be helpful in establishing the cause of the injury or physical neglect.

Reports must be made to DCS, within 24 hours, per instructions provided on the DCS website.

Incident Report

When the Support Coordinator reports alleged abuse or neglect to DCS, the Support Coordinator must complete an *Incident Call Report (DDD-1746A-FORFF)* and submit to the District Incident Report mailbox. The District will ensure the DCS Program Manager receives an information copy of all IRs on DCS referrals from Division staff.

The list of persons with a duty to report a reasonable belief that a minor has been the victim of abuse or neglect is expanded to include any person who is employed as the immediate or next higher level supervisor to or administrator of a person who has a duty to report (other than the child's parent or guardian) and who develops the reasonable belief in the course of the supervisor's or administrator's employment. If the supervisor or administrator reasonably believes that the report has been made by the person with a duty to report, the supervisor or administrator is not required to report.

When DCS staff reports alleged abuse or neglect made by someone other than Division staff, the Support Coordinator will complete and forward an Incident Call Report.

Investigative Procedures

It is the responsibility of DCS to determine whether an investigation of the allegation is necessary and to proceed with the investigation. The Support Coordinator must receive the results of the investigative decision by DCS. If, subsequent to an investigation, DCS opens a case, the Support Coordinator must participate in a team staffing to develop a collaborative plan.

Working with Department of Child Safety

The Support Coordinator must work as expeditiously as possible with the DCS worker to resolve any concerns regarding a report or investigation made to DCS.

Whenever possible, the Support Coordinator must meet in person with the DCS worker to review all aspects of the report including any information the Support Coordinator could provide regarding important historical information.

The Support Coordinator must notify his/her immediate supervisor whenever issues cannot be quickly and satisfactorily resolved at the Support Coordination level. Supervisory and/or management staff must immediately pursue the steps necessary to resolve the issues.

Adult Protective Services

In accordance with A.R.S. §46-454, as a mandated reporter, the Support Coordinator or other Division staff must immediately report any suspicions/allegations of abuse, neglect or exploitation of an adult to Adult Protective Services (APS). APS responds to allegations of abuse, neglect, or exploitation according to the following requirements the person:

- A. Is 18 years of age or older
- B. Is a vulnerable adult as defined in A.R.S. § 46-451.

Reports

Reports made to APS must contain:

- A. The names and addresses of the adult and any persons having control or custody of the adult, if known
- B. The adult's age, and the nature, and extent of his/her incapacity or vulnerability
- C. The nature, and extent of the adult's injuries or physical neglect or of the exploitation of the adult's property
- D. Any other information that the person reporting believes might be helpful in establishing the cause of the adult's injuries or physical neglect or of the exploitation of the adult's property.

When the member resides in his/her own home, a family residence, or an agency not funded by the Division, APS will take the lead for the investigation. APS will work together with the District QA Incident Specialist, Support Coordinator or other Division staff as appropriate. Specific responsibilities are decided on a case-by-case basis. The APS worker will remain involved until the abuse or problem situation has been resolved.

When the adult resides in a DES/DDD operated or funded program, APS will investigate the complaint. DES/DDD is responsible for coordination with APS and notification of the fact finding

process. DES/DDD staff, as appropriate, will conduct a fact-find to determine programmatic and contract compliance issues.

Incident Report

When a report is made to APS, the Support Coordinator must complete an *Incident Call Report (DDD-1746A FORFF)*, following procedures established in this policy manual.

Working with APS

The assigned DDD QA Incident Specialist and Support Coordinator must work as expeditiously as possible with the APS worker to resolve any concerns regarding a report or investigation made to APS.

Whenever possible, the Support Coordinator must meet in person with the APS worker to review all aspects of the report including any information the Support Coordinator could provide regarding important historical information.

The Support Coordinator must notify his/her immediate supervisor whenever issues cannot be quickly, and satisfactorily resolved at the Support Coordination level. The Support Coordinator must cooperate during investigations, and follow-up as required. District Quality Assurance Supervisory and/or management staff must immediately pursue the steps necessary to resolve programmatic or contractual issues identified during the investigation.