



Policy Name:	Vulnerable Adults – Reporting of Maltreatment
Policy Code:	402
Policy Purpose:	In accordance with public policy, Rise is committed to protecting adults who, because of physical or mental disability or dependency on institutional services, are particularly vulnerable to maltreatment.

I. Overview

The purpose of this policy is to protect vulnerable adults and provide guidance for reporting and investigating suspected maltreatment. Definitions of maltreatment of vulnerable adults are contained in Minnesota Statutes, section 626.5572. Current definitions are attached to this policy.

II. Procedure

A. Reporting Procedures

1. Any Rise team member who knows or suspects that a vulnerable adult has been maltreated should report it immediately to his/her supervisor. *
 - a. Immediately means as soon as possible, but no longer than 24 hours from the time initial knowledge that the incident occurred has been received.
 - b. If the primary supervisor is not available or is suspected of the maltreatment, it should be reported to the secondary supervisor or designee.
 - c. All non-program team members should report suspected maltreatment to a program supervisor or secondary program supervisor/designee.

*Any team member may choose to report an incident of alleged maltreatment directly to the MAARC and not use Rise's internal reporting procedure nor inform Rise that the report has been made. Rise will not retaliate in any manner against a mandated reporter who chooses to use the external means for the reporting of suspected maltreatment.

2. The supervisor (or secondary supervisor/designee as stated above) is responsible for ensuring completion of the Suspected Maltreatment of a Vulnerable Adult Report Form and calling the MN Adult Abuse Reporting Center (MAARC). You can contact MAARC one of two ways (24/7/365):

- a. A statewide number: 1-844-880-1574
 - b. A website specifically for mandated reporters: mn.gov/dhs/reportadultabuse/
3. Some things to remember:
 - a. The report to the MAARC must be made as soon as possible, but no longer than 24 hours from the initial knowledge that the incident occurred has been received.
 - b. The report should contain enough information to identify the vulnerable adult, the caregiver, the nature and extent of the suspected maltreatment, any evidence of previous maltreatment, the name and address of the reporter, the time, date, and location of the incident, and any other information that the reporter believes might be helpful in investigating the suspected maltreatment.
 - c. If reporting on the website be sure to print out a copy of the report at the end.
 - d. If reporting via phone, then please fill out the Rise VA Report Form.
4. If the person at the MAARC states that the incident does not meet the definition of maltreatment and a report is not necessary, the incident which gave rise to the concern and the call to the MAARC will still be documented on the Suspected Maltreatment of a Vulnerable Adult Reporting Form. The determination by the MAARC that the incident does not meet the definition of maltreatment will be documented on the report, and it will be filed and maintained in the same manner as other reports of suspected maltreatment.
5. Within 24 hours from the initial knowledge that the incident occurred has been received, the supervisor/designee will inform the vulnerable adult's legal representative and county case manager (if applicable) that a report was made, unless there is reason to believe that either is involved in the suspected maltreatment.
 - a. The Suspected Maltreatment of a Vulnerable Adult Report form itself will NOT be given to the vulnerable adult's legal representative or county case manager.
 - b. When an incident involves more than person served in Rise programs, Rise will not disclose personally identifiable information about any other person receiving services when making the report to each person's legal representative, case manager, or other licensed caregiver, unless Rise has the consent of the person served and his/her legal representative.
6. The supervisor or designee will provide the initiator of the report a written notice (using the Written Notice to Mandated Reporter Form) that states whether or not Rise reported the incident to the MAARC.

- a. This notice will be given within two working days and in a manner that protects the confidentiality of the reporter.
 - b. The notice will also state that the reporter may report the incident to the MAARC if not satisfied with the action taken by Rise.
 - c. The notice will also state that the reporter is protected against retaliation by Rise if the reporter makes a good faith report to the MAARC.
 - d. A copy of the notice will be forwarded to the Vice President.
7. The supervisor or designee will scan in a signed copy of the completed Suspected Maltreatment of a Vulnerable Adult Report Form and email this to the Director of Quality Assurance, the Quality Assurance Specialist, and to the Vice President within 24 hours of making the report.
 8. A mandated reporter who negligently or intentionally fails to report suspected maltreatment of a vulnerable adult is liable for damages caused by the failure to report.

B. Internal Review Procedures

1. When an allegation of suspected maltreatment is reported, either internally or by external sources, an internal review will be conducted to identify corrective actions, if necessary, to protect the health and safety of vulnerable adults.
 - a. Upon notification of the incident, the Quality Assurance Specialist will complete the internal review/investigation.
 - b. In the Quality Assurance Specialist's absence or if the Quality Assurance Specialist is involved in the alleged or suspected maltreatment, the Director of Quality Assurance will complete the internal review/investigation.
 - c. In the Director of Quality Assurance's and Quality Assurance Specialist's absence or if the Director of Quality Assurance is involved in the alleged or suspected maltreatment and the Quality Assurance Specialist is unavailable, the Vice President will assign a manager to complete the internal review/investigation
 - d. If the Vice President is involved in the alleged or suspected maltreatment, the report should be given to the President, who will assume all responsibility for reporting, investigating, etc.
2. During the internal review/investigation process, the Vice President or his/her designee may reassign team member work responsibilities, individual caseloads, work hours, program area assignments, or take other steps needed to protect the safety and/or well-being of persons

- served and to reduce any conflict of interests that may exist among employees or persons served.
3. Results of the internal review will be documented on the VA Internal Review/Investigation Report Form. Documentation will include an evaluation of whether:
 - a. Related policies and procedures were followed.
 - b. The policies and procedures were adequate.
 - c. There is a need for additional team member training.
 - d. The reported event is similar to past events with the vulnerable adults or the services involved.
 - e. There is a need for corrective action by the program to protect the health and safety of vulnerable adults.
 4. Upon completion of the review, the VA Internal Review/Investigation Form and all pertinent documentation will be submitted to the Vice President. A copy of the VA Internal Review/Investigation Form will also be given to the program supervisor.
 - a. The investigator will meet with the Vice President and program supervisor(s) as requested to review findings.
 - b. Documentation of the Internal Review will be made available to the Lead Agency and to DHS upon the commissioner's request.
 5. If it is determined that corrective actions are needed, a corrective action plan will be designed to correct current lapses and prevent future lapses in performance by individual or the program. A copy of the corrective action plan will be submitted to the Vice President.

C. Orientation for Persons Receiving Services

1. All persons receiving services shall receive an orientation upon intake and annually thereafter on the Maltreatment of Vulnerable Adults Reporting Policy.
 - a. The orientation shall include the telephone number for the MN Adult Abuse Reporting Center. The website will NOT be provided to the person supported as this resource is only for mandated reporters.
 - b. A person's legal representative must be notified of the orientation.
2. All new persons receiving services will be provided an orientation within 24 hours of admission, or for persons who would benefit more from a later orientation, the orientation may take place within 72 hours.

D. Team Member Training

1. Orientation to this policy and Minnesota's Vulnerable Adults Act will be provided to all team members within 72 hours of first providing direct contact services to a vulnerable adult and annually thereafter.
2. The orientation and annual review shall inform all team members of:
 - a. The reporting requirements.
 - b. Definitions.
 - c. Service site Program Abuse Prevention Plan (PAPP).
 - d. Maltreatment of Minors Act
3. The program must document the provision of this training, monitor implementation by team members, and ensure that the policy is readily accessible to team members, as specified under Minnesota Statutes, section 245A.04 subdivision 14.

III. Definitions

All definitions below are from Minnesota Statute 626.5572

A. Vulnerable Adult (subd. 21)

Any person 18 years of age or older who:

1. Is a resident or inpatient of a facility;
 - a. Receives services at or from a facility required to be licensed to serve adults under sections MS 245A.01 to 245A.15, except that a person receiving outpatient services for treatment of chemical dependency or mental illness, or one who is served in the Minnesota sex offender program on a court-hold order for commitment, or is committed as a sexual psychopathic personality or as a sexually dangerous person under chapter MS 253B, is not considered a vulnerable adult unless the person meets the requirements of clause (4).
 - b. Receives services from a home care provider required to be licensed under section MS 144A.46; or from a person or organization that exclusively offers, provides, or arranges for personal care assistance services under the medical assistance program as authorized under sections MS 256B.04, subdivision 16, MS 256B.0625, subdivision 19a, MS 256B.0651, and MS 256B.0653 to 256B.0656, and 256B.0659.
 - c. Regardless of residence or whether any type of service is received, possesses a physical or mental infirmity or other physical, mental, or emotional dysfunction:

- That impairs the individual's ability to provide adequately for the individual's own care without assistance, including the provision of food, shelter, clothing, health care, or supervision.
 - Because of the dysfunction or infirmity and the need for care or services, the individual has an impaired ability to protect the individual's self from maltreatment.
- d. For purposes of this subdivision, "care or services" means care or services for the health, safety, welfare, or maintenance of an individual.

B. Maltreatment (subd. 15)

1. "Maltreatment" means abuse as defined in subdivision 2, neglect as defined in subdivision 17, or financial exploitation as defined in subdivision 9.

C. Abuse (subd. 2)

1. An act against a vulnerable adult that constitutes a violation of, an attempt to violate, or aiding and abetting a violation of these statutes:
 - a. Assault in the first through fifth degrees (MS 609.221 to 609.224).
 - b. The use of drugs to injure or facilitate crime (MS 609.235).
 - c. The solicitation, inducement, and promotion of prostitution (MS 609.322).
 - d. Criminal sexual conduct in the first through fifth degrees (MS 609.342 to 609.3451)
2. A violation includes any action that meets the elements of the crime, regardless of whether there is a criminal proceeding or conviction.
3. Conduct which is not an accident or therapeutic conduct as defined in this section, which produces or could reasonably be expected to produce physical pain or injury or emotional distress including, but not limited to the following:
 - a. Hitting, slapping, kicking, pinching, biting, or corporal punishment of a vulnerable adult.
 - b. Use of repeated or malicious oral, written, or gestured language toward a vulnerable adult or the treatment of a vulnerable adult which would be considered by a reasonable person to be disparaging, derogatory, humiliating, harassing, or threatening.
 - c. Use of any aversive or deprivation procedure, unreasonable confinement, or involuntary seclusion, including the forced separation of the vulnerable adult from other persons against the will of the vulnerable adult or the legal representative of the vulnerable adult.

- d. Use of any aversive or deprivation procedures for persons with developmental disabilities or related conditions not authorized under section 245.825.
- e. Any sexual contact or penetration as defined in section 609.341, between a team member or a person providing services in the facility and a resident, patient, or person served at that facility.
- f. The act of forcing, compelling, coercing, or enticing a vulnerable adult against the vulnerable adult's will to perform services for the advantage of another.

D. Neglect (subd. 17)

- 1. The failure or omission by a caregiver to supply a vulnerable adult with care or services, including but not limited to, food, clothing, shelter, health care, or supervision which is:
 - a. Reasonable and necessary to obtain or maintain the vulnerable adult's physical or mental health or safety, considering the physical and mental capacity or dysfunction of the vulnerable adult.
 - b. Which is not the result of an accident or therapeutic conduct.
- 2. The absence or likelihood of absence of care or services, including but not limited to:
 - a. Food.
 - b. Clothing.
 - c. Shelter.
 - d. Health care.
 - e. Supervision necessary to maintain the physical and mental health of the vulnerable adult which a reasonable person would deem essential to obtain or maintain the vulnerable adult's health, safety, or comfort considering the physical or mental capacity or dysfunction of the vulnerable adult.

E. Financial Exploitation (subd. 9)

- 1. In breach of a fiduciary obligation recognized elsewhere in law, including pertinent regulations, contractual obligations, documented consent by a competent person, or the obligations of a responsible party under section 144.6501, a person:
 - a. Engages in unauthorized expenditure of funds entrusted to the actor by the vulnerable adult which results or is likely to result in detriment to the vulnerable adult.

- b. Fails to use the financial resources of the vulnerable adult to provide food, clothing, shelter, health care, therapeutic conduct or supervision for the vulnerable adult, and the failure results or is likely to result in detriment to the vulnerable adult.
2. In the absence of legal authority a person:
- a. Willfully uses, withholds, or disposes of funds or property of a vulnerable adult.
 - b. Obtains for the actor or another the performance of services by a third person for the wrongful profit or advantage of the actor or another to the detriment of the vulnerable adult.
 - c. Acquires possession or control of, or an interest in, funds or property of a vulnerable adult through the use of undue influence, harassment, duress, deception, or fraud.
 - d. Forces, compels, coerces, or entices a vulnerable adult against the vulnerable adult's will to perform services for the profit or advantage of another.

THIS REPORTING POLICY SHALL BE POSTED IN A PROMINENT LOCATION, AND BE MADE AVAILABLE UPON REQUEST.