# Chapter 6: Adult Protective Services

The purpose of this section is to provide staff with statewide policy and general procedures for the Adult Protective Services (APS) division. APS staff must know and implement state and local policy and procedure.

The content in this chapter is based on the following laws, regulations, DSHS Administrative Policies, and the Executive Order:

|  |  |
| --- | --- |
| [Chapter 74.34 RCW](https://apps.leg.wa.gov/RCW/default.aspx?cite=74.34) | Abuse of Vulnerable Adults |
| [Chapter 388-103 WAC](https://app.leg.wa.gov/wac/default.aspx?cite=388-103) | Adult Protective Services |
| [DSHS Administrative Policy 08.02](http://one.dshs.wa.lcl/Policies/Administrative/DSHS-AP-08-02.pdf) | Client Abuse |
| [DSHS Administrative Policy 09.01](http://one.dshs.wa.lcl/Policies/Administrative/DSHS-AP-09-01.pdf) | Incident Reporting |
| [DSHS Administrative Policy 18.62](http://one.dshs.wa.lcl/Policies/Administrative/DSHS-AP-18-62.pdf) | Allegations of Employee Criminal Activity |
| [Executive Order 96.01](https://www.governor.wa.gov/sites/default/files/exe_order/eo_96-01.pdf) | Providing for the Transfer of Criminal and Major Administrative Investigations involving DSHS Employees to the State Patrol |

## Ask an Expert

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## Background

[Chapter 74.34 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34) authorizes the Department of Social and Health Services (DSHS) to receive and investigate reports of abandonment, abuse, financial exploitation, neglect and self-neglect of vulnerable adults, and to provide protective services and legal remedies to protect vulnerable adults. The APS Division within Aging and Long-Term Support Administration performs these functions.

APS receives reports of allegations of abandonment, abuse, financial exploitation, neglect, or self-neglect of vulnerable adults living in the community, facilities, and certified community residential services and supported living settings.

APS investigates allegations by gathering information through interviews, collaterals, observations, and review of records, in order to:

* Provide protective services for an alleged victim when necessary.
* Determine the validity of allegations of abandonment, abuse, financial exploitation, neglect, or self-neglect from available information.
* Determine current risk factors and supports for the vulnerable adult by assessing, as warranted: physical, functional, and mental abilities, the conditions of the environment, support systems, and relationships.

APS may provide protective services to alleged victims by:

* Facilitating access to the legal system and/or law enforcement.
* Providing or facilitating access to needed and desired services during an investigation or upon an initial finding of substantiated abandonment, abuse, financial exploitation, neglect, or self-neglect.

When an allegation is substantiated, APS must investigate whether other vulnerable adults may be at current risk of abandonment, abuse, financial exploitation, or neglect.

Table of Contents

[Chapter 6: Adult Protective Services 1](#_Toc97270850)

[Ask an Expert 1](#_Toc97270851)

[Background 2](#_Toc97270852)

[Definitions 7](#_Toc97270853)

[Historic Definitions of Mistreatments 13](#_Toc97270854)

[Safe Field Work Practices 15](#_Toc97270855)

[Smart Phone Emergency SOS Feature 17](#_Toc97270856)

[Additional Information Related to APS Worker Safety 17](#_Toc97270857)

[Documentation 17](#_Toc97270858)

[Interview Documentation 18](#_Toc97270859)

[Documenting Threatening Behavior 18](#_Toc97270860)

[AAG Communication 19](#_Toc97270861)

[Disposition 19](#_Toc97270862)

[Intake 19](#_Toc97270863)

[Summoning Emergency Response 21](#_Toc97270864)

[What to Include in an Intake Report 21](#_Toc97270865)

[Sensitive, Critical or High-Profile Cases – Restricted Case Designation (ADMIN POLICY 9.01) 22](#_Toc97270866)

[Intake and Coordination of Cross-Region APS Reports and Cases 23](#_Toc97270867)

[Response to Reports when the AV Resides in a Facility or Certified Program Setting and the Alleged Perpetrator is Associated with the Facility 24](#_Toc97270868)

[Reporting to Law Enforcement 24](#_Toc97270869)

[Reporting to Medicaid Fraud Control Division 24](#_Toc97270870)

[Reporting to the Department of Health - Health Services Quality Assurance 25](#_Toc97270871)

[Licensing Authorities for Professions under Title 18 RCW 26](#_Toc97270872)

[Report Received Intended for a Different DSHS Entity 27](#_Toc97270873)

[Indian Tribes in Washington 27](#_Toc97270874)

[APS or Law Enforcement in Another State 27](#_Toc97270875)

[Overview Chart: Sharing APS Intake Report Information with Others 27](#_Toc97270876)

[Screening Intake Reports 28](#_Toc97270877)

[Circumstances Under Which APS Will Investigate 31](#_Toc97270878)

[Circumstances Under Which APS Will Screen-Out an Intake Report 32](#_Toc97270879)

[Investigation Response Priority Categories: 24-hours, 5 business days, 10 business days 33](#_Toc97270880)

[Assignment from Intake to an Investigation Specialist 35](#_Toc97270881)

[The Alleged Victim Resides in a DSHS Licensed or Certified Program Setting 35](#_Toc97270882)

[The Alleged Victim Resides in a Setting that is Licensed, Operated, or Certified by DCYF 35](#_Toc97270883)

[The Alleged Victim is a Patient at Western State Hospital or Eastern State Hospital 36](#_Toc97270884)

[The Alleged Victim is an Inmate in a Facility Operated by the Washington State Department of Corrections (WADOC) 36](#_Toc97270885)

[The Alleged Victim is Deceased at the Time of Intake 36](#_Toc97270886)

[Investigation: Procedures for All APS Investigations 36](#_Toc97270887)

[Searching Databases 37](#_Toc97270888)

[Consent to Investigate 37](#_Toc97270889)

[Obtaining Documentary Evidence 37](#_Toc97270890)

[Interviews – General Protocol for All APS Interviews 37](#_Toc97270891)

[Interviewing the Reporter 38](#_Toc97270892)

[Interviewing the Alleged Victim 39](#_Toc97270893)

[Interviewing the Alleged Perpetrator 44](#_Toc97270894)

[When a Face-to-Face Interview is Not Required 46](#_Toc97270895)

[Interviews – Unique Circumstances 46](#_Toc97270896)

[Referrals to Investigative Specialists 54](#_Toc97270897)

[90+ Day Reason Codes 55](#_Toc97270898)

[Investigation Staffing Protocol 56](#_Toc97270899)

[Investigation: Coordinating with Other Investigative Authorities 57](#_Toc97270900)

[Coordinating with Law Enforcement 57](#_Toc97270901)

[Coordinating with APS in Another State 58](#_Toc97270902)

[Coordinating Investigations with Medicaid Fraud Control Division 58](#_Toc97270903)

[Coordinating with RCS for Investigations Involving Residents in a DSHS Licensed or Certified Setting 58](#_Toc97270904)

[Coordinating with DCYF for Investigations Involving Residents in a DCYF Licensed or Certified Setting 59](#_Toc97270905)

[Coordinating with the Department of Health (DOH) 60](#_Toc97270906)

[Reporting Professional Conduct Concerns that are Not Related to the Allegation or the Substantiated Finding 60](#_Toc97270907)

[Coordinating with Tribes 60](#_Toc97270908)

[Coordinating with the Developmental Disabilities and Long-Term Care Ombuds Programs 61](#_Toc97270909)

[Reporting to the Certified Professional Guardianship and Conservatorship Board 61](#_Toc97270910)

[Investigation Transfer Protocol 62](#_Toc97270911)

[Tools for Investigations 62](#_Toc97270912)

[Legal Injunction 63](#_Toc97270913)

[Photography 63](#_Toc97270914)

[Background Check through the Background Check System 64](#_Toc97270915)

[Accurint to Search for Information 65](#_Toc97270916)

[The IDEAL Model 66](#_Toc97270917)

[Declaration Form 66](#_Toc97270918)

[Forensic Interviewing 67](#_Toc97270919)

[Social Media 67](#_Toc97270920)

[Protective Services 67](#_Toc97270921)

[Description of Protective Services 67](#_Toc97270922)

[Authorization and Payment for APS Protective Services 68](#_Toc97270923)

[Legal Protective Services and Remedies 70](#_Toc97270924)

[Coordination with Community Resources 74](#_Toc97270925)

[Domestic Violence 75](#_Toc97270926)

[Mental Health 75](#_Toc97270927)

[Regional Resource Teams 75](#_Toc97270928)

[Investigation Findings 77](#_Toc97270929)

[Investigation Review of Recommended Substantiated Finding 80](#_Toc97270930)

[Investigation Review Team 83](#_Toc97270931)

[Prior to the IRT Meeting 84](#_Toc97270932)

[The IRT Meeting 84](#_Toc97270933)

[After the IRT Meeting 85](#_Toc97270934)

[Notification of Findings 85](#_Toc97270935)

[Who Within DSHS Can Receive Information Related to an APS Finding? 85](#_Toc97270936)

[Notification Summary Chart: Who Gets What Investigation Outcome Information? 86](#_Toc97270937)

[Initial Substantiated Finding 93](#_Toc97270938)

[Unsubstantiated, Inconclusive, or Substantiated-Unknown Perpetrator Findings 96](#_Toc97270939)

[Due Process and The Vulnerable Adult Abuse Registry 97](#_Toc97270940)

[Notifying the Alleged Perpetrator 98](#_Toc97270941)

[Opportunity to Be Heard – The Administrative Hearing 101](#_Toc97270942)

[Discovery and Protective Order Procedure 101](#_Toc97270943)

[Witness Payment 102](#_Toc97270944)

[Case Dispositions Other Than Orders on the Merits and Orders on Jurisdiction 102](#_Toc97270945)

[The Vulnerable Adult Abuse Registry 103](#_Toc97270946)

[Providing Notice of Final Substantiated Findings 104](#_Toc97270947)

[Case Record 104](#_Toc97270948)

[Record Retention 105](#_Toc97270949)

[Disclosure of APS Information 106](#_Toc97270950)

[Within DSHS 106](#_Toc97270951)

[Outside DSHS 107](#_Toc97270952)

[Public Disclosure of APS Information 108](#_Toc97270953)

[After Event Review 111](#_Toc97270954)

[Reporting Requirements 112](#_Toc97270955)

[Mandated Reporter Requirements and Information 114](#_Toc97270956)

[Failure of a Mandated Reporter to Make an APS Report 116](#_Toc97270957)

[Permissive Reporting of the Abuse of Vulnerable Adults 117](#_Toc97270958)

[Reporter Confidentiality and Immunity 117](#_Toc97270959)

[Resources 117](#_Toc97270960)

[APS List of Acronyms 118](#_Toc97270961)

## Definitions

[Chapter 74.34 RCW](http://app.leg.wa.gov/rcw/default.aspx?cite=74.34)and [Chapter 388-103 WAC](https://app.leg.wa.gov/wac/default.aspx?cite=388-103) provide definitions that apply to the APS division.

1. **"Abandonment"** means action or inaction by a person 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*.* [*RCW 74.34.020(1).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
2. **"Abuse"** means the willful action or inaction that inflicts injury, unreasonable confinement, intimidation, or punishment on a vulnerable adult. In instances of abuse of a 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:
   1. **"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 chapter 71A.12 RCW, and a vulnerable adult living in that facility or receiving service from a program authorized under chapter 71A.12 RCW, whether or not it is consensual.
   2. **"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.
   3. **"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.
   4. **"Personal exploitation"** means an act of forcing, compelling, or exerting undue influence over a vulnerable adult causing the vulnerable adult to act in a way that is inconsistent with relevant past behavior, or causing the vulnerable adult to perform services for the benefit of another.
   5. **"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 chapter 71A.12 RCW; (ii) is not medically authorized; or (iii) otherwise constitutes abuse under this section.

[*RCW 74.34.020(2)(a) through RCW 74.34.020(2)(e).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)

1. **"Adult family home"** is defined under chapter 70.128 RCW. [*WAC 388-103-0001(1).*](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0001)
2. **“Adult subject to conservatorship”** means an adult for whom a conservator has been appointed under chapter 11.130 RCW. [*RCW 11.130.010(2).*](https://app.leg.wa.gov/RCW/default.aspx?cite=11.130.010)
3. **“Adult subject to guardianship”** means an adult for whom a guardian has been appointed under chapter 11.130 RCW.[*RCW 11.130.010(3).*](https://app.leg.wa.gov/RCW/default.aspx?cite=11.130.010)
4. **“After Event Review”** is APS’s process to evaluate incidents of alleged victim fatalities, near fatalities, and major incidents to identify opportunities for system improvements.
5. **“Alford Plea”** is a plea that a criminal defendant may make that does not admit the criminal act, but recognizes that the prosecution can likely prove the charge. *(*[*North Carolina v. Alford, 400 U.S. 25 [1970]).*](https://scholar.google.com/scholar_case?case=14055791673999770436&q=North+Carolina+v.+Alford,+400+U.S.+25+(1970)%5D.&hl=en&as_sdt=6,48&as_vis=1)
6. **"Alleged perpetrator"** means the person who is alleged to have abandoned, abused, financially exploited, neglected, or misappropriated the property of, an alleged victim; and the department has received a report of, is investigating, or has made an initial substantiated finding about such allegation. [*WAC 388-103-0001(2)*](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0001)
7. **"Alleged victim"** means:
8. The person who is alleged to have been abandoned, abused, financially exploited, neglected, or had their property misappropriated by an alleged perpetrator; and the department has received a report of, is investigating, or has made an initial substantiated finding about such allegation; or
9. The person who is alleged to be neglecting themselves; and the department has received a report of, is investigating, or has made an initial substantiated finding about the self-neglect.

[*WAC 388-103-0001(3)(b).*](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0001)

1. **“APS Outcome Report”** means a document created in Tracking Incidents of Vulnerable Adults 2 (TIVA2) that is a succinct summary of the APS investigation.
2. **“APSAS”** means the Adult Protective Services Automated System.
3. **"Basic necessities of life"** means food, water, shelter, clothing, and medically necessary health care, including but not limited to health-related treatment or activities, hygiene, oxygen, and medication. [*WAC 388-103-0001(5).*](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0001)
4. **"Chemical restraint"** means 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. [*RCW 74.34.020(3).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
5. **“Collateral contacts”** means independent sources of relevant information.
6. **“Confidential”** means no information can be disclosed verbally, in writing, or electronically, except under specified circumstances.
7. **"Consent"** means express written consent granted after the vulnerable adult or his or her legal representative has been fully informed of the nature of the services to be offered and that the receipt of services is voluntary. [*RCW 74.34.020(4).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
8. **“Conservator”** means a person appointed by a court to make decisions with respect to the property or financial affairs of an individual subject to a conservatorship. The term includes a co-conservator. [*RCW 11.130.010(5).*](https://app.leg.wa.gov/RCW/default.aspx?cite=11.130.010)
9. **“Consultant”** means a person contracted by ALTSA headquarters to provide consultation services.
10. **"Department"** means the department of social and health services. [*RCW 74.34.020(5).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
11. **"Facility"** means a residence licensed or required to be licensed under:
    1. Chapter 18.20 RCW, assisted living facilities;
    2. Chapter 18.51 RCW, nursing homes;
    3. Chapter 70.128 RCW, adult family homes;
    4. Chapter 72.36 RCW, soldiers' homes;
    5. Chapter 71A.20 RCW, residential habilitation centers;
    6. Chapter 70.97 RCW, enhanced services facilities; or
    7. Any other facility licensed or certified by the department.

[*RCW 74.34.020(6).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)

1. **"Financial exploitation"** means the illegal or improper use, control over, or withholding of the property, income, resources, or trust funds of the vulnerable adult by any person for any person's profit or advantage other than for the vulnerable adult's profit or advantage. "Financial exploitation" includes, but is not limited to:
   1. The use of deception, intimidation, or undue influence by a person 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 other than the vulnerable adult;
   2. 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 other than the vulnerable adult; or
   3. Obtaining or using a vulnerable adult's property, income, resources, or trust funds without lawful authority, by a person 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.

[*RCW 74.34.020(7).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)

1. **"Financial institution"** has the same meaning as in RCW 30A.22.040 and 30A.22.041. For purposes of this chapter only, "financial institution" also means a "broker-dealer" or "investment adviser" as defined in RCW 21.20.005. [*RCW 74.34.020(8).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
2. **"Final substantiated finding"** means an initial substantiated finding of abandonment, abuse, financial exploitation, misappropriation of resident property, or neglect that:
   1. Has been upheld through the administrative hearing process described in WAC 388-103-0090 through 388-103-0160; or
   2. Is not timely appealed to the office of administrative hearings as required under WAC 388-103-0100.

[*WAC 388-103-0001(7).*](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0001)

1. **“Group home”** means a residence that is licensed as either an assisted living facility or an adult family home by the department under chapter 388-78A or 388-76 WAC. [*WAC 388-101-3000.*](https://app.leg.wa.gov/WAC/default.aspx?cite=388-101-3000)
2. **“Guardian”** means a person appointed by the court to make decisions with respect to the personal affairs of an individual. The term includes a co-guardian but does not include a guardian ad litem. [*RCW 11.130.010(11).*](https://app.leg.wa.gov/RCW/default.aspx?cite=11.130.010)
3. **"Hospital"** means a facility licensed under chapter 70.41 or 71.12 RCW or a state hospital defined in chapter 72.23 RCW and any employee, agent, officer, director, or independent contractor thereof. [*RCW 74.34.020(9).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
4. **Prior to 1/1/2022: "Incapacitated person"** means a person who is at a significant risk of personal or financial harm under [RCW 11.88.010(1)(a), (b), (c), or (d)](https://app.leg.wa.gov/RCW/default.aspx?cite=11.88.010). [*RCW 11.88.010*(1)*.*](https://app.leg.wa.gov/RCW/default.aspx?cite=11.88.010)
5. **“Inconclusive”** means the evidence is unreliable, not credible, unavailable, or insufficient to determine at this time whether or not abuse, abandonment, neglect, self-neglect, or financial exploitation occurred or did not occur, on a more probable than not basis.
6. **"Individual provider"** means a person under contract with the department to provide services in the home under chapter 74.09 or 74.39A RCW. [*RCW 74.34.020(10).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
7. **"Initial substantiated finding"** means a finding by the department that, more likely than not, the alleged abandonment, abuse, financial exploitation, misappropriation of resident property, neglect, or self-neglect occurred. [*WAC 388-101-0001(8).*](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0001)
8. **"Interested person"** means a person who demonstrates to the court's satisfaction that the person is interested in the welfare of the vulnerable adult, that the person has a good faith belief that the court's intervention is necessary, and that the vulnerable adult is unable, due to incapacity, undue influence, or duress at the time the petition is filed, to protect his or her own interests. [*RCW 74.34.020(11).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
9. **"Isolate"** or **"isolation"** means to restrict a vulnerable adult's ability to communicate, visit, interact, or otherwise associate with persons of his or her choosing. Isolation may be evidenced by acts including but not limited to:
   1. Acts that prevent a vulnerable adult from sending, making, or receiving his or her personal mail, electronic communications, or telephone calls; or
   2. Acts that prevent or obstruct the vulnerable adult from meeting with others, such as telling a prospective visitor or caller that a vulnerable adult is not present, or does not wish contact, where the statement is contrary to the express wishes of the vulnerable adult.
   3. The term "isolate" or "isolation" may not be construed in a manner that prevents a guardian or limited guardian from performing his or her fiduciary obligations under chapter 11.130 RCW or prevents a hospital or facility from providing treatment consistent with the standard of care for delivery of health services.

[*RCW 74.34.020(12).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)

1. **“Last activity”** is defined as the final action, documentation, phone call, etc. involving the case (this could occur after the investigation has closed).
2. **"Legal representative"** means a guardian or conservator appointed under either chapter 11.88 RCW or chapter 11.130 RCW; or an agent granted authority under a power of attorney as described under chapter 11.125 RCW. [*WAC 388-103-0001(9).*](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0001)
3. **"Mandated reporter"** is an employee of the department; 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 18.130 RCW. [*RCW 74.34.020(13).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
4. **"Mechanical restraint"** means any device attached or adjacent to the vulnerable adult's body that he or she cannot easily remove that restricts freedom of movement or normal access to his or her body. "Mechanical restraint" does not include the use of devices, materials, or equipment that are (a) medically authorized, as required, and (b) used in a manner that is consistent with federal or state licensing or certification requirements for facilities, hospitals, or programs authorized under chapter 71A.12 RCW. [*RCW 74.34.020(14).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
5. **"Neglect"** means
   1. a pattern of conduct or inaction by a person 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
   2. an act or omission by a person 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 RCW 9A.42.100.

[*RCW 74.34.020(15).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)

1. **"Nursing assistant"** means as it is defined under chapter 18.88A RCW. [*WAC 388-103-0001(10).*](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0001)
2. **"Nursing facility"** means a nursing home, or any portion of a hospital, veterans' home, or residential habilitation center, that is certified to provide nursing services to Medicaid recipients under section 1919(a) of the Social Security Act (42 U.S.C. Sec. 1396r). [*WAC 388-103-0001(11).*](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0001)
3. **"Nursing home"** means any facility licensed to operate under chapter 18.51 RCW. [*WAC 388-103-0001(12).*](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0001)
4. **"Permissive reporter"** means any person, including, but not limited to, an employee of a financial institution, attorney, or volunteer in a facility or program providing services for vulnerable adults. [*RCW 74.34.020(16).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
5. **"Person with a duty of care,"** in the context of abandonment and neglect, includes:
   1. A guardian or conservator appointed under [chapter 11.88 RCW](https://app.leg.wa.gov/RCW/default.aspx?cite=11.88) or [chapter 11.130 RCW](https://app.leg.wa.gov/RCW/default.aspx?cite=11.130);
   2. An agent granted authority under a power of attorney as described under [chapter 11.125 RCW](https://app.leg.wa.gov/RCW/default.aspx?cite=11.125); or
   3. A person providing the basic necessities of life to a vulnerable adult where:
   4. The person is employed by or on behalf of the vulnerable adult; or
   5. The person voluntarily agrees to provide, or has been providing, the basic necessities of life to the vulnerable adult on a continuing basis.

[*WAC 388-103-0001(13).*](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0001)

1. **"Physical restraint"** means the application of physical force without the use of any device, for the purpose of restraining the free movement of a vulnerable adult's body. "Physical restraint" does not include (a) briefly holding without undue force a vulnerable adult in order to calm or comfort him or her, or (b) holding a vulnerable adult's hand to safely escort him or her from one area to another. [*RCW 74.34.020(17).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
2. **“Preponderance of evidence”** means that it is more likely than not that something happened or exists. [*WAC 388-02-0485*](http://apps.leg.wa.gov/wac/default.aspx?cite=388-02-0485)*.*
3. **"Protective services"** means any services provided by the department to a vulnerable adult with the consent of the vulnerable adult, or the legal representative of the vulnerable adult, who has been abandoned, abused, financially exploited, neglected, or in a state of self-neglect. These services may include, but are not limited to case management, social casework, home care, placement, arranging for medical evaluations, psychological evaluations, day care, or referral for legal assistance. [*RCW 74.34.020(18).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
4. **“Regional Resource Team”** means a multidisciplinary adult protection team including community members having expertise in issues, services and resources for vulnerable adults (e.g., law enforcement officers, health care and social service professionals, domestic violence specialists) to provide consultation on select challenging APS cases in each region.
5. **"Self-neglect"** means the failure of a vulnerable adult, not living in a facility, to provide for himself or herself the goods and services necessary for the vulnerable adult's physical or mental health, and the absence of which impairs or threatens the vulnerable adult's well-being. This definition may include a vulnerable adult who is receiving services through home health, hospice, or a home care agency, or an individual provider when the neglect is not a result of inaction by that agency or individual provider. [*RCW 74.34.020(19).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
6. **"Skilled nursing facility"** means a nursing home, a portion of a nursing home, or a long-term care wing or unit of a hospital that has been certified to provide nursing services to Medicare recipients under section 1819(a) of the Social Security Act (42 U.S.C. Sec. 1395i-3). [*WAC 388-103-0001(14).*](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0001)
7. **"Social worker"** means:
   1. A social worker as defined in [RCW 18.320.010(2)](https://app.leg.wa.gov/rcw/default.aspx?cite=18.320.010); or
   2. Anyone engaged in a professional capacity during the regular course of employment in encouraging or promoting the health, welfare, support, or education of vulnerable adults, or providing social services to vulnerable adults, whether in an individual capacity or as an employee or agent of any public or private organization or institution.

[*RCW 74.34.020(20).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)

1. **“TIVA”** means Tracking Incidents of Vulnerable Adults and is an automated system used to document reports and investigations of abuse, abandonment, neglect, self-neglect of vulnerable adults prior to the second version of Tracking Incidents of Vulnerable Adults (TIVA2).
2. **“TIVA2”** means the second version of Tracking Incidents of Vulnerable Adults and is the automated system. APS staff document reports and investigations of abuse, abandonment, neglect, self-neglect of vulnerable adults in this system. The system tracks these incidents by the production of management and operational reports.
3. **“Unsubstantiated”** means a preponderance of the evidence indicates that, more likely than not, abuse, abandonment, neglect, self-neglect, or financial exploitation did not occur.
4. **Prior to 1/1/2022 "Vulnerable adult"** includes a person:
   1. Sixty years of age or older who has the functional, mental, or physical inability to care for himself or herself; or
   2. Found incapacitated under [chapter 11.88 RCW](https://app.leg.wa.gov/RCW/default.aspx?cite=11.88); or
   3. Who has a developmental disability as defined under [RCW 71A.10.020](https://app.leg.wa.gov/RCW/default.aspx?cite=71A.10.020.%20); or
   4. Admitted to any facility; or
   5. Receiving services from home health, hospice, or home care agencies licensed or required to be licensed under [chapter 70.127 RCW](https://app.leg.wa.gov/rcw/default.aspx?cite=70.127); or
   6. Receiving services from an individual provider; or
   7. Who self-directs his or her own care and receives services from a personal aide under [chapter 74.39 RCW](https://app.leg.wa.gov/rcw/default.aspx?cite=74.39).

[*RCW 74.34.020(22).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)

1. **Effective 1/1/2022 "Vulnerable adult"** includes a person **(See (b) for change)**:
   1. Sixty years of age or older who has the functional, mental, or physical inability to care for himself or herself; or
   2. \*Subject to a guardianship under [RCW 11.130.265](https://app.leg.wa.gov/RCW/default.aspx?cite=11.130.265) or adult subject to conservatorship under [RCW 11.130.360](https://app.leg.wa.gov/RCW/default.aspx?cite=11.130.360); or
   3. Who has a developmental disability as defined under [RCW 71A.10.020](https://app.leg.wa.gov/RCW/default.aspx?cite=71A.10.020.%20); or
   4. Admitted to any facility; or
   5. Receiving services from home health, hospice, or home care agencies licensed or required to be licensed under [chapter 70.127 RCW](https://app.leg.wa.gov/rcw/default.aspx?cite=70.127); or
   6. Receiving services from an individual provider; or
   7. Who self-directs his or her own care and receives services from a personal aide under [chapter 74.39 RCW](https://app.leg.wa.gov/rcw/default.aspx?cite=74.39).

[*RCW 74.34.020(21).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)

1. **"Vulnerable adult abuse registry"** means the registry, established and maintained by the department as required under RCW 74.39A.056, that contains identifying information about people who have final substantiated findings of abandonment, abuse, financial exploitation, misappropriation of resident property, or neglect of a vulnerable adult. [*WAC 388-103-0001(15).*](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0001)
2. **"Vulnerable adult advocacy team"** means a team of three or more persons who coordinate a multidisciplinary process, in compliance with chapter 266, Laws of 2017 and the protocol governed by RCW 74.34.320, for preventing, identifying, investigating, prosecuting, and providing services related to abuse, neglect, or financial exploitation of vulnerable adults. [*RCW 74.34.020(22).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
3. **"Willful"** means that a person's action or inaction is willful when the person's action or inaction is intentional or knowing.
   1. **“Intentional”** means a person's action or inaction is intentional when the person's objective or purpose is to inflict injury, unreasonable confinement, intimidation, or punishment on a vulnerable adult.
   2. **“Knowing”** means a person's action or inaction is knowing when the person is aware that his or her action or inaction would inflict injury, unreasonable confinement, intimidation, or punishment on a vulnerable adult.

[*WAC 388-103-0001(16).*](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0001)

### Historic Definitions of Mistreatments

1. “**Abuse,**” **prior to 7/24/2015**, means the willful action or inaction that inflicts injury, unreasonable confinement, intimidation, or punishment on a vulnerable adult. In instances of abuse of a 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 exploitation of a vulnerable adult.
   1. “**Sexual abuse,” prior to 7/24/2015**, means any form of nonconsensual sexual contact including, but not limited to, unwanted or inappropriate touching, rape, sodomy, sexual coercion, sexually explicit photographing, and sexual harassment. Sexual abuse includes any sexual contact between a staff person, who is not also a resident or client, of a facility or a staff person of a program authorized under [Chapter 71A.12 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=71A.12), and a vulnerable adult living in that facility or receiving service from a program authorized under [Chapter 71A.12 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=71A.12), whether or not it is consensual.
   2. “**Physical abuse,” prior to 7/24/2015**, 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, prodding, or the use of chemical restraints or physical restraints unless the restraints are consistent with licensing requirements, and includes restraints that are otherwise being used inappropriately.
   3. “**Mental abuse,” prior to 7/24/2015**, means any willful action or inaction of mental or verbal abuse. Mental abuse includes, but is not limited to: coercion, harassment, inappropriately isolating a vulnerable adult from family, friends, or regular activity, and verbal assault that includes ridiculing, intimidating, yelling, or swearing.
   4. **“Exploitation,” prior to 7/24/2015**, means an act of forcing, compelling, or exerting undue influence over a vulnerable adult causing the vulnerable adult to act in a way that is inconsistent with relevant past behavior, or causing the vulnerable adult to perform services for the benefit of another.
2. **“Financial exploitation,” prior to 7/22/2011,** means the illegal or improper use of the property, income, resources, or trust funds of the vulnerable adult by any person for any person’s profit or advantage other than for the vulnerable adult's profit or advantage.
3. **“Neglect,” prior to 7/28/2013**, means:
   1. A pattern of conduct or inaction by a person 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
   2. An act or omission 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 [RCW 9A.42.100](http://apps.leg.wa.gov/RCW/default.aspx?cite=9A.42.100).

## Safe Field Work Practices

References:

* [RCW 74.04.790](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.04.790)
* [RCW 9A.46.110](http://apps.leg.wa.gov/RCW/default.aspx?cite=9A.46.110)
* [RCW 9A.76.180](http://apps.leg.wa.gov/RCW/default.aspx?cite=9A.76.180)

This information is intended to minimize the potential of occupational hazards to APS staff while working in the field, where unexpected actions or events may occur. This information does not replace staff knowledge, judgment, or common sense in any particular situation. Consult with your supervisor if you have reason to believe a situation may be dangerous.

**NOTE:** Call 911 to request immediate assistance from law enforcement when the safety of the alleged victim, safety of other vulnerable adults under the care of the alleged perpetrator, or the safety of the APS worker may be in imminent jeopardy. Immediate assistance can be a welfare check or a standby assist, depending on the situation.

Welfare check is when law enforcement responds to check the alleged victim or other vulnerable adults for their health, welfare, or safety. Typically, the APS worker will not be present for a welfare check. The welfare check does not replace an initial face-to-face response or other required visit by the APS investigator.

Standby assist is when law enforcement responds with the APS worker for the safety of the APS worker or the alleged victim during a home visit. Law enforcement will be present to ensure safety but does not have a leading role.

Prior to making a home or field visit, review information (e.g., from the intake report, related case records, collateral contacts or interview the reporter) to assess if specific hazards may be present. Conduct a background check through the Background Check System (BCS) of the Background Check Central Unit (BCCU) if it appears warranted and sufficient identifying information is known. Accurint may be used for background checks when there are concerns that the individual may have a criminal history outside of Washington State. Questions to help assess the situation and determine if specific safety precautions are warranted include, but are not limited to:

* What is documented on the person management record indicating this person may pose a danger? (See the TIVA2 Users Guide)
* Is the vulnerable adult in present danger? In what way?
* Are weapons present? Have weapons ever been used to threaten or harm anyone?
* Are aggressive animals present? If so, ask the vulnerable adult to secure aggressive animals upon arrival.
* Will anyone else be in the home during the visit?
* Is there a history of violence in the home?
* Is anyone in the environment likely to be under the influence of drugs or alcohol?
* Are illegal drugs used or manufactured in the home or currently being dealt out of the home?
* Is anyone likely to be present who will exhibit violent, erratic, agitated, or bizarre behaviors?
* Are there any health hazards in the environment such as dangerous chemicals, broken floorboards, human and animal waste?
* Do conditions exist that may potentially result in harm during a home visit?
* Does anyone in the home have a criminal record?
* Are there restraining orders against anyone associated with the household?

Depending upon the perceived seriousness of the safety risk of a field visit, consult with a supervisor to consider various options to protect the safety of the APS worker, such as:

* Request police standby assist if danger is present or may escalate upon arrival. Law enforcement enters a residence before the APS worker when conducting a joint visit to a location that poses a safety concern, unless an alternate plan is agreed to by APS and law enforcement in a pre-entry meeting.
* Take another worker on the visit if the presence of two workers may mitigate a risk of danger.
* Consider conducting the interview in the office or in a neutral location.

Each office must:

* Implement a check-in procedure and protocol to know the approximate whereabouts of APS workers in the field should it become necessary to locate an individual (e.g., workers going on a field visit may indicate the address of the visit and anticipated time of return on an office sign-out board, utilize Outlook calendars and have a call-in procedure).
* Implement a means to verify that every APS worker in the field has finished his or her shift safely.

All APS workers must carry work identification on field visits (e.g., business card, DSHS picture identification).

Each region must provide APS workers with a basic field bag for field visits to address potential biological hazards. The contents of the field bag will be determined and provided regionally. Suggested items include:

* Non-latex gloves
* Plastic garbage bags with draw string
* Masks
* Shoe covers
* Waterless hand cleaner
* Paper towels

During a field visit, the APS worker must continuously assess the environment and situation for safety risks, including but not limited to:

* Entering a residence only when given permission or asked to do so.
* Not entering a residence if it does not feel safe.
* Leave immediately if there is reason to believe danger exists or is imminent.
* Leave a residence when asked to do so.

Anytime an APS worker is threatened with harm, or is harmed by an alleged perpetrator, witness, collateral contact, or the alleged victim:

* Inform the APS supervisor or program manager.
* Submit a report to law enforcement.
* Consult with the RA or designee to determine what additional action may be appropriate to the circumstances. For example, the provisions of these (or other) statutes may apply:
  + [RCW 9A.76.180](http://apps.leg.wa.gov/RCW/default.aspx?cite=9A.76.180) Intimidating a Public Servant
  + [RCW 9A.46.110](https://apps.leg.wa.gov/rcw/default.aspx?cite=9A.46.110) Stalking
  + [RCW 74.04.790](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.04.790) Reimbursement for employees being victims of assault.

### Smart Phone Emergency SOS Feature

The emergency SOS feature is available on iPhones and can be set up by the user on any state issued newer model smartphone or on a personal device. The design of the emergency SOS feature allows for a quick and discreet call to 911 and provides emergency services with the user’s location (location feature activates only upon SOS initiation).

Once set up, the emergency SOS feature activates through a series of button presses, which vary based on device model. The default setting will bring up a slider bar to dial 911 but there is also an option to enable “auto call” to 911. The feature also allows for other contacts, such as supervisors or family members, to receive automatic message notifications with the activation of the emergency SOS feature.

See [MB A19-007](http://intra.altsa.dshs.wa.gov/docufind/MB/APS/APSMB2019/A19-007%20iPhone%20Emergency%20SOS%20Feature%20Availability.docx) for instructions on activating this feature.

### Additional Information Related to APS Worker Safety

For additional information, refer to:

* [APS Field Safety Checklist tool](https://teamshare.dshs.wa.gov/sites/hcs/aps/Field%20Guide%20Documents/Safety%20Checklist%20-%20updated%2010-14-2021.docx)
* [APS Field Safety Training](https://sowa.sumtotal.host/core/pillarRedirect?relyingParty=LM&url=app%2Fmanagement%2FLMS_ActDetails.aspx%3FActivityId%3D1103251%26UserMode%3D0)

## Documentation

Written communication generated by APS, including reports and letters will adhere to the following principles to ensure clarity, accuracy, and relevance of documentation.

* Follow the directions in the [TIVA2 Users Guide](https://teamshare.dshs.wa.gov/sites/hcs/aps/Tiva2PostImp/_layouts/15/start.aspx#/Shared%20Documents/Forms/AllItems.aspx?RootFolder=%2Fsites%2Fhcs%2Faps%2FTiva2PostImp%2FShared%20Documents%2FTIVA2%20User%20Guides&FolderCTID=0x01200090CC5B6968584D40B4204025E70A3BED&View=%7B9FFC7EC8%2D9142%2D43B1%2D876A%2D90F3F3A641EC%7D) for entering case notes.
* Enter all information gathered into case notes within 10 business days of the date of the activity.
* Destroy handwritten or computer notes after the content has been entered into the case notes.
* If information received cannot be represented in the case notes (e.g., a diagram), retain and upload it in TIVA2. In a case note, state that the documentation exists and its name or what it is.
* Document every activity in an individual case note (e.g., one field visit or one telephone conversation).
* Use an acronym only if it is either:
  + On the [APS List of Acronyms](#_APS_List_of).
  + Defined and spelled out the first time it is used in each distinct case notes entry.
* Document pertinent and relevant information related to the investigation.
* Ensure the author and date are identifiable on all documentation created by APS.
* Write in a style that facilitates communication and understanding by others.
  + Write succinctly. Use simple language without jargon.
  + Use correct grammar, sentence structure, and punctuation.
  + When writing about several people with the same last name, include the first name, middle initial, and if still identical, number the individuals.
  + Use pronouns only when it is obvious who is being referred to.
  + Avoid using ‘this,’ ‘that,’ ‘these,’ ‘those,’ and ‘it.’
* Use first-person narrative writing.
* Utilize journalistic recording, addressing who, what, where, when, how, and why in an objective, factual, and descriptive manner.
* Include the name of the person being referred to and their relationship to the situation.
* Use descriptive, factual language.
* Do not use emotional terms (such as resistive, non-compliant, abrasive, caustic), sarcastic remarks, discriminatory, emotional, sexist, and racist language.
* Avoid opinions. If included in documentation, opinions must be identified as opinion, relevant, and professional, not personal.
* Identify the source of information (e.g., review of a specific record; reported by [person’s name]).

### Interview Documentation

* Document interviews in writing. APS shall not audio or video tape the contents of an APS interview, nor consent to another party audio or video taping the APS interview.
* Document the date and time of all telephone calls and interviews, whether or not contact is made, when it is pertinent to the investigation.
* Record notes during the interview or shortly thereafter in sufficient detail to accurately document each interview relevant to the APS investigation and provision of protective services.
* Enter your case notes in TIVA2 within 10 business days of the date of the activity, and include the date, time, method (e.g., scheduled or unscheduled; face-to-face or telephone) and content of each interview. If more than one APS worker participated in the home visit or a joint interview, determine which worker will enter the case notes. If each worker made unique observations or conducted an independent interview, then each worker must independently enter that information into a case note.
* Clearly document the comments of a third party whenever a third party is speaking for, or on behalf of, the individual being interviewed, such as the alleged victim or alleged perpetrator.
* If there are questions that APS can’t/won’t answer (e.g., who was the reporter?), document the fact that these specific questions were asked, and APS provided an explanation of why that information could not be provided.

### Documenting Threatening Behavior

The following will address the scope of documentation required when there is a verbal threat, or threatening behavior that causes a risk or safety concern to self or others, made by a person (caller or walk-in) related specifically to an APS case:

* Utilize standard documentation principles.
* Document the interaction in case notes so other staff interacting with this household aren’t put at risk or caught off guard.
* Document language verbatim. Quote any specific threats made.

Example of specific verbatim, detailed, and factual documentation to use:

Upon introducing myself on the front porch of the AP’s home as an APS worker the AP, who was holding a beer bottle in his left hand, shouted, “You have five seconds to get off my property or you’ll wake up in the hospital full of buckshot, if you wake up at all.” I immediately left the property, got in the state vehicle and drove off the property before calling law enforcement.

Example of opinionated, judgmental, personal feeling documentation not to use:

Upon introducing myself as an APS worker, the AP was angry and said something about shooting me, but I don’t think he had a gun. It was clear to me he didn’t want to talk today as he was apparently upset about being named an alleged perpetrator so I told him I’d come back tomorrow in hopes he would be calmer. He continued to make threatening comments, but I never saw a weapon and I know he doesn’t have a criminal record.

### **AAG Communication**

Type AAG communication notes in a Word document and upload with the document with the label “Attorney Client Privilege - Do Not Disclose.” Indicate in case notes that an interaction with the AAG occurred and refer to the uploaded document.

### Disposition

The APS disposition provides an explanation of the facts and evidence gathered during the investigation to support whether or not the alleged event met the statutory definition of the mistreatment type. The disposition is not a summary of investigative activity. A finding type will be selected (e.g., unsubstantiated, inconclusive, substantiated, No APS) and details of why that finding type was selected are presented. The disposition provides a brief summary of the original allegation, how the alleged victim meets vulnerable adult status, the finding type selected, the analysis of the finding, and a summary of any protective service activity. The disposition should be factual, clearly written, and specific to the facts of the investigation.

APS staff must use the [APS Finding Template](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame2.aspx?sourcedoc=/sites/hcs/aps/Resources/APS%20Finding%20Template.doc&action=default&DefaultItemOpen=1) when writing dispositions.

## Intake

References:

* [Administrative Policy 8.02](http://one.dshs.wa.lcl/Policies/Administrative/DSHS-AP-08-02.pdf)
* [Chapter 11.130 RCW](https://app.leg.wa.gov/rcw/default.aspx?cite=11.130)
* [Chapter 18.130 RCW](https://app.leg.wa.gov/rcw/default.aspx?cite=18.130)
* [Chapter 388-71 WAC](https://app.leg.wa.gov/wac/default.aspx?cite=388-71)
* [RCW 74.34.020](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
* [RCW 74.34.063](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.063)
* [RCW 74.34.095](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.095)
* [Title 18 RCW](https://app.leg.wa.gov/rcw/default.aspx?cite=18)
* [WAC 388-103-0020](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0020)

Intake is the initial gathering of report information about an allegation of abandonment, abuse, financial exploitation, neglect, or self-neglect of a vulnerable adult. APS may receive reports directly, or other entities (e.g., RCS, DOH) may receive the initial report and forward it to APS. APS enters all reports into TIVA2 regardless of whether the allegation or the alleged vulnerable adult meets definitions in [RCW 74.34.020](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020).

**Enter all reports into TIVA2 within 24 hours of knowledge.**

The department must initiate a response to a report of suspected abandonment, abuse, financial exploitation, neglect, or self-neglect of a vulnerable adult within 24 hours. APS will initiate a response as required under [RCW 74.34.063](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.063). An initial response may include, but is not limited to:

* Referring the report to the appropriate agency for investigation.
* Referring the report to law enforcement.
* Contacting the reporter or collateral sources for additional information.
* Screening out the report for failure to meet [WAC 388-103-0020](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0020) to initiate an investigation.
* Assigning the report to an investigator for investigation.

The APS Central Intake Unit shall:

* Accept reports submitted by telephone/TTY, fax, in-person, mail, online through TIVA2 or e-mail.
* Have a published toll-free voice line telephone number available for anyone wishing to submit a report.
* Have a separate TTY number for individuals who are deaf, hard of hearing or have speech impediments to submit a report.
  + All APS intake staff must be trained in the use of the TTY accessibility. Instructions are available on the Office for Deaf and Hard of Hearing (ODHH) intranet site or management may contact ODHH for training. Staff must check the TTY machines/calls daily.
* Have APS staff accept report information, including live phone reports, during regular office hours, 8:00 a.m. to 5:00 p.m., Monday through Friday, except state holidays.
* Make available a means to receive reports during the evening hours, weekends, or holidays when the office is not open.
* Inform the reporter that the assigned investigator will contact them for additional information when the report involves an AV that does not reside in a facility setting.

If reports are received by regional APS staff, the worker will:

* Complete new intake reports related to open investigations when directly received.
* Forward calls to central intake at 9-877-734-6277 when there is not a current open investigation related to the AV or AP. If a message is left, send an email to [apscentralintake@dshs.wa.gov](mailto:apscentralintake@dshs.wa.gov) with the reporter details and any information regarding the call. Do not ask a reporter to call central intake.
* Offer an in-person reporting option for reporters who walk into a local office.

Within 24 hours of APS knowledge of receipt of a report, an APS worker will call the reporter to acknowledge receipt of the report and to gather additional information, unless:

* The report was submitted anonymously.
* The reporter has indicated they do not want to be contacted.
* The report was a routine submission by a mandated reporter without any specific personal knowledge of the situation (e.g., if the report was faxed by the hospital or law enforcement, the assigned APS worker will communicate and coordinate directly with the assigned officer conducting their investigation rather than the APS intake worker calling the clerk who faxed the referral to APS).

The reporter may be informed of the screening decision unless the AV resides in a facility or certified program setting.

* When conducting the reporter callback, the worker will identify themselves as a DSHS employee, not APS, if someone other than the reporter answers the phone so as not to alert the facility or certified program staff of potential APS involvement. If the reporter is not available, the worker will not leave a message but state that they will call back.

### Summoning Emergency Response

If there is an emergency or life-threatening situation during the intake process, the APS intake worker will:

* Interrupt the intake process and call the appropriate emergency first responder, such as law enforcement, emergency medical services, or a designated crisis responder (DCR).
* Inform the emergency first responder whether APS is involved in the situation.
* Immediately notify a supervisor that emergency assistance was summoned during intake.
* Complete the intake process after contacting the emergency first responder.

### What to Include in an Intake Report

The APS intake report should contain available information pertinent to the situation which may include, but is not limited to:

* Name, address and telephone number of the alleged victim and alleged perpetrator.
* Condition, needs, and descriptive information of the alleged victim.
* Sufficient information to determine if an element of abandonment, abuse, financial exploitation, neglect, or self-neglect is alleged.
* Name, address, and telephone number of any individuals who may have knowledge of the situation.
* Any safety considerations that may cause concern or present a hazard to the APS worker assigned to conduct the investigation, such as weapons, aggressive pets, drug or alcohol usage by alleged victim or alleged perpetrator, history of aggressive, uncontrolled or unpredictable behavior by alleged victim or alleged perpetrator, a criminal record, hazardous conditions, or circumstances regarding the residence of the victim.

Create a separate intake report:

* For each alleged victim and each alleged perpetrator involved in a situation.
* For allegations of self-neglect and allegations of mistreatment by others (i.e., an intake report cannot include allegations of self-neglect and allegations of abandonment, abuse, financial exploitation, or neglect by a known or unknown alleged perpetrator).
* If there is an open investigation and another report comes in involving the same alleged victim and alleged perpetrator but contains a new allegation or a new incident of the same allegation, create a new intake report and assign for a new investigation.
  + A new incident is defined as a singular act or set of actions that occurred on a specific date or date range newly reported to APS which were not discovered in due course of an investigation and requires a new initial face-to-face alleged victim interview.
* If there is an open self-neglect investigation and a subsequent intake comes in with a self-neglect allegation within the first 30 days of the open investigation being created, link the intake report to the open investigation.
  + If a new intake report is linked to an open investigation and contains a new allegation or new incident, the assigned investigator will conduct a new face-to-face within the newly assigned response time and will document this in a case note. The investigator will use the case note code “AV Initial Interview” to document the new face-to-face interview.
* If there is an open investigation and a subsequent intake report comes in with a self-neglect allegation after 30 days of the open investigation being created, create a new investigation.

When a referral or information is received pertaining to an investigation that is already open involving the same alleged victim, same alleged perpetrator and same incident, you do not need to create a separate intake report. Instead:

* Add the reporter name and contact information into TIVA2.
* Create a case note with any information provided by the second reporter.
* Upload any relevant documents received and document the activity in a case note.
* The intake worker does not contact the second reporter. The investigator will contact the second reporter for more information.

When a public online report (POR) is received pertaining to an investigation that is already open involving the same alleged victim, same alleged perpetrator, and same incident, create a new intake report and link to the open investigation. The reporter information will auto-fill.

**NOTE:** If intake receives documents on an open investigation, upload the documents in TIVA2 and enter a case note stating such. If intake receives documents on a closed investigation, email the documents to the investigator who completed the investigation and their supervisor.

### Sensitive, Critical or High-Profile Cases – Restricted Case Designation (ADMIN POLICY 9.01)

Some APS intake reports may involve sensitive, critical or high-profile situations, which may include:

* The alleged victim or the [alleged perpetrator is a DSHS Employee, AAA Employee, or AAA Subcontractor (including Employees in RHCs and SOLAs).](#_Alleged_Perpetrator_is)
* The media is involved.
* The alleged victim or alleged perpetrator is a public official or other high-profile individuals.
* The investigation includes an alleged victim or alleged perpetrator of the Address Confidentiality Program (ACP) for Domestic Violence Victims. See [Address Confidentiality Program (ACP) for Domestic Violence Victims](https://www.dshs.wa.gov/esa/confidentiality/confidentiality-address-confidentiality-program-acp-domestic-violence-victims).

When the report is considered sensitive or high profile, consult with your supervisor immediately and follow Administrative Policy 9.01, including notification of the Regional Administrator, Appointing Authority, or designee.

Place a restriction in TIVA2 following the procedure outlined in the TIVA2 Users Guide. The restriction limits viewing of the intake and investigation information to those with restricted case security permission. Staff who can be given such permission in TIVA2 are as follows:

* ALTSA Assistant Secretary
* APS Director
* APS Deputy Director
* APS Office Chief
* APS Senior Policy Advisor
* APS Office Chief of Legal and Records
* APS Special Executive Assistant
* APS Regional Administrators
* APS Deputy Regional Administrators
* APS Program Managers (including Subject Matter Experts)
* APS Social and Health Program Consultants
* APS Supervisors
* Legal Benefits Advisors
* Paralegals

The Regional Administrator or designee will determine who investigates and may coordinate with another Regional Administrator to transfer the case if appropriate.

Place a restriction and indicate as “High Profile / Media” in TIVA2 following the procedure outlined in the TIVA2 Users Guide when:

* The media is involved.
* The alleged victim or alleged perpetrator is a public official or other high-profile individuals.
* The alleged victim or alleged perpetrator is a participant of the Address Confidentiality Program (ACP) for Domestic Violence Victims. See [Address Confidentiality Program (ACP) for Domestic Violence Victims](https://www.dshs.wa.gov/esa/confidentiality/confidentiality-address-confidentiality-program-acp-domestic-violence-victims).

### Intake and Coordination of Cross-Region APS Reports and Cases

If an intake report involves individuals in multiple regions, the APS region containing the county where the alleged victim resides will take the lead on investigation and protective service activities. The lead region will coordinate with other regions if the incident occurred there.

If, at the time of intake, the alleged victim is deceased or has left the state, the APS region containing the county where the victim previously resided will take the lead.

Whenever APS workers from multiple regions or offices become involved in different aspects of a case (such as doing a courtesy interview), the APS supervisors, program managers, or both will coordinate investigative activities. This may include, but is not limited to, in-person visits, gathering documentation, coordinating with local law enforcement, and coordinating with local prosecuting attorneys.

If an intake report requires re-assignment to another region due to cross regional issues, the regional APS supervisors, program managers, or both will consult, and re-assign as agreed.

### Response to Reports when the AV Resides in a Facility or Certified Program Setting and the Alleged Perpetrator is Associated with the Facility

APS will screen and investigate all allegations meeting statutory criteria allegedly perpetrated by someone not affiliated with a DSHS licensed or certified facility or program where the vulnerable adult is a resident.

When the alleged perpetrator is an employee, volunteer, administrator, owner or a resident suspected of mental abuse, personal exploitation, improper use of restraints, neglect, or abandonment APS will screen out the intake report unless the report includes an allegation of sexual or physical abuse. If the allegation includes sexual or physical abuse, APS will initiate a response.

### Reporting to Law Enforcement

Make an immediate report to law enforcement when theintake report or investigation indicates the alleged abandonment, abuse, financial exploitation, or neglect may be criminal. [*RCW 74.34.063*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.063)*.* Law enforcement decides what is criminal; APS’ responsibility is only to report suspected crimes.

Make a report to law enforcement even if:

* Another department or non-department person has already reported the concern to law enforcement.
* The alleged victim or reporter do not consent. Consent is not required for APS to make a report to law enforcement.

Provide the name and identifying information of the AV, the AP, and reporter to law enforcement. If known, inform law enforcement of the reporter’s safety concerns as a result of submitting the report, and relationship to the AV.

Report to law enforcement using the method specified by the law enforcement jurisdiction receiving the report (e.g., by phone, automated or manual fax, TIVA2 referral).

If an APS investigation is open related to this report, see [Coordinating with Law Enforcement](#_Coordinating_with_Law) regarding communication and coordination.

### Reporting to Medicaid Fraud Control Division

The [Medicaid Fraud Control Division (MFCD)](https://www.atg.wa.gov/medicaid-fraud) is responsible for criminal and civil investigations and prosecution of health care fraud committed against the state’s Medicaid program. They are located within the Office of the Attorney General.

MFCD investigates allegations of resident abuse, neglect, and financial exploitation in residential care facilities receiving Medicaid funds.

When the APS intake report or investigation indicates a suspected abuse, neglect, or exploitation of a resident (excluding resident to resident) in a Medicaid AFH, AL, NH, RHC, ESF, or certified program setting, complete a referral in TIVA2 using:

* + Referral type: Investigation
  + Agency Type: Other investigative agency
  + Transmit Method: Auto
  + Agency Name: (APS) Medicaid Fraud Control Division

Do not refer an allegation of a resident in a facility to the MFCD when the alleged perpetrator **is not a Medicaid provider** (e.g., if the AP is a family member external to the facility).

**Provider Fraud:** When the APS intake report or investigation indicates that a Medicaid provider may have committed fraud involving Medicaid funds (e.g., a Medicaid facility provider, individual provider, etc.), complete [DSHS 12-210 Provider Fraud Report](http://forms.dshs.wa.lcl/formDetails.aspx?ID=13093) and email the form to the email address listed on the form for HCS or DDA services. This referral is separate from the MFCD referral process and alerts HCS or DDA staff of potentially fraudulent activity.

**Client Fraud**: When the APS intake report or investigation indicates that a client may have committed fraud involving Medicaid funds, complete [DSHS 12-209 Client Fraud Report](http://forms.dshs.wa.lcl/formDetails.aspx?ID=13091) and email the form to [ADSAFraud@dshs.wa.gov](mailto:ADSAFraud@DSHS.Wa.Gov). This referral is separate from the MFCD referral process and alerts DSHS staff of potentially fraudulent activity.

### Reporting to the Department of Health - Health Services Quality Assurance

The Department of Health (DOH) Health Services Quality Assurance (HSQA) licenses and regulates all health care professions as well as non-LTC health care-related facilities. Within HSQA, the office of Health Professions and Facilities (HPF) (investigations involving facilities) and the Office of Investigation and Inspection (OII) (investigations involving professions per [Chapter 18.130 RCW](https://app.leg.wa.gov/RCW/default.aspx?cite=18.130)) work in close coordination through rulemaking and enforcement actions.

Services and facilities that are licensed by DOH HPF include, but are not limited to:

* Acute care hospitals. [*Chapter 70.41 RCW*](http://apps.leg.wa.gov/RCW/default.aspx?cite=70.41)*.*
* Childbirth centers. [*Chapter 18.46 RCW*](http://apps.leg.wa.gov/RCW/default.aspx?cite=18.46)*.*
* Private psychiatric and chemical dependency hospitals. [*Chapter 71.12 RCW*](http://apps.leg.wa.gov/RCW/default.aspx?cite=71.12)*.*
* Hospice care centers. [*Chapter 70.127 RCW*](http://apps.leg.wa.gov/RCW/default.aspx?cite=70.127)*.*
* Residential treatment facilities for adults and children with mental illness. [*Chapter 71.12 RCW*](http://apps.leg.wa.gov/RCW/default.aspx?cite=71.12)*.*
* Residential treatment facilities for adults and children with chemical dependency (drug or alcohol treatment facilities). [*Chapter 71.12 RCW*](http://apps.leg.wa.gov/RCW/default.aspx?cite=71.12)*.*
* Medical or dental clinics
* In-home services agencies (i.e., home care agency, home health agency, hospice agency). [*Chapter 70.127 RCW*](http://apps.leg.wa.gov/RCW/default.aspx?cite=70.127)*.*

**NOTE:** APS does not investigate concerns involving an alleged victim served in a facility licensed, certified, or both, by DOH if the alleged perpetrator is an employee, contractor, or volunteer with the facility. APS may conduct the investigation when the AP is not an employee, contractor, or volunteer with the DOH licensed/certified facility.

APS does not investigate allegations of vulnerable adult mistreatment by a medical practitioner, such as a physician, during the course of their professional role. If an allegation is made against a medical practitioner during the course of their professional role, refer the allegation to DOH.

APS has a data sharing agreement with DOH/HSQA to assist each entity in fulfilling statutory mandates to protect respective target populations.

#### Health Professionals

APS must forward to DOH/HSQA any intake report that alleges a health professional who is professionally licensed, certified, or registered under [Chapter 18.130 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=18.130) has abandoned, abused, financially exploited, or neglected a vulnerable adult.

The requirement to notify DOH/HSQA of an allegation applies whether or not the alleged victim is related to the alleged perpetrator’s professional role.

When known by APS, or APS has reason to believe that the AP is a health professional who is professionally licensed, certified, or registered under [Chapter 18.130 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=18.130):

* Look up the name on the [DOH HSQA Provider Credential Search website](http://www.doh.wa.gov/LicensesPermitsandCertificates/ProviderCredentialSearch).
* Send a referral to DOH if the license, certification, or registration is active or expired.
* The referral must have a full name (first and last) and the credential number. DOH will reject referrals with incomplete names or lack of credential number.

#### DOH Licensed Facility and In-Home Services

If a reporter expresses concerns involving care or service to a person receiving services in a health facility, hospital (including Eastern and Western State Hospitals), or in-home services (home care, home health, hospice agency) licensed by DOH, complete an intake and screen the report, and also refer the intake report for review and consideration to DOH. This is a requirement outlined in [DSHS Administrative Policy 8.02.](http://one.dshs.wa.lcl/Policies/Administrative/DSHS-AP-08-02.pdf)

* DOH Hotline: 1-800-633-6828; local number 360-236-4700
* TIVA2 referral:
  + Referral type: Investigation
  + Agency type: DOH
  + Transmit method: Auto
  + Agency name: select the appropriate referral for DOH Medical Complaints, DOH Nursing Complaints or DOH-HSQA

When receiving a report, make a referral to DOH if you have reason to believe [Chapter 388-71 WAC](https://app.leg.wa.gov/wac/default.aspx?cite=388-71) requiring long-term care worker training, background checks, and certification as home care aides is not being followed. The law requires DSHS to train and provide fingerprint-based background checks for each applicant. It requires DOH to certify long-term care workers as home care aides and regulate the profession. Refer to [Chapter 388-71 WAC](https://app.leg.wa.gov/wac/default.aspx?cite=388-71) for further information, including exceptions to this requirement.

### Licensing Authorities for Professions under Title 18 RCW

This section applies to licensing authorities for professions other than health professionals covered by DOH. [*RCW 74.34.063(6)*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.063)*.*

APS must forward to the proper licensing authority any intake report alleging abandonment, abuse, financial exploitation, or neglect by an alleged perpetrator known by APS to be professionally licensed, certified, or registered under [Title 18 RCW](http://apps.leg.wa.gov/rcw/default.aspx?Cite=18).

The requirement to notify the proper licensing authority of an allegation applies whether or not the alleged victim of abandonment, abuse, financial exploitation, or neglect is related to the alleged perpetrator’s professional role.

Refer the APS intake report to the appropriate professional credentialing authority through TIVA2.

### Report Received Intended for a Different DSHS Entity

If someone calls APS to make a report, but the report is not intended for APS, APS will create an intake, screen it out, and immediately make a referral to the DSHS entity responsible for conducting the investigation of the allegation.

### Indian Tribes in Washington

Follow the protocol specified in the applicable Memorandum of Understanding (MOU) for each tribe and respond according to the agreement. [*RCW 74.34.067.*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.067) If tribal affiliation information is known at the time of intake, you must add the tribal information details in TIVA2.

### APS or Law Enforcement in Another State

If the reporter has a concern about an alleged victim and an allegation in another state, create and intake and screen it out. Provide the caller with the reporting information for that state.The intake worker must then contact the other state and make a report.

If an intake report involves allegations or individuals (alleged perpetrator or alleged victim) in Washington and another state or country, the intake worker will screen the report with consultation from an intake supervisor and intake unit manager.

The APS intake unit manager will determine based on the information available whether APS assigns the report for investigation. Consult with the APS Senior Policy Advisor at APS Headquarters as necessary.

### Overview Chart: Sharing APS Intake Report Information with Others

| **APS Will Share Intake Report Information** | |
| --- | --- |
| **With** | **When** |
| Law Enforcement | Immediately when a crime is suspected, per [74.34.063(2)](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.063) |
| Medicaid Fraud Control Division | Anytime Medicaid fraud is suspected. |
| Complaint Resolution Unit (CRU) | Anytime the allegation involves provider practice issues in a DSHS licensed facility or certified program. |
| Department of Health: Health Services Quality Assurance (HSQA) | When the alleged perpetrator is a health care professional licensed, certified or registered by DOH under [Title 18 RCW](http://apps.leg.wa.gov/rcw/default.aspx?Cite=18), or a service or facility licensed, certified, or both, by DOH, including, but not limited to: [Chapter 70.41 RCW](https://app.leg.wa.gov/rcw/default.aspx?cite=70.41), [18.46 RCW,](https://app.leg.wa.gov/RCW/default.aspx?cite=18.46) [71.12 RCW](https://app.leg.wa.gov/RCW/default.aspx?cite=71.12), and [70.127 RCW](https://app.leg.wa.gov/RCW/default.aspx?cite=70.127). |
| Proper professional licensing authority | When the alleged perpetrator is a licensed, certified or registered by the authority under [Title 18 RCW](http://apps.leg.wa.gov/rcw/default.aspx?Cite=18), as per [RCW 74.34.063](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.063). Send an intake report, making sure to redact the names and demographic information of the victim and reporter. |
| HCS/AAA  DDA  RCS | Per this chapter and local procedures, for a purpose consistent with [RCW 74.34.095](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34), APS may share information from the intake report within DSHS on a need-to-know basis for the health, safety, and protection of the alleged victim. |
| DCYF | See the [Service Level Agreement](https://teamshare.dshs.wa.gov/sites/hcs/aps/After%20Event/Department%20of%20Children,%20Youth,%20and%20Families%202021.pdf) to the DSHS-DCYF Cooperative Agreement between DSHS, APS and DCYF unless prohibited by federal law. DSHS may share information contained in reports and findings with DCYF [RCW 74.34.063(5).](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.063) |
| Indian Tribes in Washington | Per the tribal regional customized negotiated working agreements with a tribe or with tribal law enforcement or APS equivalence if for the purpose consistent with [RCW 74.34.063](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.063) and [RCW 74.34.095](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.095). Consult with a supervisor prior to releasing information. Make appropriate redactions such as reporter’s name and other redactions required by law. |
| APS or Law Enforcement in Another State | Following review and approval of the intake unit manager in accordance with [RCW 74.34.095](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.095). |

## Screening Intake Reports

References:

* [Chapter 71A.12 RCW](https://app.leg.wa.gov/RCW/default.aspx?cite=71A.12)
* [RCW 74.34.020](https://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
* [WAC 388-101-3000](https://app.leg.wa.gov/wac/default.aspx?cite=388-101-3000)

APS shall initiate a response to a report, no later than 24 hours after knowledge of the report, of suspected abandonment, abuse, financial exploitation, neglect, or self-neglect of a vulnerable adult. A response includes screening in an intake report and assigning for investigation or screening out an intake report. Intake reports are screened based on definitions in [RCW 74.34.020](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020).

When screening intake reports, the APS worker will:

* Review the facts and circumstances known at intake.
* Compare information provided by the reporter, and any additional preliminary information gathered during the intake process, with the criteria identified in the section: [Circumstances under which APS will Screen-Out an Intake Report](#_Circumstances_Under_Which_3) and the section [Circumstances under which APS will Investigate.](#_Circumstances_under_Which_2)
* Decide if the intake report will, or will not, be assigned for an APS investigation based on the screening criteria.
* If the information from the reporter is insufficient to determine whether or not to assign the report for APS investigation, then attempt to gather additional information (e.g., make phone calls to collateral contacts and check readily available databases).



### Circumstances Under Which APS Will Investigate

When the allegations appear to contain elements of the [RCW 74.34.020](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.020) definitions of abandonment, abuse, financial exploitation, neglect or self-neglect, and the alleged victim appears to be a vulnerable adult as defined in [RCW 74.34.020](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.020), then assign for APS investigation if:

* The alleged victim lives:
  + At home or homeless
  + In an unlicensed setting
  + In a facility as defined in [Chapter 74.34 RCW](https://apps.leg.wa.gov/RCW/default.aspx?cite=74.34)
  + In a certified program setting, or group home as defined by [WAC 388-101-3000](https://app.leg.wa.gov/wac/default.aspx?cite=388-101-3000)
* The alleged victim is a vulnerable adult, and the alleged perpetrator is not affiliated with the facility, and the alleged victim lives:
  + In a foster home licensed by the Department of Children, Youth, and Families (DCYF) and is 18-21 years old
  + In a facility licensed or certified by Department of Health (DOH) (e.g., drug treatment facility)
  + At Western State Hospital or Eastern State Hospital

**NOTE**: When the vulnerable adult and allegation meet statutory requirements and the alleged victim resides in a DSHS licensed facility, screen the intake in whether or not the alleged perpetrator is related to the facility.

When the allegations appear to contain elements of the [RCW 74.34.020](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.020) definitions of abandonment, abuse, financial exploitation, neglect or self-neglect, but intake is unable to determine whether or not the alleged victim was a vulnerable adult as defined in [RCW 74.34.020](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.020) at the time of the allegation, assign the report for APS investigation.

If the alleged victim was a vulnerable adult prior to the current allegation, but at the time of the current allegation does not specifically meet any of the [Chapter 74.34 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34) vulnerable adult criteria:

* Assign the report for investigation when it appears that actions by the alleged perpetrator or others are the reason the alleged victim no longer meets the vulnerable adult criteria and APS has a good faith belief that the alleged victim would still meet the vulnerable adult criteria were it not for the intervention of others (e.g., is no longer receiving home care services, no longer has an IP, no longer lives in a facility, the deceased legal representative was not replaced).
* If an adult is not on services and the alleged perpetrator prevents the adult from applying for Medicaid or services, gather as much information as needed to discern whether the adult has care or ADL needs. If it appears that the adult is likely eligible for in-home or residential services, assign for investigation. If it remains unclear, staff with a supervisor or program manager.
* Do not assign the report for investigation if the person was considered a vulnerable adult due to being admitted to a facility, but chose to leave the facility prior to the allegation and does not meet any other vulnerable adult criteria.

### Circumstances Under Which APS Will Screen-Out an Intake Report

Review the facts and circumstances known at intake. Do not assign the report for APS investigation (screen-out the report) when any one of the conditions on the following [Screen-Out Decision Criteria Chart](#_Screen_Out_Decision) are present.

| **TIVA2 Designation** | **Criteria for Screen-Out** |
| --- | --- |
| Victim Not Vulnerable Adult | At the time of the alleged incident the alleged victim did not meet the definition of a vulnerable adult in [RCW 74.34.020](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.020).  Note: If the alleged victim goes in and out of vulnerable adult status, go [here](#_Circumstances_under_Which_2) for more screening decision information. |
| No RCW 74.34 Allegation | The report does not contain elements of abandonment, abuse, financial exploitation, neglect, or self-neglect as defined in [RCW 74.34.020](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.020). Confirm the allegation did not meet the definition in [Chapter 74.34 RCW](https://apps.leg.wa.gov/RCW/default.aspx?cite=74.34) at the time of the allegation. |
| Other Investigative Authority | The alleged victim is a vulnerable adult, but another investigative authority has jurisdiction (e.g., RCS for provider practice only).  Note: If the alleged perpetrator is a DSHS/AAA/Aging Network employee, go [here](#_Alleged_Perpetrator_is) for more screening decision information.  **Referrals to another investigative authority, including CRU:**   * If the report was made by fax, fax the report to the investigative authority and retain the fax receipt. * If the report was received through phone or online reporting, make the referral through TIVA2. Do not refer to CRU if CRU also received the same online report unless there is new information. |
| Isolated medication error, no injury | The allegation is a singular medication error that did not result in a negative effect on the alleged victim (e.g., wrong medication, dose, route, time of day, or patient). |
| Isolated financial exploitation | The allegation is a singular incident of financial exploitation of nominal value (e.g., eating another resident’s candy). This screen out criteria does not include allegations of reported financial exploitation of prescription medications. |
| Isolated no injury | The allegation is of a singular incident of suspected physical or mental abuse that resulted in no injury, unreasonable confinement, intimidation, or punishment. Case management, caregivers, or providers may have intervened.  Examples include, but are not limited to:   * Alleged isolated incident of physical abuse between residents or clients of DDA in a certified program that resulted in no injury, unreasonable confinement, intimidation, or punishment (e.g., such as a hair pull or being hit by a thrown object without injury). * Alleged isolated incident of mental abuse between residents in a licensed facility that resulted in no injury, unreasonable confinement, intimidation, or punishment. (e.g., such as calling each other names without injury). |
| Alleged Victim Deceased | The alleged victim is deceased at the time of APS intake and the allegation is self-neglect. |
| Observed, accidental falls that occur in a long-term care facility, certified program setting, or residential habilitation center | The alleged victim is a resident of a long-term care facility, or a client of a program or agency certified under [Chapter 71A.12 RCW](https://app.leg.wa.gov/RCW/default.aspx?cite=71A.12) (e.g., supported living agencies) and:   * The allegation involves a single accidental fall that was witnessed or observed by staff; and * There is no allegation that the fall resulted from a serious disregard of the consequences to the vulnerable adult by a person with a duty of care. |

If the intake report meets the criteria for screen-out:

* Follow guidance in the TIVA2 User Guide for screening out an intake. Link the intake report to the person management record at the time of the screen-out decision.
* Provide the reporter with potential services or resources if warranted (e.g., local domestic violence resource).
* Refer screened out APS intake reports to an appropriate resource for follow-up, including:
  + The entity designated to investigate identified concerns (e.g., RCS, DCYF).
  + HCS/Aging Network, or DDA case management system for their action when the alleged victim is one of their clients, and:
    - They were the source of the report; or
    - They were not the source of the report, but case management may want to evaluate and address the concerns.
* Create any referrals.
* All screen-outs will be reviewed by the intake supervisor.
* If an agency or reporter disagrees with the decision to screen-out the intake report, then the intake supervisor or unit manager will review the intake report, and:
  + Either agree with the original decision to screen-out the report or change the screening decision and assign for investigation.
  + Inform the APS worker or supervisor who made the original decision and the disagreeing party of your decision.

### Investigation Response Priority Categories: 24-hours, 5 business days, 10 business days

APS intake worker, intake supervisor, or intake program manager will:

* Review the facts and circumstances known at intake.
* Assign the report for investigation and give it a priority, based on the severity and immediacy of actual or potential physical, mental, or financial harm.
* Immediately notify the investigator and the APS supervisor or program manager when a 24-hour priority assignment is made.

| **Maximum Response Timeframe** | **Examples** |
| --- | --- |
| 24-hours | **Serious or life-threatening harm is occurring or appears to be imminent.**   * Emergency response summoned during intake (e.g., police, EMT, Designated Crisis Responder [DCR]). * Physical wounds such as a possible fracture, severe burn, laceration requiring sutures, head injury, internal injuries, bruising on the face or trunk. * Possible sexual assault within past 72 hours. * Self-neglect or neglect resulting in risk of freezing, starvation, or individual is in need of urgent medical attention and is refusing or unable to consent to medical care. * Caregiver has left a vulnerable adult without a means to protect or care for themselves. * Living environment has serious biological or physical hazards or major structural damage (e.g., drug lab on the premises, tree fell through the roof). * Report alleges forced isolation or imprisonment or use of restraints. * Financial exploitation that appears to be putting the AV in imminent risk of displacement or inability to meet their needs. |
| 5 business days | **Harm that is more than minor but does not appear to be life threatening at this time or may be ongoing.**   * Stable physical or mental condition that is not acute (e.g., depression, disease or illness, poor nutrition). * Chronic self-neglect. * Mental abuse that does not threaten the perceived safety of the AV. * Mismanagement of medication that does not create imminent jeopardy for the alleged victim. |
| 10 business days | **Harm that poses a minor risk at this time to health or safety and does not appear to be ongoing.**   * Allegation of an event that occurred weeks ago without apparent risk of reoccurrence. * Lack of appropriate contribution to food and shelter expenses by household members or failure to pay the vulnerable adult’s bills. |

The calculation of response time begins at the time that APS first has knowledge of the report (not at the point of assignment when the investigator first has knowledge).

If an intake worker is going on leave and has pending intakes, the supervisor must have a plan to ensure that pending intakes are completed.

### Assignment from Intake to an Investigation Specialist

Intake will assign self-neglect intake reports to the self-neglect specialist (SNS) following the criteria below. Assign intake reports to a SNS where there has been or is high risk of harm to the AV, including but not limited to the following:

* Reports that have a 24-hour priority designation
* Reports that involve an AV with four or more separate investigations of alleged self-neglect within the previous two years
* Reports that indicate a situation that is complex, potentially time intensive, and needs extensive case management

Intake will assign financial exploitation intake reports to the financial exploitation specialist (FES) following the criteria below. Assign intake reports to an FES where there has been or is high risk of significant financial harm to the AV, including but not limited to the following:

* Factors such as multiple financial accounts, investment or retirement accounts, trusts, or real property (land, home) transfers
* Causes imminent impact to obtaining basic necessities of life
* Symptoms of dementia or diminished capacity
* The report involves an AP appointed or acting as a fiduciary, guardian, or attorney-in-fact for the AV
* The allegation involves a large monetary value
* The report is identified as high profile
* Prior substantiated or inconclusive financial exploitation investigations

### The Alleged Victim Resides in a DSHS Licensed or Certified Program Setting

APS will conduct investigations when the alleged victim resides in a facility as defined by [RCW 74.34.020](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020), including NF, ALF, ESF, AFH or certified program settings and the alleged perpetrator is another resident, an employee, owner, volunteer, or not affiliated with the facility.

* APS will make referrals to RCS CRU when a report involves facility provider practice complaints.
* APS will not conduct investigations when the allegation is self-neglect.

### The Alleged Victim Resides in a Setting that is Licensed, Operated, or Certified by DCYF

When the alleged victim lives in a setting that is licensed, operated, or certified by the Department of Children, Youth, and Families (DCYF):

* APS will conduct investigations when the alleged perpetrator is notaffiliated with the residential setting (e.g., APS will investigate when the alleged perpetrator is a family member of the victim, a visitor, friend, or community member).
* DCYF (either Division of Licensed Resources [DLR] or CPS) will conduct investigations when the alleged perpetrator is the licensee/operator, staff, volunteer, or another resident.
* Communicate and coordinate the investigations as outlined in the Service Level Agreement (see the [APS SharePoint site for MOUs](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/start.aspx#/After%20Event/Forms/AllItems.aspx)) to the DSHS-DCYF Cooperative Agreement between DSHS, APS, and DCYF.

DCYF will conduct investigations for all alleged victims who are residing in a juvenile rehabilitation facility setting. Per the Service Level Agreement (see the [APS SharePoint site for MOUs](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/start.aspx#/After%20Event/Forms/AllItems.aspx)) to the DSHS-DCYF Cooperative Agreement between DSHS, APS and DCYF, APS will be available, as requested by DCYF, to identify and provide consultation to address the needs of the 18-21 year-old alleged victims.

### The Alleged Victim is a Patient at Western State Hospital or Eastern State Hospital

APS will investigate if the alleged perpetrator is not affiliated with the hospital, and the allegations are of abandonment, abuse, financial exploitation, or neglect. APS will not investigate when the alleged perpetrator is staff, a volunteer, or another resident

### The Alleged Victim is an Inmate in a Facility Operated by the Washington State Department of Corrections (WADOC)

Refer to the [Interagency Agreement](https://teamshare.dshs.wa.gov/sites/hcs/aps/After%20Event/Department%20of%20Corrections%20Dated%20(2016).pdf) between the Washington State Department of Corrections and Washington State Department of Social and Health Services (DSHS) Adult Protective Services (APS).

### The Alleged Victim is Deceased at the Time of Intake

The intake worker will:

* Refer all intake reports of abandonment, abuse, financial exploitation, or neglect that resulted in death to law enforcement. Do not refer allegations of self-neglect.
* Screen-out all reports of self-neglect.
* Notify the intake supervisor if the death is believed to have a nexus to the allegation.
* Assign the report for APS investigation when:
  + The alleged victim was a vulnerable adult at the time of the allegation, and the allegations are of abandonment, abuse, financial exploitation, or neglect. The purpose of an APS investigation is to attempt to determine the validity of the allegation of abandonment, abuse, financial exploitation, or neglect.

Determinations about the cause of death or factors that may have contributed to a death are made by the coroner, medical examiner, law enforcement, and medical personnel – not APS.

## Investigation: Procedures for All APS Investigations

References:

* [Chapter 74.39 RCW](https://app.leg.wa.gov/rcw/default.aspx?cite=74.39)
* [RCW 74.34.020](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
* [RCW 74.34.035](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.035)
* [RCW 74.34.063](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.063)
* [RCW 74.34.068](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.068)
* [RCW 74.34.095](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.095)
* [RCW 74.34.180](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.180)
* [RCW 74.34.305](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.305)

APS workers gather and evaluate information from observations, review of pertinent records, and interview of key persons including the reporter, the alleged victim, the alleged perpetrator, and collateral contacts.

### Searching Databases

The APS worker will search APSAS, TIVA, and TIVA2 for historical information in preparation for investigation. The investigator may search any other relevant database that would provide information to assist in the investigation. Other systems include, but are not limited to:

* Automated Client Eligibility System (ACES)
* Barcode
* Felony Offender Reporting System (FORS)
* Washington Health and Life Events System (WHALES)
* Accurint
* Client Registry
* Region or location specific systems

### Consent to Investigate

Consent of the alleged victim or legal representative is not required in order to conduct an APS investigation or interview. However, if known by APS that an alleged victim or alleged perpetrator has a legal representative, APS will attempt to provide a courtesy verbal notification to the legal representative that an investigation/interview is being conducted. APS will not provide the courtesy notification if the legal representative is an alleged perpetrator or APS has reason to believe that notification would compromise the safety or well-being of the alleged victim or the investigation. See section on [Third Party Presence](#_Third_Party_Presence) during an interview.

The alleged victim or legal representative must provide written consent prior to APS provision of protective services. See the [Protective Services](#_Protective_Services) section for more information.

### Obtaining Documentary Evidence

APS has the authority to request medical records and financial records of the vulnerable adult without the consent of the vulnerable adult. [*RCW 74.34.035(10)*](https://app.leg.wa.gov/rcw/default.aspx?cite=74.34.035).

APS cannot obtain medical records of the alleged perpetrator without the consent of the alleged perpetrator. However, if the alleged perpetrator resides in a DSHS licensed or certified facility or program, APS can obtain any facility record without the consent of the alleged perpetrator. APS can request financial records of the alleged perpetrator without the consent of the alleged perpetrator as long as the records may be relevant to show financial exploitation of the vulnerable adult.

### Interviews – General Protocol for All APS Interviews

APS workers will follow the following principles when conducting all interviews.

* Disclose the APS worker’s identity and role.
* Identify the purpose of the interview in a language and level of detail appropriate to the situation.
* Ask questions to identify whether other allegations or safety concerns may be present during the investigation. If new information is discovered during the investigation, the investigator must address the new information.
* Do not read the intake to the person being interviewed.
* Do not disclose the identity of the reporter or witnesses. [*RCW 74.34.035*](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.035)*;* [*RCW 74.34.068*](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.068)*;* [*RCW 74.34.095*](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.095)*;* [*RCW 74.34.180*](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.180)*.*
* Terminate the interview if:
  + There is reason to believe the APS worker’s safety is at risk.
  + The APS worker is asked to leave, or the person being interviewed says they do not want to continue the interview.
  + Behaviors by any party are impeding the interview process.
* If the interview is terminated and it’s safe to do so, ask the person being interviewed if they would like another opportunity to tell their side of the story (e.g., attempt to reschedule the interview or ask the person being interviewed if they would like to submit a written statement).
* Enter investigation collaterals on the Participants tab in TIVA2.

#### Interpreters

If there is a reported communication barrier, consult with the case manager, provider, or reporter to determine if and how the person can communicate using sign language, adaptive equipment or procedures or some other process (e.g., blinking, hand squeezing).

Follow DSHS procedures to obtain a certified interpreter through the statewide contract. See [LTC Manual Chapter 15b, Limited English Proficient Persons](http://adsaweb.dshs.wa.gov/docufind/LTCManual/) for more information on interpreter services.

See [Administrative Policy 18.82](http://one.dshs.wa.lcl/Policies/Administrative/DSHS-AP-18-82.pdf) for more information on bilingual/multilingual employees as interpreters.

Never use family members or friends of the interviewee to interpret or translate.

#### APS Worker Interview Safety

Do not conduct a private, face-to-face interview with an alleged victim, alleged perpetrator, or collateral contact when there is reason to believe it is unsafe to do so. Consider the environment, the person to be interviewed, and the circumstances, including but not limited to history of allegations or incidents, the severity of any single incident, previous examples of aggressive or unpredictable behavior.

Discuss concerns with a supervisor/program manager to determine appropriate precautions and options for obtaining information that may include but is not limited to:

* Conduct the interview in a neutral public setting rather than a private home (e.g., APS office).
* Request stand-by assistance from law enforcement at the home during the face-to-face interview. Law enforcement enters a residence before the APS worker when conducting a joint visit to a location that poses a safety concern.
* Ask the interviewee to submit a written statement in lieu of an interview.

For additional information, see [Safe Field Work Practices](#_Safe_Field_Work_1) and APS Training Academy materials.

### Interviewing the Reporter

The APS worker assigned to investigate the allegation shall attempt to interview the reporter for verification, clarification, additional information related to the allegations and any safety concerns. At the earliest opportunity in the beginning of the investigation, contact the reporter unless:

* The reporter is an employee, owner, volunteer, or resident of a facility. The APS investigator will not contact the reporter prior to making an unannounced visit to the facility. All visits are made unannounced. However, APS will interview the reporter, AV, AP, or other collaterals once at the facility.
* The report was submitted anonymously.
* The report was submitted by a person without any specific personal knowledge of the situation (e.g., if the report came from law enforcement, the APS investigator will communicate and coordinate with the assigned officer conducting their investigation rather than the clerk who faxed the referral to APS).

### Interviewing the Alleged Victim

Interviews with alleged victims are unannounced, private, face-to-face interview within the response priority timeframe.

The department is required to give vulnerable adults, who are the subject of APS investigations, a list of their rights. [*RCW 74.34.305*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.305)*.* The [DSHS form 14-521 “Your Rights”](https://www.dshs.wa.gov/sites/default/files/forms/word/14-521.doc) mirrors the set of rights listed in the law and must be provided to the alleged victim in every investigation.

#### Timeframe to Conduct the Alleged Victim Interview

Conduct a face-to-face interview with the alleged victim within the [maximum response time](#_Investigation_Response_Priority_1) allowed by the priority designation.

**Within the designated response time** (e.g., before the end of the 5th working day after the knowledge date of intake of a report prioritized as 5 business days) the APS investigator will:

* Initiate the investigation by gathering information pertinent to the allegation.
* Conduct a face-to-face interview with the alleged victim within the assigned timeframe.
  + When a new intake is linked to an open investigation and contains a new allegation or new incident, the assigned investigator will conduct a new initial face to face (IFF) within the designated response time.
* Screen the AV for decision-making ability.
* Provide the AV with the [DSHS form 14-521 "Your Rights"](https://www.dshs.wa.gov/sites/default/files/forms/word/14-521.doc).
* Create Person Management Record at the receipt of an investigation assignment if you have sufficient information about the alleged victim (AV) and the alleged perpetrator (AP). If you do not have a name for the AV or AP, create the person management records once you obtain the necessary information.
  + By 31 days, if information is still unknown, staff with your supervisor on ways to obtain that information to create the person management records. If information is still unknown, create the person management record with ‘unknown’ in the fields where the information is lacking, e.g., ‘unknown’ ‘unknown’ if the entire name is unknown. Update information on the person management record when known.
  + When an intake is delinked from a person management record or an investigation, the intake ‘unfreezes.’ This intake is considered an original, historical document and must not be edited, except for a making a change in the screening decision or to linking it to another investigation. Only staff with the specific securities have the ability to delink intakes from investigations.

#### Timeframe Exceptions

**Not requiring supervisor or program manager review and approval**.

The following circumstances may be an authorized exception to the alleged victim initial face-to-face timeframe:

* The alleged victim of a report with a 24-hours response time has been admitted to the hospital for medical intervention and there is no immediate need for protective services by APS.
* Law enforcement or medical staff request APS to delay the interview for a compelling legal or medical reason.
* The visit was attempted, but interference by another person prevented APS from accessing the alleged victim.
* The visit was delayed as a direct result of a temporary safety concern (e.g., blizzard conditions prevented travel; worker chose not to proceed into the yard until someone could remove the ferocious dogs).
* The interview was delayed because an interpreter was not available.
* The timing of the interview was selected to accommodate the specific request of the alleged victim (e.g., when unannounced visit was made the alleged victim had a pre-scheduled activity or requested to make arrangements to have a third-party present).

**Requiring supervisor or program manager review and approval**

The following circumstances may be an authorized exception to the alleged victim initial face-to-face timeframe with prior approval:

* Additional information obtained by APS after the case was assigned for investigation indicates the harm or risk of harm is not as great as was initially believed when the report was screened and prioritized at intake.
* Any other reason not considered a pre-authorized exception. Document this in a case note and provide a brief explanation.

In circumstances where the face-to-face interview with the alleged victim did not occur during the designated priority response time, apply the following:

* When the alleged victim was not home when the APS worker made an unannounced visit for an initial face-to-face interview on a report with a 24-hours response time, attempt all subsequent interview attempts every 24 hours. This may include weekends and holidays. At the discretion of the program manager or supervisor, contact law enforcement to request a welfare check of the alleged victim.
* If the attempted interview(s) for 5 business days or 10 business days designated response timeframe is unsuccessful, an attempt to conduct the interview must be made within the next five business days from the initial response due date.
* If APS worker is having difficulty getting to meet with the alleged victim for an interview, consult with the supervisor or program manager to determine an alternative approach for access (e.g., depending on the circumstances, consider involving law enforcement to address safety concerns, obtaining an injunction if access was denied, interviewing collateral contacts or reporter to determine the whereabouts of the APS alleged victim, or calling the alleged victim and scheduling a visit).
* After a minimum of three separate, documented, unsuccessful attempts, two of which must be unscheduled in-person attempts at various times to locate the alleged victim, consult with your supervisor to determine whether to send a letter to the alleged victim’s last known address. When mailing the AV request for interview, include the [DSHS form 14-521 "Your Rights"](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/ABC%202020/Region%203/Module%204%20Handouts%20and%20Activities/7%20-%2014-521%20AV%20Your%20Rights.doc&action=default&DefaultItemOpen=1). If there is no reply, again, consult with your supervisor to determine other possible approaches. After all possible attempts to contact the alleged victim were unsuccessful, consult with a supervisor to determine whether the investigation may be closed without contacting the alleged victim.

#### Scheduled versus Unscheduled Interview

##### Non-Facility Visit

Every attempt will be made to complete an unannounced initial home visit to interview the alleged victim. With prior supervisor approval it may be appropriate to schedule the initial face-to-face interview when:

* Earlier unannounced attempts to meet with the alleged victim were unsuccessful or it is highly unlikely the alleged victim will be available without scheduling.
* Scheduling is needed to accommodate a third-party presence or non-residential location (e.g., if the interview will be conducted at a worksite).
* Scheduling will mitigate concerns about safety.

If the APS worker calls the alleged victim to attempt to schedule an interview, but the alleged victim is unable or unwilling to set a date, time, and location for a meeting:

* The APS worker will make an unannounced visit within the required response time to attempt a face-to-face interview. (Note: In person, the alleged victim may again decline the request for a visit. Provide the AV with the [DSHS form 14-521 "Your Rights"](https://www.dshs.wa.gov/sites/default/files/forms/word/14-521.doc). Document the attempt and pertinent observations such as the environment and condition of the alleged victim.)
* Conversation with the alleged victim during the scheduling telephone call will not replace the face-to-face interview.

##### Facility/Certified Program Setting Visit

For facility visits or visits to a certified program setting, APS worker will:

* Begin all interviews (AV, AP, reporter, and collaterals) and record requests with entrance to the facility, and not before, so as not to alert the facility of a pending investigation
* Notify the onsite administrator, manager, or owner upon arrival of presence in facility and that APS has launched an investigation
* Not disclose investigation information
* Not acknowledge whether RCS provider practice is involved
* Review the client resident record. The APS worker may request copies of the client resident record as part of the investigation. If the facility or supported living program refuses access to the record, provide a copy of the [PHI Request letter](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/letters/PHI%20Request.docx&action=default). If there is continued denial of documents, make a CRU referral. If RCS provider practice is involved, coordinate with the RCS complaint investigator (if not available, contact the RCS Field Manager).

The APS investigator will remain onsite at the facility or certified program setting in the event that safety concerns exist, or until the safety issues are resolved, through initiation of protective measures. For example:

* Call 911 for medical emergencies or for concerns of criminal behavior.
* Contact an APS supervisor for coordination with RCS Field Manager (FM). In the FMs absence, contact the RCS Regional Administrator (RA), so that RCS can address any provider practice issues to ensure the safety of the remaining residents/clients.

Nursing homes must perform their own investigations and take action within five business days of the incident, per federal rules.

#### Third Party Presence in an Interview

Interview the alleged victim in private, except under the following circumstances:

* More than one investigator is present.
* An interpreter or communication aide is present.
* The alleged victim requests the presence of a third party (for example, a friend, family member, and guardian).
  + If the third party requested by the alleged victim is the AP in this or a related investigation, ask to speak first to the alleged victim in private to ensure the AV knows the nature of the interview and verify that they still wish to have the AP present while speaking to the APS worker.
  + If a third party makes the request to participate in the interview, before proceeding with the interview, ask the alleged victim, in private, if they agree to the presence of the third party. Adhere to the expressed wishes of the alleged victim unless APS has reason to believe the presence of the third party could compromise the safety or well-being of the vulnerable adult.
  + The third party can ask and answer questions during the interview. If the third party responds to questions about the allegation, attempt to verify with the alleged victim that the third party is speaking for, or on behalf of, the alleged victim.
* Document in the case notes narrative the name and role of the third party who was present at the alleged victim’s request.
* Clearly document the comments of the third party whenever the third party is speaking for, or on behalf of, the alleged victim.

#### Decision-Making Screening

Evidence must be collected from various sources to establish a comprehensive screening of the alleged victim’s decision-making ability at the time of the allegation, as well as the time of the initial face-to-face interview. Decision-making screening includes observations, collateral statements, decision-making screening tools, review of documents, and any existing history. The decision-making screening tools listed are approved for use in APS investigations, but they are not to be used as the only source of evidence of decision-making screening.

* The Mini-Mental State Exam (MMSE) tests cognitive function in these areas: orientation, registration, attention, calculation, recall, and language.
* The Short Portable Assessment for Everyday Decision-Making (SPACED) analyzes decision-making ability and considers comprehension, understanding, comparative reasoning, and consequential reasoning. Do not use the SPACED tool to screen decision-making ability in situations that may inadvertently re-victimize the individual, such as in interviews regarding sexual abuse allegations.

Screen the alleged victim in every investigation for decision-making ability to determine the alleged victim’s safety, whether or not protective services are needed, and which protective services are needed. It is important to note that a vulnerable adult’s cognitive and physical conditions can change quickly, so reliance upon past information is not dependable.

A decision-making screening tool is required to be attempted during an initial face-to-face interview. If the decision-making screening tool is refused or unable to be completed, the following is required:

* Current medical records (previous 30 calendar days from the initial face-to-face)
* At least two collateral statements (at least one must be from a medical professional) that saw the subject face-to-face within 30 calendar days preceding the initial face-to-face.
  + Professional medical personnel from whom statements regarding decision-making ability can be obtained include physicians, advanced registered nurse practitioners, registered nurses, and certified physician assistants.
  + Document the information you obtained in a case note. The case note must include statements regarding why a collateral believes the subject has or does not have decision-making ability.

Screen the alleged victim’s entire situation including factors that might impact a person’s decision-making ability, such as communication barriers, medication interactions, illnesses, depression, time of day, dehydration, and nutrition.

Contact health care professionals when the alleged victim’s decision-making ability is unclear based on observations, collateral statements, decision-making screening tools, review of documents, and any existing history. First, attempt to contact the health care professional by phone or in person. If the attempt is unsuccessful, use the [PHI Request letter](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/letters/PHI%20Request.docx&action=default&DefaultItemOpen=1) to only obtain necessary and relevant information. Obtain declarations, if possible.

Document the above information in case notes and include:

* The screening tool used and the results of its administration
* Your observations during the face-to-face interview of the individual’s responses to questions and the screening tool. Consider (but not limited to):
  + Were the responses relevant to the question asked or did the individual give tangential or irrelevant responses to questions?
  + Was the individual distracted during the interview and why?
  + Did the individual refuse some or all questions and why?
* Statements from collaterals
  + Include any deterioration of decision-making ability in recent past
* Information from medical records that address decision-making ability (if available)
* Statements from professional medical personnel that address decision-making ability (if available)
* Document when a referral for an evaluation by a mental health professional was made
  + Include any deterioration of decision-making ability in recent past.

The MMSE or SPACED may also be used with screening the alleged perpetrator’s decision-making ability.

#### Safety Screening

At all initial face-to-face interviews, the APS worker will screen for safety concerns as outlined on the safety screening form for the alleged victim. Following the completion of the safety screening form, the APS worker will:

* Complete the action dictated by the form at the end of the initial face-to-face interview.
  + **Green safety decision**: Continue with the investigation as normal.
  + **Yellow safety decision**: Attempt to inform the alleged victim of identified safety concerns. Staff with supervisor at earliest opportunity to discuss appropriate actions. The investigator will make a case note stating: “Staffed investigation with supervisor”.
  + **Red safety decision**: If it is safe to do so, attempt to inform the alleged victim of identified safety concerns. As soon as it is safe to do so, immediately staff with supervisor to discuss appropriate actions. The investigator will make a case note stating: “Staffed investigation with supervisor”.
* Upload the form into TIVA2 within 10 business days of the completion of the initial face-to-face interview using the following standards:
  + Document type: “Health / Safety & Medical”
  + Document upload name: “safetyscreen”

Document the upload of the safety screening with a corresponding case note including the final safety decision and a brief explanation of why the selection was made. Use case note activity type Investigation with Action type “Document reviewed”.

#### Unable to Establish if the Alleged Victim was a Vulnerable Adult at the Time of the Allegation

When an intake is assigned as unable to determine for VA status, and during the course of the investigation the VA status cannot be established for the time of the allegation:

* Staff the investigation with the supervisor or program manager.
* If there is reason to believe that the person may be considered a vulnerable adult at the time of the allegation, but the evidence is not sufficient to confirm VA status, and not sufficient to say the person is not a VA, the investigator will close the investigation with an Inconclusive finding when all available supporting evidence is gathered. The investigator will enter a case note with a thorough explanation of what was attempted to determine VA status and why the alleged victim may meet vulnerable adult criteria.

#### The Alleged Victim does not meet Vulnerable Adult Status at the Time of the Allegation

If it is determined through the investigation that the alleged victim is not a vulnerable adult at the time of the allegation, close the APS investigation at the earliest point possible as No APS – Not VA and refer the individual to other resources for appropriate services.

### Interviewing the Alleged Perpetrator

During the course of the investigation, determine the appropriate time to conduct the interview based on relevant considerations that include, but are not limited to, safety of the alleged victim and not compromising the investigation.

* Before attempting an AP interview, gather all information necessary to conduct a thorough interview.
* Attempt a face-to-face interview with the AP within 60 calendar days of the initiation of the investigation.
* Do not share reporter information.
* Make no less than three attempts to interview the alleged perpetrator face-to-face. Attempts can include phoning the AP to schedule a face-to-face interview appointment. A final attempt can be sending the AP a letter requesting that the AP make contact to schedule an interview.
* Document in the case notes any successful and unsuccessful attempts to interview the alleged perpetrator. If the alleged perpetrator was not interviewed during the investigation, document the specific reasons why.
* An interview with an alleged perpetrator may be scheduled to accommodate the alleged perpetrator’s work schedule, desire to have a third-party present, or to address APS worker safety concerns.
* APS will attempt to obtain information using alternate methods when the alleged perpetrator:
  + Has declined requests by the APS worker to meet in person
  + Is incarcerated
  + Presents a safety hazard to the APS worker

Provide the AP with the [DSHS form 06-188 APS Investigations Fact Sheet](http://forms.dshs.wa.lcl/formDetails.aspx?ID=72320) in every investigation, prior to initiating the AP interview.

* When mailing the AP a request for interview, include the [DSHS form 06-188 APS Investigations Fact Sheet](http://forms.dshs.wa.lcl/formDetails.aspx?ID=72320).
* If AP declines a face-to-face interview, but agrees to participate in a telephonic interview, read the information from the [DSHS form 06-188 APS Investigations Fact Sheet](http://forms.dshs.wa.lcl/formDetails.aspx?ID=72320) prior to the interview. Mail or email the [DSHS form 06-188 APS Investigations Fact Sheet](http://forms.dshs.wa.lcl/formDetails.aspx?ID=72320) to AP at the conclusion of the telephonic interview.

Inform the alleged perpetrator they have the option of inviting a third party to be present during the interview (for example, a friend, family member, guardian, attorney, union representative). The third party must not be an alleged perpetrator or an alleged victim in this or a related investigation. If the AP wants a third-party present, continue the interview after the third party has had the opportunity to accept or decline the alleged perpetrator’s invitation to participate. Inform the AP that they can provide documents or witnesses related to the allegations.

* Document the name and role of the third party, and that they were present during the interview at the request of the person being interviewed. The third party can ask and answer questions during the interview. If they respond to questions about the allegation, verify with the AP that the third party is speaking for, or on behalf of, the AP.
* Clearly document the comments of the third party whenever they are speaking for, or on behalf of, the AP.
* Do not include third party issues (e.g., irrelevant comments or questions about employment or personnel matters) in the TIVA2 case notes.

If it is discovered during an investigation that the AP on the intake was listed as the incorrect person, or unknown, verify the identity of the AP with supporting evidence (i.e., collaterals, documents). If the alleged perpetrator is unknown, the APS worker must exhaust all opportunities to identify the alleged perpetrator before closing the investigation. If the alleged perpetrator is identified incorrectly, close the current investigation with a No-APS finding. Create a new intake with the correct AV and AP and initiate the investigation.

### When a Face-to-Face Interview is Not Required

Perform a face-to-face interview with the AV/AP. A face-to-face interview is not required when:

* The AV/AP is deceased.
* The AV/AP cannot be located by APS when all attempts are exhausted (refer to [Interviewing the Alleged Victim](#_Interviews_–_General) or [Interviewing the Alleged Perpetrator](#_Interviewing_the_Alleged_1)).
* The AV/AP eludes or refuses to communicate with APS.
* The AV/AP is incarcerated (refer to [Person to be Interviewed is Incarcerated](#_Person_to_be_1)).
* The situation poses a serious safety risk to the APS worker or to others and the risk cannot be diffused. Notify law enforcement if criminal activity has occurred (refer to [Safe Field Work Practices](#_Safe_Field_Work_1)).
* Law enforcement or medical staff request APS to not interview the AV/AP because of a compelling legal or medical reason.
* The APS worker has already obtained sufficient investigation information to determine that the alleged mistreatment was not possible and will be found “unsubstantiated” (e.g., allegations by the person with dementia, of financial exploitation, are unsubstantiated because no funds are missing, and the alleged perpetrator did not have any access to them). Supervisory approval is required before closing a case with an unsubstantiated finding under this circumstance.
* The investigation is closed [No APS–SN Already Resolved](#_Investigation_Findings).

### Interviews – Unique Circumstances

In addition to implementing the policy and procedures for all investigations, also implement the additional APS policy and procedures that apply to these unique circumstances.

#### Person to be Interviewed is Incarcerated

Do not conduct an in-person interview with an alleged perpetrator, alleged victim, or collateral contact while that person is in jail or prison. Consult with your supervisor or program manager to determine if APS will write the person a letter seeking a voluntary written statement or voluntary telephone interview. Before proceeding, verify with law enforcement or prosecutor that they have no objections to APS communicating with the incarcerated person. The voluntary statement can be written on the [APS Declaration Form](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/Resources/APS%20Declaration%20Form.doc&action=default&DefaultItemOpen=1).

#### Person to be Interviewed is a Minor

Consent of the parent or legal representative is not required in order for APS to interview a minor (a person under age 18). However, if known by APS that the alleged perpetrator or collateral contact is a minor, APS will attempt to provide a courtesy verbal notification to the parent or legal representative that an investigation/interview is being conducted.

* Do not provide the courtesy notification if the parent or legal representative is an alleged perpetrator in this or a related case, or APS has reason to believe that notification would compromise the investigation or the safety and well-being of the alleged victim.
* If the minor has a case manager (e.g., DDA, DCYF) attempt to notify the case manager before your interview of the minor.
* If criminal activity is suspected, check with law enforcement and/or the prosecutor to determine if criminal charges are pending or filed related to this case. Proceed only if they have no objections to APS interviewing the minor.
* If you want to interview the minor at school:
  + Contact the school principal or counselor in advance to notify them of the APS investigation and request their assistance in arranging the meeting with their student.
  + When you arrive at the school, inform school personnel who you are and what you are doing there.
* Make clear that their participation in the conversation is voluntary and the minor is free to leave at any time they choose.
* If the parent or legal representative is not attending the interview, inform the minor they can have an adult third party present during the interview. Ask the person selected by the minor to participate. If that person declines, ask the minor if there is anyone else they would like present.

#### Person to be Interviewed has a Legal Representative

Consent of the legal representative (guardian, conservator, attorney-in-fact) is not required in order to conduct an APS investigation or interview. However, if known by APS that an alleged victim, alleged perpetrator, or collateral contact has a legal representative, APS will attempt to provide a courtesy verbal notification to the legal representative that an investigation/interview is being conducted. APS will not provide the courtesy notification if the legal representative is an alleged perpetrator or APS has reason to believe that notification would compromise the safety or well-being of the alleged victim or the investigation.

#### A Person is Reported to be “Non-Interviewable”

If the alleged victim is available but is reported to be non-interviewable because he or she is unable to verbally communicate (e.g., has severe dementia, a profound developmental disability, mental illness, or physical illness) consult with the case manager, provider, or reporter to determine if the person can communicate using other methods such as: sign language, adaptive equipment or other procedures.

* If so, arrange for a certified interpreter or appropriate assistance and conduct the interview.
* If not, conduct a face-to-face visit and document your observations of the environment and the person you went to meet (verbal and non-verbal communication).

#### Alleged Perpetrator is a DSHS Employee, AAA Employee, or AAA Subcontractor (including Employees in RHCs and SOLAs)

In addition to the standard procedures, follow the protocol in this section when the alleged perpetrator is a DSHS employee, contracted agent of the state (AAA employee), or an AAA subcontractor.

As soon as it is suspected that the alleged perpetrator may work for DSHS, AAA, or an AAA subcontractor, APS will follow the process outlined in the Flow Chart to obtain answers to key questions and determine the appropriate procedures to implement. This includes applying the Restricted Case function, notifying law enforcement of any potential crimes, and informing the APS Appointing Authority. If faxing any documents related to an alleged perpetrator who is a DSHS Employee, AAA Employee, or AAA Subcontractor, use only a confidential fax line and consult with your supervisor or program manager and the Regional Administrator prior to faxing.

Do not provide any notification letter or other documents (e.g., outcome report, case notes, referrals, intake notes) to a case manager. The outcome report and notification letter are to be given only to the APS Regional Administrator.

Ask the following questions (see the chart titled, Procedure for Investigation of DSHS/AAA/AAA Subcontractor Employee Alleged Perpetrator):

1. *Is the alleged perpetrator a DSHS/AAA employee or an AAA subcontractor?*
   1. **NO** -- implement the [standard investigation procedures](#_Interviews_–_General_1) (see Flow Chart: Box A)
   2. **YES** -- ask the next question
2. *Does the alleged perpetrator work in a position with unsupervised access to vulnerable adults or children?*
   1. **NO** -- implement the procedures identified in Flow Chart Box B
   2. **YES** -- ask the third question
3. *Is the alleged victim affiliated with the alleged perpetrator’s work role? (e.g., is the alleged victim a client of the alleged perpetrator or the alleged perpetrator’s agency?)*
   1. **NO** --implement the procedures identified in Flow Chart, Box C
   2. **YES** -- implement the procedures identified in Flow Chart, Box D or E

**See Procedure for Investigation of DSHS/AAA or AAA Subcontractor Employee Alleged Perpetrator Flow Chart**

1. Flow Chart Box D when the AP is an AAA employee or AAA subcontractor, or
2. Flow Chart Box E when the AP is a DSHS employee.

**NOTE**: To find out if a DSHS employee identified as the alleged perpetrator has unsupervised access to vulnerable adults or children on the job, the Regional Administrator or Deputy Regional Administrator will call the Human Resources Manager (APS Senior Business Partner) of the DSHS Human Resources Division (HRD). Identify yourself as being with APS and ask if the DSHS employee is in a “covered position.” Provide the Human Resources Manager with available identifying information for the DSHS employee, e.g., full name, date of birth, position number. A person working in a covered position has unsupervised access to vulnerable adults or children.

Diagram

Description automatically generated

Communicate and coordinate with law enforcement or the Washington State Patrol (WSP) using the standard procedures, including:

* Whenever the intake report or investigation indicates that the alleged abuse, neglect, abandonment or financial exploitation may be criminal, make an immediate report to law enforcement, as required under [RCW 74.34.063(2)](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.063).
* If a report has been made to law enforcement or WSP, attempt to communicate and coordinate with them to determine when APS should proceed with the investigation.
* Conduct the APS interview with the alleged perpetrator with the presence or authorization of law enforcement or WSP.
* Inform law enforcement or WSP of any protective services provided to the alleged victim.

The APS Regional Administrator is responsible for notifying the AP’s DSHS Appointing Authority and the DSHS HRD Director, or the AAA Director, if the allegation is:

* Substantiated by APS, or
* Accepted as an APS referral by law enforcement.

If notification letters are faxed, use only a verifiable confidential fax line directly to the Appointing Authority.

#### Alleged Perpetrator is DCYF Employee

Upon receipt of an allegation that includes a Department of Children, Youth, and Families (DCYF) employee and the allegation has a nexus to the employee’s position, the APS Appointing Authority will contact the APS Director or Deputy Director to consult.

#### APS Investigation of a Personal Aide providing Self-Directed Care

Self-directed care may be provided through a state-funded, federally funded program or private payment.

Use the following criteria to determine if the alleged perpetrator is a personal aide providing care that is self-directed by the alleged victim per [Chapter 74.39 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.39). If the response to **every** question is “yes,” then the personal aide is providing self-directed care:

* Does the alleged victim live in a residence that does not require licensure?
* Is the alleged victim without a legal guardian for medical decisions? (i.e., is the alleged victim legally competent to direct his or her own health care?)
* Does the alleged victim have a functional disability that prevents performance of a health care task (the health care task must be prescribed by a health care professional; over the counter medication does not apply) for him or herself?
* Does a personal aide provide the health care task? (Note: The personal aide may also be performing other personal care functions for the alleged victim).
* Is the personal aide being paid or compensated to perform the task?
* Does the alleged victim, who would otherwise be performing these health care tasks for themselves, personally direct the task?
* Is the task under treatment orders or prescriptions from a licensed health care provider?
* Did the alleged victim inform the health care provider that they would be self-directing a personal care aide to perform the task?

Additionally, if the alleged victim is receiving services through a program administered by the state, then in addition to a “yes” response to all of the questions above, the following information will assist APS in identifying situations that involve a self-directed care relationship:

* The CARE assessment and care plan or ISP (Individual Service Plan for clients of DDA) should describe the specific self-directed health care tasks.

Follow the [standard APS procedures](#_Interviews_–_General_1) when the investigation does not include allegations related to a specific health care task.

When the investigation involves an allegation related to a specific health care task being self-directed by the alleged victim and under the treatment order of a health care provider:

* Review the health care task with the alleged victim.
* If the alleged victim receives care through a state-funded program, review the CARE assessment and care plan for a description of the services.
* Contact the health care professional who ordered the treatment to determine the specific treatment orders.
* Request assistance from a HCS Community Nurse Consultant, if needed, for the investigation or review of the medical aspects of the case.

#### The Alleged Perpetrator is a Minor

APS will conduct investigations when the alleged perpetrator is a minor (17 years of age or less). The age of the alleged perpetrator is determined based on their age at the time of the alleged incident.

##### Alleged Perpetrator is 12-17 Years of Age

When the AP is age 12 through age 17, the investigator will complete an AV interview, gather evidence, offer protective services, contact collateral contacts, and interview the AP. Consent from a parent or guardian is not required to conduct an interview with the minor. Notification to the parent or guardian should be provided prior to the interview when the notification will not compromise the integrity of the interview or investigation.

At the beginning of the AP interview, provide and review with the AP with the [DSHS form 16-256 APS Youth Investigations Fact Sheet](http://forms.dshs.wa.lcl/formDetails.aspx?ID=78105). Read the [DSHS form 16-256 APS Youth Investigations Fact Sheet](http://forms.dshs.wa.lcl/formDetails.aspx?ID=78105) to the AP and allow the AP to ask clarifying questions regarding the interview process prior to asking questions about the allegation. Ensure the AP is aware of their right to have an adult present. If at any time during the interview the AP requests an adult, immediately stop the interview and reconvene when an adult is present.

Document the initial substantiated finding as Youth – 12 to 17 when the behavior meets all of the elements of the [RCW 74.34.020](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020) definition of the alleged mistreatment. The AP does not have an opportunity to request a hearing to challenge a youth finding. The youth finding will not be forwarded to BCCU, and the minor will not be placed on the Vulnerable Adult Abuse Registry.

If the AP has a DCYF or DDA case manager, verbally notify the manager of the outcome to ensure the case manager is aware of the concerns identified in the investigation and has an opportunity to address their client’s needs.

##### Alleged Perpetrator is 11 Years of Age or Younger

The investigator will complete an AV interview, gather evidence, offer protective services to the alleged victim, and contact collateral contacts as outlined in policy but will not complete an AP interview with an alleged perpetrator 11 years of age or younger. The investigator will select AP Interview Not Required and provide a brief explanation that the AP is 11 years of age or younger and an AP interview will not be conducted.

Document the finding as Youth – 11 or younger when the behavior meets all of the elements of the [RCW 74.34.020](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020) definition of the alleged mistreatment. The AP does not have an opportunity to request a hearing to challenge a youth finding. The youth finding will not be forwarded to BCCU, and the minor will not be placed on the Vulnerable Adult Abuse Registry.

If the AP has a DCYF or DDA case manager, verbally notify the DCYF or DDA case manager that an investigation is being conducted to ensure the case manager is aware of the concerns identified in the investigation and has an opportunity to address their client’s needs.

#### APS Investigation Involving a Client of a DSHS/DCYF/Aging Network Case Manager

If an APS investigation involves an alleged victim or alleged perpetrator receiving case management from HCS/Aging Network, DDA, or DCYF:

* Follow the intake, screening, and investigative procedures found elsewhere in this chapter as applicable to the situation.
* Follow the procedures in this section regarding communication and coordination between APS and the DSHS/Aging Network case manager of the alleged victim or alleged perpetrator. Also, follow [procedures for sharing APS information within DSHS.](#_Within_DSHS)
* Follow any additional established regional protocols for communication and coordination with case management.

While conducting an investigation involving an alleged victim or alleged perpetrator known by APS to be receiving case management from HCS/Aging Network, DDA or DCYF:

* APS will inform the case manager that an investigation is occurring.
* The case manager will continue on-going case management functions while APS conducts the APS investigation.
* APS will maintain contact with the case manager during the investigation to inform the case manager of safety concerns, legal interventions, or progress of the investigation.
  + Consent from the DSHS client is not required for APS and HCS, Aging Network, DDA or DCYF to share confidential information pertinent to the investigation, case planning or services (However, a signed written consent from the client is required before discussing information about the DSHS client unrelated to the APS report, investigation, related case planning or protective services).
  + A case staffing may be requested by case management or APS to facilitate understanding and resolution when there are complex issues, multiple APS reports, or disagreements regarding the investigation findings. Include APS and case management supervisors in the case staffing.
  + APS may review or request all pertinent records, such as the current CARE, service plan, and financial records maintained by the case manager.
* APS and the case manager will coordinate activities as needed (e.g., conduct a joint home visit).
  + APS may communicate with the case manager regarding identified issues and options for the continued protection of the client (e.g., protection order).
  + The APS worker may provide a verbal courtesy notice to the case manager or designated case management contact person that the APS worker is going to forward, for case review, the recommendation for an initial substantiated finding of abandonment, abuse, financial exploitation, or neglect.

Following an investigation:

* APS will provide a copy of the Outcome Report - AP with an initial substantiated finding to an agency or program specified in [RCW 74.34.068](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.068) providing direct services to the alleged victim receiving case management services.
* As a result of the APS investigation findings, HCS, DDA, DCYF or Aging Network may determine the provider is unsuitable and terminate the contract of a provider. APS may be requested to testify at fair hearings regarding how they reached their decision to substantiate the APS findings.

#### APS Investigation Involving a Client Participating in Program of All-Inclusive Care for the Elderly

If an APS investigation involves an alleged victim or alleged perpetrator known by APS to be involved in Program of All-Inclusive Care for the Elderly (PACE)APS will:

* Communicate and coordinate as necessary with the HCS HQ Program Manager for PACE.
* Communicate and coordinate with the care provider on a need-to-know basis for the purpose of case planning and provision of protective services.

#### HCS/AAA Contracted Agencies

In circumstances where the allegation is related to an agency’s (e.g., home care agency) contractual non-compliance**,** contact the Home Care Agency Program Manager in the ALTSA/State Unit on Aging at (360)725-2560 for current email address to make referral.

While investigating allegations against employees of HCS/AAA contracted agencies, such as home care agencies, and you have reason to believe that a contractual non-compliance issue exists, contact the Home Care Agency Program Manager in the State Unit on Aging at (360)725-2560 for current email address to make a referral.

In addition, make a referral to DOH if the agency is licensed by DOH.

#### Contracted Nurse Delegators

In circumstances where there is an allegation against a department contracted nurse delegator, notify the APS Senior Policy Advisor.

#### Alleged Victim Dies while the APS Case is Open

If law enforcement is already involved in the situation, inform law enforcement of the death of the vulnerable adult and coordinate per [standard APS protocol.](#_Interviews_–_General_1)  If law enforcement is not yet involved, make a referral to law enforcement when there is reason to suspect criminal activity.

If the allegation was self-neglect, immediately close the investigation with a finding of “Closed-No APS - SN & AV Deceased” and make a case note that the investigation is terminated following the death of the alleged victim. APS does not determine if the death was related to self-neglect.

Continue investigation of allegations of abandonment, abuse, financial exploitation, or neglect for the purpose of determining the finding of the investigation. APS does not determine if the death was related to abandonment, abuse, financial exploitation, or neglect. If the allegation is substantiated, determine if other vulnerable adults are at current risk of abandonment, abuse, financial exploitation, or neglect from the same alleged perpetrator. Create a new APS intake report for each newly identified alleged victim.

#### Alleged Perpetrator Dies while the Case is Open

Continue investigation of allegations of abandonment, abuse, financial exploitation, or neglect for determining the finding of the investigation.

### **Referrals to Investigative Specialists**

Upon identifying the need for a self-neglect specialist, the originating investigator will consult with their immediate supervisor. The supervisor will staff the need for a specialist with the self-neglect specialist supervisor who will decide whether the investigation should be reassigned to the specialist. This decision will be made, based off of but not limited to:

* Reports that have a 24-hour priority designation
* Reports that involve an AV with four or more separate investigations of alleged self-neglect within the previous two years
* Reports that indicate a situation that is complex, potentially time intensive, and needs extensive case management

If the decision is made to transfer the investigation to the specialist, the self-neglect specialist supervisor will reassign the investigation to the specialist and will provide the specialist with the reason for the transfer.

Upon identifying the need for a financial exploitation specialist, the originating investigator will consult with their immediate supervisor. The supervisor will staff the need for a specialist with the financial exploitation supervisor who will decide whether the investigation should be reassigned to the specialist. This decision will be made, based off of but not limited to:

* Factors such as multiple financial accounts, investment or retirement accounts, trusts, or real property (land, home) transfers
* Imminent impact to obtaining basic necessities of life
* Symptoms of dementia or diminished capacity
* The report involves an AP appointed or acting as a fiduciary, guardian, or attorney-in-fact for the AV
* The allegation involves a large monetary value
* The report is identified as high profile
* Prior substantiated or inconclusive financial exploitation investigations

If the decision is made to transfer the investigation to the specialist, the financial exploitation supervisor will reassign the investigation to the specialist and will provide the specialist with the reason for the transfer.

### 90+ Day Reason Codes

Investigations should be closed within 90 calendar days of assignment, unless necessary investigation or protective services activity continues on the case. For any investigation that ages over 90 calendar days, the investigator must complete the 90+ day reason selection in TIVA2 by selecting the appropriate reason from the drop-down list.

The 90+ reasons should reflect the best reason the investigation aged over 90 days. The significant delay could occur at any time during the investigation. All of the 90+ reasons are considered “good” reasons that an investigation aged over 90 days except “Investigation open, no good cause.”

| **90+ Reason** | **When to Use/Examples** |
| --- | --- |
| Pending law enforcement | Due to law enforcement involvement, there was a significant delay in the APS investigation.  Example: Law enforcement took the lead on the investigation and asked the APS investigator to stand down causing a significant delay in the APS investigation. |
| Legal action needed to access information | A legal action, such as a legal injunction, caused a significant delay in the APS investigation. |
| Difficulty accessing AV to interview | The investigator documented difficulty in contacting the AV for either the initial interview or follow up interviews causing a significant delay with the investigation.  Example: The investigator, after several attempts, was finally able to make contact with the AV after contacting collaterals and learned that the AV was staying with a friend. |
| Difficulty accessing the AP to interview | The investigator documented difficulty in contacting the AP for either an initial interview or follow up interviews causing a significant delay with the investigation.  Example: After several documented attempts over time, the investigator was unable to contact the AP for an interview. |
| Difficulty accessing financial documents | There was a significant delay in the APS investigation due to the wait for financial records. |
| Difficulty accessing medical documents | There was a significant delay in the APS investigation due to the wait for medical documents. |
| Difficulty accessing law enforcement documents | There was a significant delay in the APS investigation due to the wait for law enforcement records. |
| Additional allegations discovered | The discovery of new allegations during the APS investigation caused a significant delay in the APS investigation. |
| Guardianship Pending | A guardianship petition was submitted before the investigation aged over 90 days. |
| Protective Services Pending | Protective services initiated by APS caused a significant delay in the APS investigation.  Example: APS investigator submitted a referral for an HCS in-home care assessment for the AV just after the initial AV interview, but the HCS worker’s scheduled assessment caused a significant delay in the APS investigation. |
| Investigation open, no good cause | The reason the investigation aged over 90 days does not appropriately fit into any other listed category and file does not indicate a reason why the investigation aged over 90 days. |
| Collaborative investigation with RCS Provider Practice | The coordination with RCS caused a significant delay in the APS investigation. |
| Collaborative investigation with DOH | The coordination with DOH caused a significant delay in the APS investigation. |
| Collaborative investigation with MCFD | The coordination with MFCD caused a significant delay in the APS investigation. |

### Investigation Staffing Protocol

Every investigation will be staffed no less than every 30 calendar days until closure and will have a documented plan of action for closure.

Supervisors will schedule reoccurring face to face case staffing-specific meeting dates/times no less than once a month with the APS investigator who has investigations open 30 calendar days or longer on their caseload.

The supervisor will enter a supervisory review type case note for each investigation staffed that is aged over 30 calendar days. The language in the case note should be similar to: “Staffed investigation with assigned investigator.” For supervisory review case notes, use activity type Administrative and action type:

* Supervisor Review for investigations staffed for the 30-day staffing.
* Supervisor Review 60 for investigations staffed for the 60-day staffing.
* Supervisor Review 90+ for investigations staffed for the 90-day staffing or beyond.

## Investigation: Coordinating with Other Investigative Authorities

References:

* [Chapter 11.130 RCW](https://app.leg.wa.gov/RCW/default.aspx?cite=11.88)
* [RCW 74.34.063](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.063)
* [RCW 74.34.067](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.067)
* [RCW 74.34.095](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.095)
* [Title 18 RCW](https://apps.leg.wa.gov/rcw/default.aspx?Cite=18)

Adult Protective Services may conduct ongoing case planning and consultation with persons or agencies required to report under [Chapter 74.34 RCW](https://apps.leg.wa.gov/RCW/default.aspx?cite=74.34). This includes coordinating with other investigative authorities who may have shared interest in investigating the alleged mistreatment.

### Coordinating with Law Enforcement

APS will attempt to facilitate protocols with local law enforcement agencies. These protocols should include:

* Where and how to report suspected crimes (e.g., which jurisdiction).
* Where and how to request emergency assistance related to APS safety concerns, or access, or a welfare check of the alleged victim.

If law enforcement informs APS that they are conducting an investigation involving an alleged victim, APS will:

* Obtain the name of the assigned officer and law enforcement case reference number.
* Communicate with law enforcement to determine if coordination of any activity is needed (e.g., law enforcement may want to interview the alleged perpetrator or alleged victim before APS, or may want to conduct a joint interview or joint visit with APS).
* Delay or defer specific investigative activities at the explicit request of law enforcement conducting a criminal investigation.
* Continue to assist the alleged victim in obtaining protective services.
* Inform the law enforcement investigator of any change in residence or circumstances of the alleged victim.
* If possible, conduct and complete the APS investigation while accommodating any requests from law enforcement to delay or eliminate specific investigation activities.
  + APS may make an initial finding based partially on information provided by law enforcement (Note: You must interview the AV as in any other investigation).
  + If law enforcement asks APS to stand down, keep the investigation open. Coordinate with law enforcement until law enforcement gives APS permission to re-engage. The investigator must check the status of thestand down by the 30th day the investigation is open and then at least every 30 calendar days thereafter and document the status of the investigation.

APS does not have legal authority to conduct or participate in a criminal investigation and should not do so, even if requested by a law enforcement officer or a prosecuting attorney.

### Coordinating with APS in Another State

If a request is received to assist APS from another state, the supervisor, program manager, or both will consult with the APS Senior Policy Advisor. After consultation, if it is determined that Washington APS will conduct or participate in an investigation, the APS supervisor or program manager will coordinate with APS in the other state or country to determine what (if any) activity will be conducted by Washington APS workers. Coordination may include, but is not limited to, a courtesy welfare check of a vulnerable adult in Washington or providing information of the whereabouts of a specific individual.

The APS program manager will determine when to forward a Washington State APS Outcome Report - AP or other APS case record information to APS in another state after consultation with APS headquarters. Before sharing any Washington APS case record information with APS in another state or country, APS will verify that their confidentiality laws are roughly equivalent to (or exceed) the confidentiality provisions of Washington law.

### Coordinating Investigations with Medicaid Fraud Control Division

Coordinate with Medicaid Fraud Control Division (MFCD) when the investigation includes allegations of Medicaid fraud by a provider or recipient. If requested, APS shall provide MFCD an un-redacted copy of the APS case record. Further information can be found in the [MOU](https://teamshare.dshs.wa.gov/sites/hcs/aps/After%20Event/Attorney%20General%20-%20Medicaid%20Fraud%20Control%20Unit%20(2006).pdf) between MFCD and APS.

### Coordinating with RCS for Investigations Involving Residents in a DSHS Licensed or Certified Setting

APS staff shall coordinate with RCS staff on investigations when both APS and RCS are assigned to a related incident and/or individual(s). The assigned investigators are responsible for the coordination of these investigations, keeping their respective managers apprised and involved as necessary.

The APS investigator will make a referral to the Complaint Resolution Unit (CRU) if new information is obtained that may lead to an RCS provider practice investigation, if one has not already been initiated.

Upon receipt of an intake assignment, the APS investigator will check for any RCS involvement, and prior involvement history. If an open RCS investigation exists, the APS investigator will contact the RCS investigator or Field Manager (FM) to determine if the APS report is related to the open RCS investigation. If related, the APS investigator will coordinate joint onsite visits with the RCS investigator. APS staff will document all attempts for coordinated visits in case notes.

The APS investigator will obtain relevant RCS records during the course of the investigation. For every APS and RCS related investigation, the APS investigator can obtain the completed Investigation Summary Report (ISR). If, during an investigation, RCS found deficient facility practices, there will also be a Statement of Deficiencies (SOD) and Plan of Correction (POC). Since ISRs, SODs and POCs are publicly disclosable documents, they either contain minimal information or are redacted. The APS investigator may obtain additional RCS records by sending a request to RCS Central Files via e-mail [RCSCentralFiles@dshs.wa.gov](mailto:RCSCentralFiles@dshs.wa.gov).

The APS investigator and supervisor must contact the RCS investigator and FM before closure of every joint investigation to share information, evidence, and findings. Because APS and RCS conduct unique investigations related to their own investigative authority, findings may vary. In APS investigations with a recommended substantiated finding, the supervisor and investigator must contact the RCS investigator and FM before the investigation is referred to the Investigation Review Team (IRT). If communication or coordination issues exist:

* The APS supervisor will contact the APS Program Manager (PM) or Deputy Regional Administrator (DRA), who will then contact the RCS FM to resolve any issues.
* The PM or DRA will escalate any issues not resolved at the local level to the Regional Administrator (RA) (regional level).
* If attempts at resolution at the regional level are unsuccessful, the RA will escalate the issues to the APS Deputy Director at APS Headquarters. The investigation will be referred to the Investigation Review Team (IRT) at the direction of the APS Deputy Director.

At the time of closure of any substantiated facility related investigation, the APS investigator will send outcome reports to the following RCS contacts:

* The appropriate RCS Regional Administrator through automated fax in TIVA2; and
* Loida Baniqued, RCS Headquarters Operations Office Chief, via email [loida.baniqued@dshs.wa.gov](mailto:loida.baniqued@dshs.wa.gov).

Document in the Reason for Referral box that the outcome report was manually e-mailed to Loida Baniqued.

### Coordinating with DCYF for Investigations Involving Residents in a DCYF Licensed or Certified Setting

The [Service Level Agreement](https://teamshare.dshs.wa.gov/sites/hcs/aps/After%20Event/Department%20of%20Children,%20Youth,%20and%20Families%202021.pdf) between DSHS, APS and DCYF, identifies that APS will be available to provide consultation to address the needs of the 18-21 year-old alleged victims when requested by DCYF.

The Division of Licensed Resources (DLR) within DCYF may concurrently investigate licensing issues. APS should communicate and coordinate with the licensing authority, including:

* Notifying the licensing authority of the receipt of an APS intake report involving their facility or licensee, if the licensure status is known.
* If needed, consulting with the licensing authority to determine if the alleged victim meets the definition of a vulnerable adult.
* Informing the licensing authority as to whether or not APS will investigate.
* Determining when coordination of activities can and should occur (e.g., coordinating on investigation when appropriate and possible, including a joint interview, when APS and DCYF are assigned to a related incident).
* Remaining onsite at facility if a safety issue exists until the issue is resolved through protective measures (e.g., call 911 for medical response or law enforcement). Contact the APS supervisor or program manager for coordination with DCYF.
* Sharing information and results before the investigation closure when APS and DCYF are assigned to a related incident.
* Routinely providing a copy of the APS Outcome Report to the DCYF licensing authority when the allegation is substantiated and:
  + The event occurred in the licensed setting (or in a setting that should be licensed).
  + The event did not occur in the licensed setting, but APS learns the event may impact the licensed setting where the alleged victim resides (e.g., financial exploitation of a facility resident by a family member is substantiated).
  + APS learns that as a result of the family member’s failure to pay the resident’s bills, the facility is actively moving toward the discharge of the alleged victim).
  + The event did not occur in a licensed setting, but APS learns the perpetrator is affiliated with a licensed setting (e.g., the abuse may have occurred at home between family members, but APS learns that the perpetrator works in a facility).
* Providing a copy of the APS Outcome Report - AP to the licensed facility in which the substantiated abandonment, abuse, financial exploitation, or neglect occurred as per [RCW 74.34.067(10)](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.067).

### Coordinating with the Department of Health (DOH)

APS will make share information with or make referrals to DOH in alignment with [RCW 74.34.063(6)](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.063) and [RCW 74.34.095(2)](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.095). APS has an information sharing agreement with DOH HSQA. APS routinely shares intake reports and outcome reports (all findings) with DOH HSQA and will share additional information upon request. APS may redact any confidential information that is not relevant to the allegations or findings. APS, RCS, and HSQA may also coordinate joint interviews. See [RCS/APS/DOH HSQA Information Agreement](https://teamshare.dshs.wa.gov/sites/hcs/aps/After%20Event/Department%20of%20Health%20(2016).pdf) (includes DOH nursing and medical commissions).

### Reporting Professional Conduct Concerns that are Not Related to the Allegation or the Substantiated Finding

If a potential concern is identified about the professional practice of anyone involved in the investigation who is licensed, certified or registered under [Title 18 RCW](http://apps.leg.wa.gov/rcw/default.aspx?Cite=18), inform a supervisor or program manager of the concern. Also, notify the supervisor or program manager of persons claiming to be a professional under Title 18 when APS has reason to believe they are not licensed, certified, or registered as required (e.g., someone who was claiming to be a nurse but was not found on the HSQA Provider Credential Search website).

APS supervisor or program manager may consult with the AAG, to determine whether to forward information to the professional licensing authority.

Use this link to access the [Department of Licensing](https://fortress.wa.gov/dol/bpdlicensequery/) search website to assist you in determining if the alleged perpetrator is professionally licensed, certified, or registered by DOL.

Use [this link](http://www.dol.wa.gov/business/professionals.html) to access a master list of all the types of licenses, certificates, endorsements, and registrations administered by various Washington State agencies.

### Coordinating with Tribes

APS holds Memorandum of Understanding (MOU) agreements with tribes throughout Washington state. APS workers must abide by any MOU held with a tribe. It is the worker’s responsibility to understand and act in accordance with the MOU at all times during an investigation with a tribal member or an investigation taking place on tribal land.

In situations where there is not a MOU with a tribe, the APS worker, or a regional point of contact for tribal communication, will contact the tribe prior to entering tribal land or when working with a tribal member.

Every region shall offer each federally recognized tribe the opportunity to develop a customized negotiated working agreement between APS and the tribe. APS will negotiate with each tribe who expresses a desire to enter into an agreement for the purposes of establishing protocols for communication and coordination on the topics of intake, investigation, and protective services for vulnerable adults, as specified in [MB A19-004](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/After%20Event/APS%20Tribal%20Agreements%20MB%20(A19-004).docx&action=default&DefaultItemOpen=1).

Prior to implementation, any draft working agreement co-developed with a tribe must be reviewed by APS Headquarters prior to approval. APS Headquarters will coordinate with the AAG for review and copy the regional program manager. After signature by all parties, a final signed copy will be provided by the region to headquarters and posted.

**Investigation and Protective Services:** Follow the protocol specified in the applicable tribal MOU that will specify what activities APS will do and what activities the tribe will do. At any time during the investigation that you become aware of a participant’s tribal affiliation, you must add the detailed tribal information to the Person Management record.

#### Sharing Information with Tribal Law Enforcement or APS Equivalence

APS may be permitted to share information with a tribe even if APS has no current MOU, if the information requested is for the purpose consistent with [Chapter 74.34 RCW](https://apps.leg.wa.gov/RCW/default.aspx?cite=74.34). If the request comes from tribal law enforcement, [RCW 74.34.063(4)](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.063) and [74.34.067(8)](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.067) authorizes APS to share information with law enforcement. Consult with your supervisor.

### Coordinating with the Developmental Disabilities and Long-Term Care Ombuds Programs

As authorized by federal law, the Developmental Disabilities and Washington Long-Term Care Ombuds programs provide education, consultation, advocacy, and complaint resolution to adult family home, assisted living facility, and nursing home residents.

The Ombuds programs receive, investigate, and resolve thousands of complaints each year. They are not mandated reporters. The Ombuds can report allegations to DSHS and/or share information with DSHS only with the permission of the alleged victim/resident. It is possible that APS and the Ombuds may both conduct an investigation or have information about a situation involving a resident of a long-term care facility.

If APS is aware that the Ombuds is conducting an investigation, attempt to communicate and coordinate the investigation with the Ombuds to the extent possible.

### Reporting to the Certified Professional Guardianship and Conservatorship Board

APS will make a referral to the Certified Professional Guardianship and Conservatorship Board (CPGCB) during the course of an investigation when there is reason to believe that the certified guardian or certified conservator is abusing, abandoning, financially exploiting, or neglecting the adult subject to guardianship/conservatorship, or when there is reason to believe the certified guardian or certified conservator is not complying with statutory obligations per [Chapter 11.130 RCW](https://app.leg.wa.gov/RCW/default.aspx?cite=11.88).

The APS worker will:

* Create a Referral for Investigation in TIVA2 using the manual transmit option.
* Save a copy of the referral as a PDF.
* Enter an electronic signature onto the form by the investigator’s name.
* Email via Secure File Transfer the referral and any relevant documents to the CPGCB staff (Kathy.bowman@courts.wa.gov).

## Investigation Transfer Protocol

The purpose of the protocol is to provide expectations for staffing investigations when an investigation is transferred from one investigator to another. Investigations may need to be transferred due to employee resignations or due to other factors specific to the investigation.

**Protocol:** The investigator and supervisor will meet to review the investigations assigned to the current investigator. At the staffing, the investigator will discuss the status of each investigation. The case note language will be: “Staffed investigation per investigation transfer protocol.”

For each investigation being transferred, the supervisor will discuss:

* Current status
* Pending requests for records
* Steps to be completed before closure
* Review of case note documentation.

The supervisor will document the status of each investigation on an excel spreadsheet. The supervisor will provide the regional program manager a copy of the staffing excel spreadsheet and inform the program manager that the transfer staffing has been completed for investigations being transferred to a different employee.

The supervisor will reassign the investigations once the investigator has completed all documentation. The supervisor may transfer the investigation prior to all documentation if it is in the best interest of the investigation. The supervisor will create a case note listed as Administrative with Action type “Investigation Re-assignment” and document the investigation was transferred. The investigator receiving the transferred investigations will meet with the supervisor who completed the staffing and the investigator’s supervisor. The supervisor will review the investigation with the receiving investigator. The supervisor will provide a copy of the excel spreadsheet to the receiving investigator and the investigator’s supervisor. The supervisor will case note in TIVA2 the staffing occurred.

## Tools for Investigations

References:

* [RCW 74.34.067](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.067)
* [RCW 74.34.080](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.080)
* [RCW 74.34.095](https://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.095)

### Legal Injunction

If access is denied to an employee of the department seeking to investigate an allegation of abandonment, abuse, financial exploitation, or neglect of a vulnerable adult, the department, represented by the Attorney General’s office, may seek an injunction prohibiting interference with the investigation. Consent of the alleged victim is not required. [*RCW 74.34.080.*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.080)

“Access” is not defined or limited in the statute. It may be broadly interpreted as access to:

* The alleged victim
* Documents
* Financial information
* Any other information relevant to the investigation

To obtain an injunction, the department must persuade the court of the following facts:

* There is reasonable cause to believe the person is a vulnerable adult and is or has been abused, abandoned, neglected, or exploited.
* The employee of the department seeking to investigate the report has been denied access.

Contact the regional AAG and APS Deputy Director to request their assistance to obtain an injunction. Provide information to the AAG as necessary and use the form [Request for an Injunction to Prohibit Interference in an APS investigation](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/forms/Referral%20to%20AG%20for%20Injunction.docx&action=default).

### Photography

The department is allowed to photograph the alleged victim and their environment for the purpose of providing documentary evidence of the physical condition. [*RCW 74.34.067(9).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.067) Photos are to be uploaded and then deleted from the device used to capture them. Follow the same retention/archive schedule as the corresponding case files.

Photography guidelines:

* Respect the dignity of the subject when taking any photograph.
* Do not photograph the genital area. Do not photograph the breasts of a woman. If this is necessary, request assistance from law enforcement, licensed staff in a care setting, or a rape crisis center in the case of possible sexual abuse.

#### Consent to Photograph

* Obtain written consent from the vulnerable adult or their legal representative prior to photographing the vulnerable adult, unless:
  + Immediate photographing is necessary to preserve evidence, or
  + The legal representative is the alleged perpetrator.
* Use the [Release for Photographing form](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/Resources/APS%20Release%20for%20Photographing.doc&action=default&DefaultItemOpen=1) to document permission or refusal.
* No consent is required for photographing the environment.

#### Documentation and Tracking Photographs

Each office must implement a system (e.g., the [Photograph Ledger](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/Resources/APS%20Photograph%20Ledger.doc&action=default&DefaultItemOpen=1)) to ensure that the following information is maintained for every individual photograph:

* Who took the picture
* Where the photo was taken
* The subject of the photograph
* Date and time the picture was taken
* The investigation ID

If copies of photographs taken by APS are provided to others (e.g., prosecutor), document in the case notes the name of the recipient and sufficient information to identify what photograph was shared (e.g., describe contents or refer to the [Photograph Ledger](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/Resources/APS%20Photograph%20Ledger.doc&action=default&DefaultItemOpen=1)).

### Background Check through the Background Check System

APS workers can request a background check through the Background Check System (BCS) managed by the DSHS Background Check Central Unit (BCCU):

* On any individual who may be interviewed or encountered by an APS worker during an APS investigation when there are concerns for APS worker safety.
* On a prospective guardian or conservator when the alleged victim has an open APS case (whether or not the petition for guardianship was filed by APS or another interested party).

Each region will determine which staff affiliated with the APS program will be authorized to submit an APS program-related background check request through the Background Check System (BCS). Training materials are located on the [BCS website](https://www.dshs.wa.gov/sesa/background-check-central-unit/background-check-system-training-materials).

#### Results

BCS will provide APS with a results letter online indicating whether or not the identified subject of the background check has:

* A record (sources of the information may include prior self-disclosure by the subject of the background inquiry, a prior fingerprint check processed by BCCU, or Washington State conviction information/RAP sheet from the Washington State Patrol. Conviction data means actual conviction information, arrests less than one year old with dispositions pending, dependency proceedings, and information regarding registered sex and kidnap offenders).
* Another type finding (RCS, APS, CPS, DOH).

The background check will provide Washington State data. The BCS check for APS does not access other states or nations criminal records. APS will not do fingerprint checks.

When a background check indicates that an individual has a criminal history, APS should treat the situation as if the individual does have a criminal record, even in the absence of fingerprint verification. If the criminal history raises concerns about safety issues (e.g., convictions involving violence, threats of violence, or weapons), consult with a supervisor to determine appropriate measures that may include, but are not limited to:

* Requesting a police escort.
* Inviting the individual to a DSHS office or neutral location to conduct the interview.
* Canceling the face-to-face interview and seeking information over the telephone or in writing.

Even if the background check returns no records, the subject of the search may have a criminal history. Errors in the identifying information used in the search, name changes, aliases, or database entry errors may have resulted in a record not being identified. Out-of-state and federal convictions will not appear.

When uploading the results, select the Background Check document type. When held by APS it becomes part of the APS case record and is confidential. [*RCW 74.34.095*](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.095).

### Accurint to Search for Information

Accurint is a Florida-based corporation that serves as a clearinghouse/database for information on individuals, businesses, and entities. Accurint is used by law-enforcement, government agencies, and private corporations for uses under the Gramm-Leach-Bliley Act.

APS has established a statewide account with Accurint ([www.accurint.com](http://www.accurint.com/)) to obtain information that is pertinent to an APS investigation or action related to an APS investigation under [Chapter 74.34 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34).

#### Access to Accurint

Each region will designate the account administrator(s) and determine which workers associated with the APS program will be authorized to submit search requests to Accurint.

Regional account administrator(s) will:

* Provide Accurint with the information needed to activate each user (note: obtain information on IP address ranges from the APS statewide program manager).
* Provide each user with log in and password information.
* Monitor the regional use of Accurint.
* Deactivate individual users when they are no longer authorized to perform searches.

Prior to accessing Accurint, each region will ensure that all authorized users understand this policy and have been trained on how to submit requests and protect information. Training can be conducted by the region, or it is available through Accurint.

Prior to submitting a request to Accurint, users must first attempt to obtain the needed information from other available resources and databases. APS is charged for each search based on search type. Use the most cost-effective source to obtain the desired information.

All search requests that are submitted to Accurint must be done in the most cost-effective manner and for the minimum amount of needed information.

All search requests must include the appropriate “mandatory reference code,” as follows:

Region 1: APS01-intake ID #

Region 2: APS02-intake ID #

Region 3: APS03-intake ID #

State Office: APSHQ-intake ID #

Example: APSHQ-1234567

#### Types of Searches

An APS worker shall submit only Person Search or Advanced Person Search requests to Accurint.

If an APS worker determines that, in order to complete an investigation, the worker needs access to sensitive or confidential information about a person involved in the investigation, other than the information available in a Person Search or Advance Person Search, the APS worker shall:

* Recommend a specific Accurint search type to their supervisor.
* The supervisor shall evaluate the recommendation and determine what, if any, search beyond an Advanced Person Search will be conducted. The supervisor shall submit the search to obtain the information for the APS worker.
* If an APS supervisor is not available, the APS worker should make the recommendation to the APS Program Manager first, or in the absence of a supervisor and the APS Program Manager, the regional subject matter expert.

The Regional Administrator, Deputy Regional Administrator, APS program manager, APS supervisor, and Legal Benefits Advisor may submit a request for any of the search types available through the APS Accurint account when the information is necessary for an APS investigation or subsequent action under [Chapter 74.34 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34) related to an investigation.

#### Confidentiality of Information Obtained through Accurint

When held by APS, Accurint information becomes part of the APS case record and is confidential under [RCW 74.34.095](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.095). Document relevant Accurint results in a case note. Upload records as part of the investigation evidence. Only upload information specific to the person being searched. Records related to other individuals must not be included in the record when uploaded.

### The IDEAL Model

With permission by Dr. Bennett Blum, APS workers can use the IDEAL Model for Analyzing Potential Undue Influence in Financial Cases in investigations to identify any potential undue influence. Dr. Blum defines undue influence as a form of manipulation or deception used to gain assets without the true consent of the victim. By using the IDEAL model, investigators will be better prepared to ask questions related to the alleged victim and alleged perpetrator’s relationship and identify any undue influence over time. Training material for the IDEAL Model can be found on the [APS SharePoint site](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/start.aspx#/training_misc).

### Declaration Form

APS may seek and obtain a written statement from any individual if the person is able to understand that they will be swearing to tell the truth. When an alleged victim, alleged perpetrator or collateral contact would like to provide APS with information in writing:

* Ask if the person would provide and sign the written statement on a [Declaration Form.](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/Resources/APS%20Declaration%20Form.doc&action=default&DefaultItemOpen=1)
* Request that the person use pen to write the statement.
* Upon request of a person making the declaration who is unable to write his or her statement, the APS worker will write the statement word for word as told by the person.
  + Read the entire contents of the document back to the person, including the signature block statement, prior to requesting his or her signature or mark on the declaration form.
  + If the APS worker writes out a statement for another person, the APS worker shall add a sentence to the end of the person’s statement clarifying “This statement was written on behalf of the person making the statement by [APS worker name] due to [state the reason why the person was unable to write the statement themself].
* If a copy machine is available at the time the form is signed, provide the individual with a copy of their statement. If not, offer to copy and mail the person a copy after you return to the office.

### Forensic Interviewing

APS workers who have been trained on forensic interviewing are highly encouraged to use the forensic interviewing protocol for interviews with alleged victims.

### Social Media

APS staff are prohibited from using a personal, guest, or anonymous account on a social media platform to gather evidence. Evidence can be obtained from investigation participants who have social media accounts.

## Protective Services

References:

* [Chapter 7.90 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=7.90)
* [Chapter 10.99 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=10.99)
* [Chapter 11.130 RCW](https://app.leg.wa.gov/RCW/default.aspx?cite=11.130)
* [Chapter 26.50 RCW](http://app.leg.wa.gov/rcw/default.aspx?cite=26.50)
* [Chapter 26.50 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=26.50)
* [RCW 10.14.040](http://apps.leg.wa.gov/RCW/default.aspx?cite=10.14.040)
* [RCW 11.125.160](https://app.leg.wa.gov/RCW/default.aspx?cite=11.125.160)
* [RCW 26.09.050](http://apps.leg.wa.gov/RCW/default.aspx?cite=26.09.050)
* [RCW 74.34.025](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.025)
* [RCW 74.34.067](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.067)
* [RCW 74.34.110-150](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34)
* [WAC 388-103-0030](https://app.leg.wa.gov/wac/default.aspx?cite=388-103&full=true#388-103-0030)

During or following the investigation, identify, offer, and facilitate access to appropriate protective services for alleged victims of abandonment, abuse, financial exploitation, neglect, or self-neglect.

Facilitate and coordinate service delivery, as appropriate, with the case management systems already involved with the vulnerable adult (e.g., Aging Network/DDA).

### Description of Protective Services

Specific protective services may be provided after APS determines:

* The services are necessary to protect the alleged victim from harm resulting from abandonment, abuse, financial exploitation, neglect, or self-neglect, and
* There are no other individuals available or offering to assist.

Protective services must be provided in the least restrictive environment appropriate and available to the vulnerable adult.

Protective services may be provided only after the alleged victim or appropriate legal representative (guardian, attorney-in-fact) gives express written consent after being fully informed about the services and right to withdraw or refuse services at any time.

Use and complete the [DSHS form 15-198 Consent to Receive Protective Services or Referrals](http://forms.dshs.wa.lcl/formDetails.aspx?ID=11387) to document services that were offered to the alleged victim and what the alleged victim accepted or declined.

### Authorization and Payment for APS Protective Services

An APS investigation is conducted without cost to the alleged victim. Some protective services may be provided without cost to the alleged victim, some may be provided without regard to the income or resources of the alleged victim, and some require the alleged victim to meet financial and functional eligibility criteria. [*WAC 388-103-0030*](https://app.leg.wa.gov/wac/default.aspx?cite=388-103&full=true#388-103-0030)*.*

#### Hierarchy of Protective Services Funding Sources

|  |  |
| --- | --- |
| **Option #1** | **Medicare**  Use Medicare or other community-based resources when appropriate. |
| **Option #2** | **Medicaid Program Services**  Utilize regular Medicaid services (CFC, MPC) whenever the alleged victim is functionally and financially eligible for these programs. |
| **Option #3** | **Alleged Victim Funds**  The alleged victim must use their own money or resources to pay for services whenever their own resources are available, and the individual is not eligible for regular Medicare or Medicaid-funded services. |
| **Option #4** | **Other Sources**  Consider other funding sources that may be available for specialized purposes, including Intervention Services funds, or Assistive Technology Project. |
| **Option #5** | **State-only Funded Protective Service Stays**  State only funds are available for a maximum of 90 days in a one-year period. |

#### Intervention Services

Intervention Services funds can be used by APS to contract services not available through Medicaid or waiver services, including, but not limited to:

* Certified public accountant (CPA) or forensic accountant to aid in the investigation of financial exploitation (this service does not require direct alleged victim contact)
* Capacity evaluations when it is difficult to determine if a person is at significant risk of personal or financial harm because of diminished capacity.
* Home environment evaluations
* One-time home hazardous cleanup
* Medical consultation not available through Medicaid or waiver services
* Subsidized housing or housing options evaluation
* Nursing rehabilitation evaluation
* Physical or occupation therapy evaluation

Intervention Services funds may notbe used for:

* Psychotherapy or counseling
* Ongoing adult family home (AFH), assisted living facility (ALF), or in-home provider training

You can find Intervention Services forms and procedures on the ALTSA intranet, [left menu](http://intra.altsa.dshs.wa.gov/hcs/HCSForms.htm). Send completed authorization form to the APS Senior Policy Advisor after payment has been issued. Include the investigation ID number for tracking purposes.

#### State-only Funded Protective Service Stays

Only if none of the above sources of payment are an option, APS may authorize state-only funded protective service stays up to a cumulative maximum of 90 days during any 12-month period. Nursing facilities can only be authorized for up to 30 days. There is no exception to rule for the timeframe.

[*WAC 388-103-0030*](https://app.leg.wa.gov/wac/default.aspx?cite=388-103&full=true#388-103-0030)*.*

The alleged victim does not pay participation for state-only-funded protective services (In-home, AFH, ALF, or NF). State-only funded protective service stays are:

* Not subject to estate recovery. [*RCW 74.34.025*](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.025)*.*
* Provided by DSHS on a discretionary basis and are not a benefit and not an entitlement Termination of state-only funded, temporary, protective services is exempt from notification and appeal requirements.

State-only funded in-home personal care services and state-only funded stays in an AFH, ALF, or NF may be authorized without regard to the functional status or income/resources of the alleged victim, if all of the following criteria are met:

* The alleged victim is the subject of an open APS case with an element of abandonment, abuse, financial exploitation, neglect, or self-neglect.
* The services would help protect the alleged victim from harm.
* APS (or on-going case management) cannot verify alternative resources or options for payment for services available to the alleged victim at the time.
* These services are provided in the least restrictive and most cost-effective setting available to appropriately meet the needs of the alleged victim.
* APS is actively pursuing other service alternatives and/or resolution to the issues that resulted in the need for protective services (or working with on-going case management to do so).
* State-only funded protective service stays are temporary and provided only with the consent of the alleged victim until the situation has stabilized.
* State-only funded protective service stays for an alleged victim shall be based on assessed need and limited to only:
  + Up to one hundred forty-three hours of in-home personal care services per month; and
  + A cumulative maximum total of ninety days service in any twelve-month period of time, with nursing facility services not exceeding thirty days of the ninety-day total. An exception to rule cannot be used to grant an extension to the time or the number of hours.

Effective 1/1/2015, ProviderOne became the primary provider payment system for DSHS client services. All payments must be authorized through ProviderOne using the CARE system.

### Legal Protective Services and Remedies

[Chapter 74.34 RCW](http://app.leg.wa.gov/rcw/default.aspx?cite=74.34)recognizes that some vulnerable adults are unable to represent themselves in court or retain legal counsel to obtain remedies available through court. The legislature has authorized the department to seek protection orders on behalf of vulnerable adults under [Chapter 74.34 RCW](http://app.leg.wa.gov/rcw/default.aspx?cite=74.34) and [Chapter 26.50 RCW](http://app.leg.wa.gov/rcw/default.aspx?cite=26.50), the domestic violence statute, and to bring guardianship actions for vulnerable adults who have been abandoned, abused, financially exploited or neglected, lack capacity to consent to protective services, and need the protection of guardians. APS may also pursue remedies relating to powers of attorney under [Chapter 11.125 RCW](http://app.leg.wa.gov/rcw/default.aspx?cite=11.94). This section describes these legal remedies more fully and outlines the procedures for obtaining them.

**An APS worker cannot provide legal advice.**

#### Protection Orders

A protection order may be necessary to protect a vulnerable adult from a variety of acts by another. There are several alternatives (refer to the statute and the APS academy materials for an overview of the various features). The relationship between the vulnerable adult and person to be restrained and the nature of the action to be restrained determine which kind of protection order should be sought:

* Vulnerable Adult Protection Order. [*RCW 74.34.110-150*](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34)*.*
* Domestic Violence Protection Order. [*Chapter 26.50 RCW*](http://apps.leg.wa.gov/RCW/default.aspx?cite=26.50)*.*
* Sexual Assault Protection Order. [*Chapter 7.90 RCW*](http://apps.leg.wa.gov/RCW/default.aspx?cite=7.90)*.*
* Anti-Harassment Order. [*RCW 10.14.040*](http://apps.leg.wa.gov/RCW/default.aspx?cite=10.14.040)*.*
* Restraining Order. [*RCW 26.09.050*](http://apps.leg.wa.gov/RCW/default.aspx?cite=26.09.050)*.*
* No Contact Order by request of the prosecutor in a criminal matter. [*Chapter 10.99 RCW*](http://apps.leg.wa.gov/RCW/default.aspx?cite=10.99)*.*

There are several ways to seek a protection order:

* A vulnerable adult may seek a protection order on their own.
* A vulnerable adult may seek a protection order on their own with the assistance of an APS worker.
* An interested party may seek a protection order on behalf of the vulnerable adult.
* APS may seek a protection order on behalf of the vulnerable adult through the Attorney General’s Office.

An APS worker may assist the vulnerable adult to access the required forms for a protection order by:

* Instructing the vulnerable adult to go to the Office of the Superior Court Clerk to obtain them.
* Providing the vulnerable adult with an electronic link to the Administrative Office of the Courts (AOC) website containing the required protection order forms: <http://www.courts.wa.gov/forms/>.
* Giving the vulnerable adult a hard copy of the required forms after printing them from the AOC website or obtaining them from the Court Clerk.
  + An APS worker may assist the vulnerable adult to fill out the protection order forms by writing the words spoken by the alleged victim onto the form when the vulnerable adult:
    - Is physically unable to write (for example, due to poor eyesight or severe arthritis);
    - Is unable to read and write due to illiteracy; or
    - Does not want to write on the forms.
* An APS worker may accompany the vulnerable adult to file the petition, and to court, in order to provide support through the process. (Note: If, for any reason, the vulnerable adult will not be physically present to file the petition or attend court, refer the case to the AAG for filing on behalf of the vulnerable adult.)

**NOTE:** If the vulnerable adult is not able to provide responses for the questions on the protection order forms, refer the case to the AAG for filing on behalf of the vulnerable adult.

##### Procedure for Seeking a Protection Order

Attempt to ascertain whether a protection order against the alleged perpetrator already exists. If so, get a copy of the order currently in place.

If there is not an appropriate alternative to obtaining a protection order, then determine if the vulnerable adult will seek their own protection order (with or without the assistance of the APS worker).

In cases where the department may seek the protection order on behalf of the vulnerable adult, first determine if the alleged victim:

* Is a vulnerable adult.
* Has experienced, or is at risk of experiencing, abuse, neglect, abandonment, or financial exploitation by the person to be restrained.
* Is unable to represent themselves.
* Is unable to retain private counsel (or the assistance of others such as friends or family).
* Consents to the department petitioning for a protection order on their behalf.

When the vulnerable adult lacks the ability or capacity to consent, APS, through the AAG, may file a petition for a Vulnerable Adult Protection Order under [Chapter 74.34 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34).

* If the vulnerable adult appears to ***lack the capacity to consent***, contact the Office of the Attorney General for assistance in determining:
  + Whether a protection order that is currently in effect needs to be expanded or modified to fit the present situation - or which type of protection order may be the most appropriate to seek under the circumstances.
  + Whether the vulnerable adult has the capacity to consent to APS obtaining a protection order.
  + Whether a guardianship may be a more appropriate action for a vulnerable adult who requires protection but appears to lack the capacity or ability to consent to APS obtaining a protection order on their behalf. (Under a guardianship action, the court may order necessary protection for the vulnerable adult, including immediate protection orders even before a guardianship is established).
* If the vulnerable adult appears to lack ***the ability to consent***, consider relevant history and factors, including but not limited to, cognitive functioning, psychosocial factors, undue influence, intimidation, and threats.
  + Consult with your supervisor.
  + If necessary, consult with the Attorney General’s Office when determining if the vulnerable adult lacks the ability to consent.
  + Obtain the Regional Administrator’s approval to pursue the protection order without the vulnerable adult’s consent.

If it is determined that the department will file the petition on behalf of the vulnerable adult, use the [Vulnerable Adult Protection Order Referral to Assistant Attorney General](https://teamshare.dshs.wa.gov/sites/hcs/aps/forms/VA%20Protection%20Order%20Referral%20to%20AG.docx) to provide the Office of the Attorney General with the following information:

* The APS worker’s name, address, and telephone number.
* The name, address, telephone number, and birth date of the vulnerable adult.
* The description of circumstances requiring a protection order.
* A reason why the vulnerable adult is unable to obtain a protection order on their own behalf.
* The name, address, and telephone number of the person from whom protection is being requested.
* Any additional information requested by the AAG.

Complete the [Confidential Information Form](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/Resources/Confidential%20Information%20Form.doc&action=default&DefaultItemOpen=1) (if the courts in your region require this form) and the [Law Enforcement Information Form](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/Resources/Law%20Enforcement%20Information%20Form.doc&action=default&DefaultItemOpen=1) (all regions) and attach these forms to the Protection Order AAG Referral Form.

The APS worker and other witness with relevant personal knowledge must provide an affidavit stating the facts and circumstances demonstrating the need for the protection order. The Assistant Attorney General assists in preparing this and other necessary pleadings for the court.

If the AAG files the petition and the court grants a temporary restraining order, the APS worker must be prepared to testify at the next hearing that occurs within 14 days. The judge will likely use the investigative information gathered to date to determine if the restraining order will remain in effect.

#### Guardianship, Conservatorship, or Protective Arrangement

The investigator must conduct at least one face-to-face visit with the vulnerable adult in an APS-petitioned pending guardianship, conservatorship, or protective arrangement every 30 calendar days until the court appoints a guardian, conservator, or special agent. More visits may be necessary if the situation is unstable.

##### Petition under RCW 74.34.067(5)

The department may bring a guardianship, conservatorship, or protective proceeding under [RCW 74.34.067(5)](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.067) if it has reason to believe the vulnerable adult:

* Has experienced abandonment, abuse, financial exploitation, neglect, or self-neglect.
* Lacks the ability or capacity to consent.
* Needs the protection of a guardian, conservator, or special agent.

Consider all other less restrictive options (such as a durable power of attorney, payee, supported decision-making agreement) for protection of the vulnerable adult before filing for a guardianship, conservatorship, or protective arrangement. Consult with the Attorney General’s Office as necessary in the determination of whether a petition under [Chapter 11.130 RCW](https://app.leg.wa.gov/RCW/default.aspx?cite=11.130) is an appropriate course of action and the vulnerable adult appears to meet the criteria for guardianship, conservatorship, or other protective arrangement.

Determine whether there are family members, friends, advocates, or others who may petition on behalf of the vulnerable adult.

When other suitable persons are not present, able, or willing to petition, refer the case to the Attorney General’s Office. Use [DSHS form 10-162 Referral to Assistant Attorney General for Guardianship, Conservatorship, or Protective Arrangement](http://forms.dshs.wa.lcl/formDetails.aspx?ID=582). The APS worker will:

* Identify a professional or layperson willing to fulfill the duties on behalf of the vulnerable adult.
* Provide the AAG with information and documentation as requested.
* Assist the AAG, as needed, in completing necessary pleadings.
* Be prepared to testify in court if necessary.

A hearing on the petition must be held within 60 days of the filing of the petition unless an extension is granted for good cause shown.

Upon the filing of the petition, the court will appoint a court visitor to investigate and report to the court on the need for the appointment of a guardian, conservator, or special agent.

* To aid the court visitor in their responsibilities the APS worker will refer the court visitor to the public records coordinator at [APSPublicRecords@dshs.wa.gov](mailto:APSPublicRecords@dshs.wa.gov). The public records coordinator will redact confidential information.
* If the APS worker is served with a court order or subpoena to provide APS records, immediately contact the public records coordinator at [APSPublicRecords@dshs.wa.gov](file:///C:\Users\MORGAKD\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\LVHRO56K\APSPublicRecords@dshs.wa.gov).

The department, through the Attorney General’s Office, may seek an emergency petition to protect the vulnerable adult from abuse, neglect, abandonment, or financial exploitation or to address other emergency needs of the vulnerable adult.

##### Procedure to Remove or Modify a Guardianship, Conservatorship

The court may terminate or modify the guardianship or conservatorship including replacing the guardian or conservator. If APS determines this is necessary, APS will petition the court through the Attorney General’s Office using [DSHS form 10-162 Referral to Assistant Attorney General for Guardianship, Conservatorship, or Protective Arrangement](http://forms.dshs.wa.lcl/formDetails.aspx?ID=582).

#### Power of Attorney (Chapter 11.125 RCW)

APS may petition the court, through the Attorney General’s Office, to review actions of an attorney-in-fact under a power of attorney. APS may petition when the vulnerable adult is incapacitated or otherwise unable to protect their own interests. APS must satisfy the court that it is interested in the welfare of the principal (the vulnerable adult) and has a good faith belief that the court’s intervention is necessary.

APS may petition the court to determine the following ([*RCW 11.125.160*](https://app.leg.wa.gov/RCW/default.aspx?cite=11.125.160)):

* Determination of whether the power of attorney is in effect or has terminated.
* Compelling the agent to submit the agent's accounts or report the agent's acts as agent to the principal, the spouse or state registered domestic partner of the principal, the guardian of the person or the estate of the principal, or to any other person required by the court in its discretion, if the agent has not timely complied with a request under [RCW 11.125.140(9)](https://app.leg.wa.gov/RCW/default.aspx?cite=11.125.140). However, a government agency having authority to protect the welfare of the principal may file a petition upon the agent's refusal or failure to submit an accounting upon written request and shall not be required to wait sixty days.
* Ratification of past acts or approval of proposed acts of the agent.
* Issuance of an order directing the agent to exercise or refrain from exercising authority in a power of attorney in a particular manner or for a particular purpose.
* Modification of the authority of an agent under a power of attorney.
* Removal of the agent on a determination by the court of both of the following:
  + Determination that the agent has violated or is unfit to perform the fiduciary duties under the power of attorney; and
  + Determination that the removal of the agent is in the best interest of the principal.
* Approval of the resignation of the agent and approval of the final accountings of the resigning agent if submitted, subject to any orders the court determines are necessary to protect the principal's interests.
* Confirmation of the authority of a successor agent to act under a power of attorney upon removal or resignation of the previous agent.
* Compelling a third person to honor the authority of an agent, provided that a third person may not be compelled to honor the agent's authority if the principal could not compel the third person to act in the same circumstances.
* Order the agent to furnish a bond in an amount the court determines to be appropriate.

Consult with the Attorney General’s Office to determine whether a petition under the power of attorney statute is an appropriate course of action. Provide the AAG with information and documentation, as requested.

## Coordination with Community Resources

References:

* [RCW 74.34.070](http://app.leg.wa.gov/RCW/default.aspx?cite=74.34.070)
* [RCW 74.34.320](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.320)

Each field office is encouraged to develop and maintain cooperative agreements between APS and community entities providing services to vulnerable adults. [*RCW 74.34.070*](http://app.leg.wa.gov/RCW/default.aspx?cite=74.34.070)*.* These community agencies or entities may include, but are not limited to, the local:

* Law enforcement
* Domestic violence programs
* Rape crisis centers
* Animal shelters
* The fire marshal

Per [RCW 74.34.070](https://app.leg.wa.gov/rcw/default.aspx?cite=74.34.070), the written working agreements shall address:

* Appropriate roles and responsibilities of the department and community-based agencies or entities in identifying and responding to reports
* The provision of case-management services
* Standardized data collection procedures
* Related coordination activities

### Domestic Violence

Refer appropriate circumstances to a domestic violence program by either giving the alleged victim information for a self-referral or obtain consent from the alleged victim before making a referral.

Coordinate with local domestic violence program staff in order to advise the alleged victim regarding services available in his or her community.

When appropriate, assist the alleged victim in obtaining a domestic violence protection order, harassment order, or no contact order.

### Mental Health

**Emergency**: When an alleged victim requires an immediate assessment, contact the local mental health crisis response system (e.g., the mental health center or the Designated Crisis Responder (DCR) office) for determination of grave disability or when the alleged victim poses a threat to self or others. Contact local law enforcement when necessary. In emergency circumstances, consent is not necessary.

**Non-emergency**: Obtain the written consent of the alleged victim for mental health services prior to referral for counseling, medication management, or an evaluation through a private or public mental health counseling agency, a psychologist, or a psychiatrist.

### Regional Resource Teams

The purpose of an APS Regional Resource Team is to assist Adult Protective Services to improve outcomes in some of the most challenging APS investigations through coordination and partnership. [*RCW 74.34.320*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.320)*.*

Each region must operate at least one APS Regional Resource Team or participate in a similar forum, for discussion, collaboration, and shared decision-making on select difficult and high-risk APS investigations.

Another local multidisciplinary team may be used in lieu of a Regional Resource Team facilitated by APS, if:

* The group is willing to review an APS case when requested by APS (e.g., get on the agenda of an on-going group, or convene an ad-hoc meeting for groups that only gather as needed).
* The group includes members with appropriate knowledge and expertise.
* Members maintain confidentiality.
* The group is willing to make and document group recommendations regarding the presented APS investigation.

Teams will meet regularly, at least every other month, to review, make intervention recommendations, and act in an advisory capacity to APS on investigations identified by the APS supervisor as high risk. These situations include:

* When the alleged victim is refusing intervention after APS has determined that serious harm has occurred and is likely to reoccur.
* When serious professional disagreements exist with other community agencies/service providers that are not able to be resolved at the first line supervisor level, and there is continued risk of abandonment, abuse, financial exploitation, neglect, or self-neglect of the alleged victim.
* When there have been multiple investigations and the potential for serious harm remains present.

Five members, including the APS supervisor or program manager, constitute a quorum for making recommendations. Recommendations may include:

* Locating relevant community resources.
* Determining if legal intervention is necessary.
* Assessment of future risk to the alleged victim.
* Suggestions to enhance the protective services plan.

In cases where there are unresolved professional disagreements with regard to a recommendation, the Regional Administrator will resolve the disagreement, and make a decision regarding the intervention recommendation.

Each team will consist of up to 15 community members:

* Having expertise in issues, services and resources for vulnerable adults.
* Representing a balanced, multidisciplinary composition of community members that may include law enforcement officers, physicians, mental health representatives, substance abuse counselors, DDA advocacy group members, prosecuting attorneys, AAA supervisors, health department officials, housing authority officials, fire department personnel, clergy, Long-Term Care or DD Ombuds, sexual assault advocacy group members, animal control officials, Assistant Attorneys General, Residential Care Services, or designated crisis responders.

The Regional Administrator (RA), based on recommendations by the APS supervisor and program manager, will appoint each member of the team to participate for a suggested two-year commitment. Regional Administrators have the authority to replace or include additional team members, as needed.

The APS program manager, in conjunction with the supervisor, may invite other pertinent resource people to attend a meeting if they have knowledge or expertise related to specific circumstances of a case. These resource people will have varying levels of involvement in the team (e.g., presenting information, answering questions, and/or participating in the recommendation).

All team members and invited resource people must sign and abide by a Confidentiality Agreement. When presenting and discussing an APS case, team members shall not use or divulge the names of the alleged victim, reporter and witnesses. Use only initials or identifiers as a means to protect the identities of the alleged victim, reporter, and witnesses.

Duties and Responsibilities of the Facilitator

The program manager or designee will:

* Establish and provide the meeting agenda or case consultation outlines, invite additional pertinent resource persons, facilitate group process, and do the case consultation summary with recommendations.
* Provide orientation and training to new and existing team members.
* Maintain records of cases presented to the Regional Resource Team.

Duties and Responsibilities of the APS Worker

The APS worker will:

* Notify the supervisor of high-risk or difficult cases for consideration of review by the Regional Resource Team.
* Complete a Regional Resource Team referral form and submit the form to the supervisor one week prior to the team meeting.
* Coordinate with other professionals involved in the case to solicit their input.
* Formally present the case at the Regional Resource Team meeting and follow up on recommendations made by the team.
* Update the RRT referral form and file it in the APS case record.
* Communicate the continuing status of the case to the supervisor or program manager to provide feedback to the Regional Resource Team at future meetings.

## Investigation Findings

References:

* [Chapter 34.05 RCW](https://apps.leg.wa.gov/RCW/default.aspx?cite=34.05)
* [RCW 74.34.020](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)

APS has four finding categories: unsubstantiated, inconclusive, substantiated, and No APS.

**Unsubstantiated** means a preponderance of the evidence indicates that, more likely than not, abuse, abandonment, neglect, self-neglect, or financial exploitation did not occur.

**Inconclusive** means the evidence is unreliable, not credible, unavailable, or insufficient to determine at this time whether or not abuse, abandonment, neglect, self-neglect, or financial exploitation occurred, on a more probable than not basis.

**Substantiated** means a preponderance of the evidence indicates that, more likely than not, abuse, abandonment, neglect, self-neglect, or financial exploitation occurred. Substantiated findings can be recommended, initial, or final findings. There are three types of substantiated findings.

| **Specific types of substantiated findings:** | **Meaning:** |
| --- | --- |
| Substantiated – Unknown Perpetrator | The identity of the perpetrator is undetermined.  Note**:** This finding is never made with an allegation of self-neglect or when an alleged perpetrator is identified. Prior to using this code, documentation must support that every effort to identify the alleged perpetrator has been made and documented. |
| Youth 11 or Under Youth 12-17 | The alleged perpetrator was under the age of 18 at the time of the allegation and the behavior is consistent with the elements of the [RCW 74.34.020](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.020) definitions of abuse, neglect, abandonment, or financial exploitation. Select the finding based on the age of the alleged perpetrator at the time of the allegation.  Note: The alleged perpetrator does not have the opportunity to request a hearing to challenge a youth finding and the name will not be forwarded to BCCU. |
| Substantiated – Individual Perpetrator | The identity of the individual perpetrator is known. |

APS must not use an *Alford* plea as conclusive evidence in making findings under chapter 74.34 RCW. APS must determine that the elements of the mistreatment are met with a preponderance of the evidence to make an initial substantiated finding against an AP with a conviction based on an Alford plea. APS can use a regular, non-Alford guilty plea, or conviction as evidence for a substantiated finding, where the elements of the crime match the elements of the mistreatments defined in [Chapter 74.34 RCW](http://apps.leg.wa.gov/rcw/default.aspx?cite=74.34).

**No APS** means that evidence was discovered during the investigation that found that APS does not have to complete a full investigation per [Chapter 74.34 RCW](https://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.063). There are five types of No APS findings.

| **Specific types of No APS findings:** | **Meaning:** |
| --- | --- |
| No APS - Not VA | Additional information indicates the alleged victim was not a vulnerable adult as defined in [Chapter 74.34 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34) at the time of the allegation.   * Consult with your supervisor if vulnerable adult status is unclear. The supervisor could request further consultation with an APS program manager for a determination of vulnerable adult status. |
| No APS - SN & AV Deceased | The allegation was self-neglect, but the alleged victim has expired. Continue any related investigation involving this same alleged victim and allegations of abuse, neglect, abandonment, or financial exploitation by an alleged perpetrator. |
| No APS - SN Already Resolved | The allegation was self-neglect, but the issues were permanently resolved before the due date of the initial face-to-face AV interview (does not include hospitalization). An example includes the alleged victim had already moved into a facility or with family members. |
| No APS - Other Investigative Authority | The allegation was determined to be outside of the scope of APS. A referral will be made to another investigative authority.  In these cases, APS will:   * Refer the alleged victim elsewhere for assistance. * Document any APS activity conducted to that point, the reason for case closure, and any referrals made by APS.   An example includes a tribe assumes jurisdiction during the investigation of a tribal member on tribal land. |
| No APS – Admin Error | The investigation was determined to be created in error or the investigation was determined to be a duplicate of the same incident. Approval must be granted by the program manager in order to use this code. |

Findings are either recommended, initial, or final findings.

**Recommended finding** means the APS worker has concluded the investigation and, based on a preponderance of the evidence, is making a recommendation to substantiatean allegation of abandonment, abuse, financial exploitation, or neglect by an identified individual perpetrator. Recommended findings become an initial finding once approved by the Investigative Review Team (IRT) and the substantiation letter is mailed to the alleged perpetrator.

**Initial finding** means a determination made by the department upon investigation of an allegation of abandonment, abuse, financial exploitation, neglect, or self-neglect. The APS worker makes the initial finding determination when:

* The allegation is self-neglect.
* The allegation involves an unidentified alleged perpetrator (e.g., TIVA2 does not have his or her name).
* The finding for an allegation involving an individual perpetrator is unsubstantiated or inconclusive.
* Is a youth finding.

**Final finding** means the department's substantiated finding of abandonment, abuse, financial exploitation, or neglect is upheld through the administrative appeal process specified in [Chapter 388-103 WAC](https://app.leg.wa.gov/wac/default.aspx?cite=388-103), or is not timely appealed to the office of administrative hearings. The alleged perpetrator can appeal a final finding to Superior Court and the Court of Appeals under the Administrative Procedure Act, [Chapter 34.05 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=34.05).

The supervisor must review, within 10 business days, all investigations awaiting approval and may take any of the following actions:

* Approve the closure of the investigation (for investigations not moving forward to the Investigation Review Team).
* Return the investigation for further work.
* Review the investigation and determine whether a preponderance of evidence supports a substantiated finding against an individual alleged perpetrator. If so, schedule the investigation for Investigation Review Team.

## Investigation Review of Recommended Substantiated Finding

References:

* [RCW 74.34.020](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
* [WAC 388-103-0001](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0001)

When the APS worker recommends a substantiated finding of an allegation of abandonment, abuse, financial exploitation, or neglect by an identified individual alleged perpetrator, the worker must enter the investigation support of finding and final activities and send the investigation for supervisory approval.

The supervisor must review, within 10 business days, all investigations awaiting approval and may take any of the following actions:

* Approve the completion of the investigation (for investigations not moving forward to the Investigation Review Team [IRT]).
* Return the investigation for further work.
* Review the substantiation recommendation with the program manager.
* Review the investigation and determine whether a preponderance of evidence supports a substantiated finding against an individual alleged perpetrator. If so, schedule the investigation for IRT.
* Determine if other vulnerable adults are at current risk of abandonment, abuse, financial exploitation, or neglect from the same alleged perpetrator. Create a new APS intake report for each newly identified alleged victim.

If the supervisor determines the investigation is ready for review by the IRT and submits the investigation to the IRT schedule, the supervisor will document in a case note, “On this date this investigation was reviewed and referred to IRT” using activity code Administrative and action type Investigation Review Team.

The APS worker and supervisor may use [TIVA2 Approval Guide](https://teamshare.dshs.wa.gov/sites/hcs/aps/forms/TIVA2%20Approval%20Guide%20Final%202021.docx) as part of their review.

| **Factors for Substantiation of Neglect or Abandonment** | |
| --- | --- |
| **Factor 1** | The victim is a [vulnerable adult](#_Vulnerable_Adults) per the definition in [RCW 74.34.020](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.020) or [RCW 74.34.021](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.021). Effective 7/22/11, SSB 5042 moved RCW 74.34.021 into RCW 74.34.020 creating only one citation for the definition of vulnerable adult. |
| **Factor 2** | The perpetrator is a person with a duty of care, as per the definition in [WAC 388-103-0001](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0001). |
| **Factor 3** | The findings are a result of action or inaction by the perpetrator. |
| **Factor 4** | The findings relate to the scope of duty of the individual, and the action or inaction of the perpetrator is a breach of that duty (i.e., What should have occurred, but did not happen? Or, what should not have occurred, but did?) |
| **Factor 5** | A preponderance of evidence supports all elements of the [RCW 74.34.020](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.020) definition of neglect or abandonment as follows:  ***Elements of Neglect -*** [***RCW 74.34.020(16)(a) or (b***](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.020)***)***  ***(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 the physical or mental health of the vulnerable adult, or that fails to avoid or prevent physical or mental harm or pain to the 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* [*RCW 9A.42.100*](http://apps.leg.wa.gov/RCW/default.aspx?cite=9A.42.100)*.*  ***Elements of Abandonment*** [***RCW 74.34.020(1)***](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.020)  ***(1)*** *The vulnerable adult did not have the means or ability to obtain necessary, food, clothing, shelter, or health care.* |

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| --- | --- |
| **Factors for Substantiation of Abuse** | |
| **Factor 1** | The victim is a vulnerable adult per the definition in [RCW 74.34.020](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.020) or [021](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.021). Effective 7/22/11, SSB 5042 moved RCW 74.34.021 into RCW 74.34.020 creating only one citation for the definition of vulnerable adult. |
| **Factor 2** | The findings are a result of willful action or inaction by the perpetrator. |
| **Factor 3** | A preponderance of evidence supports all elements of the appropriate [RCW 74.34.020(2)(a)-(e)](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.020) definition of abuse as follows:  ***Elements of Abuse –*** [***RCW 74.34.020(2)***](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.020)  ***(2)*** *Willful action or inaction that inflicts injury, unreasonable confinement, intimidation, or punishment on a vulnerable adult.*  *In instances of abuse of a 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 exploitation (Effective 07/24/2015 “personal exploitation”) of a vulnerable adult. Effective 07/24/2015, ESSB 5600 includes “improper use of restraint” in the abuse definition.*  *On January 17, 2017, the District III Court of Appeals invalidated the definition of “willful” in WAC 388-71-0105 (Crosswhite v DSHS). As “willful” remains an element in the abuse definition, proceed to gather evidence by determining if the AP knew that the action would cause injury, unreasonable confinement, intimidation or punishment* ***OR*** *by determining if the AP intended to inflict injury, unreasonable confinement, intimidation, or punishment. Willful applies to all material elements of the definition of abuse. Willful only applies to allegations of abuse* |

| **Factors for Substantiation of Financial Exploitation** | |
| --- | --- |
| **Factor 1** | The victim is a vulnerable adult per the definition in [RCW 74.34.020](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.020) or [021](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.021). Effective 7/22/11, SSB 5042 moved RCW 74.34.021 into RCW 74.34.020 creating only one citation for the definition of vulnerable adult. |
| **Factor 2** | The perpetrator is a person (For incidents that occurred prior to 7/22/11: the statute limits the definition of financial exploitation to acts by any person. An entity is excluded by definition from substantiation of financial exploitation.) Effective 7/22/11: SSB 5042 includes entity in the definition of financial exploitation. |
| **Factor 3** | A preponderance of evidence supports all elements of [RCW 74.34.020](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.020) definition of financial exploitation as follows:  ***Elements of Financial Exploitation –*** [***RCW 74.34.020(6)***](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.020)  ***(6)*** *Illegal or improper use of property, income, resources, or trust funds of the Vulnerable Adult, by any person for any person’s profit or advantage other than for the vulnerable adult’s profit or advantage. Effective 7/22/11, SSB 5042 amended the definition of financial exploitation to, “...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 for the vulnerable adult’s profit or advantage.* |

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| --- | --- |
| **Factors for Substantiation of Self-Neglect** | |
| An allegation of self-neglect must appear alone in an investigation (i.e., when there are also concurrent allegations of abandonment, abuse, financial exploitation, or neglect by a known or unknown alleged perpetrator, create an investigation separate from the allegation of self-neglect.) | |
| **Factor 1** | The victim is a vulnerable adult not living in a facility. |
| **Factor 2** | The neglect is not the result of inaction by a home health, hospice, or a home care agency, or an individual provider. Note: If the action or inaction is by a person with a duty of care then consider neglect rather than self-neglect. |
| **Factor 3** | The vulnerable adult failed to provide him or herself with the goods and services necessary for his or her physical or mental health. |
| **Factor 4** | The absence of the goods and services impairs or threatens the vulnerable adult’s well-being. |

## Investigation Review Team

References:

* [WAC 388-103-0001](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0001)
* [WAC 388-103-0040 through 0060](https://app.leg.wa.gov/wac/default.aspx?cite=388-103)

Each region will conduct, no less than weekly, a meeting of the investigation review team (IRT). The IRT will review recommended substantiated findings of abandonment, abuse, financial exploitation, or neglect.

The purpose of the IRT is to thoroughly review investigations and their recommended substantiations against known individual alleged perpetrators age 18 or older. The purpose of the IRT meeting is to review a recommended substantiated finding before it becomes an initial substantiated finding, as defined under [WAC 388-103-0001(8).](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0001)

The IRT is comprised of no less than four (4) individuals. They are:

* **Facilitator**: The facilitator of the IRT meeting is a Program Manager (PM) or another delegate of the Regional Administrator (RA) or Deputy Regional Administrator (DRA).

**The facilitator:**

* + Ensures investigations are timely calendared for the week’s IRT meeting.
  + Decides, with feedback from other members of the IRT, whether to hear an investigation at the IRT meeting or to strike it from the calendar.
  + Makes the final decision at the IRT meeting as to whether an investigation is approved, and an initial substantiated finding is made.
  + Consults with RA, DRA, or both as needed.
* **Legal Benefits Advisor (LBA)** – The LBA serves as the expert regarding legal issues surrounding making initial substantiated findings and general legal topics, such as rules of evidence, the Administrative Procedure Act, civil procedural rules, and relevant statutory, administrative, and case law.
* **Two Panel members** – The final two panel members must include RA, DRA, PM or Social and Health Program Consultants (SHPCs).
* Additional members may include a supervisor(s).

IRT members will:

* Review the investigation, including the intake, case notes, the disposition (the finding text), and all uploaded documents.
* Determine whether the finding, and each part of the allegation, are supported by a preponderance of the evidence.
* Determine whether the investigation meets the standards of all APS statutes, regulations, and policy.
* Provide feedback to the facilitator if their review identifies any areas that needs the attention of the IRT a minimum of 3 days prior to the date of the IRT meeting.

### Prior to the IRT Meeting

Within 5 business days prior to the investigation being entered onto the IRT log, the APS worker will document the AP’s last known address in a case note and verify the AP’s person management page is accurate.

An investigation must be entered onto the IRT schedule a minimum of 14 days in advance of the IRT meeting. Once entered onto the IRT schedule, no further information can be added to the investigation. If more information is discovered, the investigation must be rescheduled.

Each member of the IRT shall review investigations prior to the IRT meeting. Any concerns related to statute, regulation, or policy (e.g., missing evidence, no protective services, lack of follow up, other alleged victims noted, or other allegation types) will be identified and brought to the facilitator and addressed a minimum of 3 days in advance of the IRT meeting.

The facilitator will determine, based on their review and feedback from the IRT, whether the investigation meets the requirements of a substantiated finding and is ready for closure.

If the facilitator determines the investigation is not ready for approval, the facilitator will strike the investigation from the IRT meeting schedule. If struck from the schedule, the facilitator will provide feedback via email to the investigator’s supervisor. The email will include the reason for removing from the IRT meeting schedule and any remedies or recommended actions before rescheduling. If there are no further steps identified but the investigation does not meet the requirements of a substantiated finding, the facilitator will inform the supervisor of the inconclusive, unsubstantiated, or No-APS finding and its reasoning. The supervisor will address the feedback with the assigned investigator.

The LBA will draft the substantiation letter prior to IRT. If questions or clarification is needed, the LBA will coordinate with the facilitator.

### The IRT Meeting

For each investigation heard, the facilitator will verify panel members are in consensus that the investigation meets all the requirements for a substantiated finding, as well as all the requirements set out in APS statutes, regulations, and policy.

Once approved, the panel will review and approve the notice of initial substantiated finding drafted by the LBA.

Once complete, the facilitator will provide verbal approval of the recommendation for an initial substantiated finding.

If consensus is not reached for an initial substantiated finding, the facilitator may:

* Determine to move forward with a substantiation without consensus from the IRT panel.
* Consult with the RA, DRA, or both.
* Pend the investigation to obtain further information to support the finding.
* Obtain IRT consensus for an unsubstantiated or inconclusive finding and request the investigation be updated consistent with the panel’s findings.

**NOTE**: Because of the thorough review process by the IRT prior to the meeting, it should be the exception, rather than the norm, that an investigation is not approved at the meeting.

### After the IRT Meeting

The facilitator, or their delegate, will document the IRT decision on the Approvals tab under the APS IRT Review section.

The LBA will email the text of the notice of the initial substantiated finding to the APS HQ paralegals and the Program Manager at [aps.admin.hearings@dshs.wa.gov](mailto:aps.admin.hearings@dshs.wa.gov). The email will include:

* Investigation number
* Alleged perpetrator’s (AP’s) name
* AP’s last-known address
* Text of the factual basis

Within 10 business days of approval of the finding, paralegals at APS HQ will send notice to the AP as required under [WACs 388-103-0040 through 0060.](https://app.leg.wa.gov/wac/default.aspx?cite=388-103-0001)

## Notification of Findings

References:

* [Chapter 70.127 RCW](https://apps.leg.wa.gov/RCW/default.aspx?cite=70.127)
* [Chapter 71.24 RCW](https://app.leg.wa.gov/rcw/default.aspx?cite=71.24)
* [Chapter 71A.12 RCW](https://apps.leg.wa.gov/RCW/default.aspx?cite=71A.12)
* [RCW 74.34.068](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.068)

APS provides different types of information regarding the outcome of the investigation based on the recipient’s role in the investigation. APS is authorized to, and in some cases required to, provide an outcome report to the alleged victim, alleged perpetrator, and other investigative or case management partners based on statutory and regulatory requirements. All outcome reports must keep the identity of the reporter and any witnesses confidential.

There are two types of outcome reports:

* **Outcome report**: This outcome report includes the names of the alleged victim and the alleged perpetrator and investigation information. This outcome report is sent only to entities designated by law, such as law enforcement, who would receive un-redacted information.
* **Outcome report – AP:** This outcome report excludes the name of the alleged victim and investigation information but informs the receiver of the finding.

### Who Within DSHS Can Receive Information Related to an APS Finding?

APS may share an outcome report of an unsubstantiated, inconclusive, or initial substantiated finding with others within DSHS who have a need to know the information in order to administer a DSHS program (e.g., the requestor is involved in investigating a situation that could pose a risk to a child, disabled person, or vulnerable adult; or requires the information to assess an applicant as per a requirement in RCW, WAC or contract).

### Notification Summary Chart: Who Gets What Investigation Outcome Information?

| **Role in the APS Case** | **Type of Finding** | **Type of Information Provided by APS** | **When is it provided?** |
| --- | --- | --- | --- |
| **Alleged Victim (AV),**  and, if known,  **Legal Representative** | All Findings including, Youth Finding, and Initial Substantiated | **Verbal:** Inform the AV and legal representative, if any, of the finding. Inform the AV and legal representative, if any, that APS will be sending a letter to the alleged perpetrator with an initial finding.  **Written**: Upon request, APS will provide the AV and legal representative, if any, with a copy of the outcome report - AP on all findings, if requested.  **Note:** See Notifying the Alleged Victim’s Legal Representative for an [initial substantiated finding](#_Notifying_the_Alleged_1) or [other type of finding](#_Notifying_The_the) for further information about who is considered a legal representative.  **Exceptions:** If the legal guardian is also the perpetrator, then do not provide this verbal notification or a copy of the outcome report - AP, instead provide the notification via the [standard Alleged Perpetrator (AP) notification letter.](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/letters/Notice%20of%20Finding.docx&action=default)  Verbal notification to the alleged victim is not required if they are unable to understand (e.g., due to advanced dementia). | Routine  (See exceptions) |
| **Alleged Perpetrator (AP)** | Unsubstantiated or Inconclusive or Closed – no APS | **Verbal:** Disclose the finding.  **Written:** Upon request, provide the alleged perpetrator with a [courtesy AP letter](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/letters/Unsubstantiated%20-%20Inconclusive.docx&action=default) documenting the finding.  **Note:** APS is required to inform all alleged perpetrators who are employees, contractors or volunteers of the specific agencies & programs listed in [RCW 74.34.068(1).](https://app.leg.wa.gov/rcw/default.aspx?cite=74.34.068) | Routine  (See note) |
| Youth Finding | * **Verbal:** Disclose that APS made a youth finding. | Routine |
| Initial Substantiated | **Written**: Use the appropriate substantiated finding notification letter template ([Individual alleged perpetrator)](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/letters/Notice%20of%20Finding.docx&action=default) to create the letter. Send it via regular and certified mail to the last known mailing address of the alleged perpetrator.  See [Notifying the Alleged Perpetrator](#_Notifying_the_Alleged) in the Due Process section. | Routine |
| Final Substantiated | **Verbal:** Disclose the final finding. | Upon Request |
| **Alleged Perpetrator** who is a DSHS or DCYF Employee (including RHC and SOLA), AAA Employee, or AAA Subcontractor | Initial Substantiated | **Verbal:** The Regional Administrator will verbally notify the AP’s DSHS/DCYF appointing authority and the DSHS/DCYF HR Director, or the AAA Director.  **Written**: Use the appropriate substantiated finding notification letter template ([Individual alleged perpetrator)](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/letters/Notice%20of%20Finding.docx&action=default) to create the letter. Send it via regular and certified mail to the last known residence of the alleged perpetrator.  If the alleged perpetrator is a DSHS or DCYF employee union member, [modify the template](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/letters/Notice%20of%20Finding.docx&action=default) per instructions in this chapter.  **Note:** Do not give a copy of any outcome report, notification letter or any identifying information regarding an alleged perpetrator who is a DSHS or DCYF employee, AAA employee, or AAA subcontractor to a case manager in or outside the agency. An outcome report and notification letter in this instance is to be given only to the APS Regional Administrator. | Routine |
| Unsubstantiated or Inconclusive or No APS | **Verbal:** Disclose the finding.  **Written:** Upon request, provide the alleged perpetrator with a [courtesy AP letter](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/letters/Unsubstantiated%20-%20Inconclusive.docx&action=default) documenting the finding.  **Note:** Do not place a copy of any outcome report, notification letter or any identifying information regarding an alleged perpetrator who is a DSHS employee, AAA employee, or AAA subcontractor in the department file, nor give to a case manager in or outside the agency. | Routine |
| **Current DSHS / AAA / Aging Network Case Manager of the Alleged Victim** | All | **Verbal:** The APS worker may verbally inform the case manager of the finding.  **Written:** If the client was active in CARE at the time of the intake report, a notification of the finding will be provided to the case manager via CARE.   * Upon request, for a purpose consistent with [Chapter 74.34 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34), APS may provide additional investigation record information. | Routine |
| **Law Enforcement** | Youth Finding or Initial Substantiated | **Written:** APS outcome report  **Note:** Upon request, for a purpose consistent with [Chapter 74.34 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34), APS may provide additional investigation record information. | Routine – when a crime is suspected. |
| Inconclusive, Unsubstantiated, Substantiated-Unknown AP, Closed-No APS | **Verbal:** Upon request, provide a verbal notification for an investigation with a finding that was inconclusive, unsubstantiated, sub-unknown AP, or the investigation was Closed-No APS.  **Written:** Upon request, provide an outcome report for an investigation with a finding that was inconclusive, unsubstantiated, sub-unknown AP, or the investigation was Closed-No APS.  **Note:** Upon request, for a purpose consistent with [Chapter 74.34 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34), APS may provide additional investigation record information. | Upon Request |
| **Prosecuting Attorney** | All | **Written:** Upon request, provide the APS outcome report.  **Note:** Upon request, for a purpose consistent with [Chapter 74.34 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34), APS may provide additional investigation record information. | Upon Request |
| **Medicaid Fraud Control Division** | Initial Substantiated | **Written:** Provide the APS outcome report when Medicaid Fraud is suspected.  **Note:** Upon request, for a purpose consistent with [Chapter 74.34 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34), APS may provide additional investigation record information. | Routine – when Medicaid Fraud is suspected. |
| **The agency / program where the perpetrator is an employee, contractor, or volunteer** under:  DOH [Chapter 70.127 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=70.127)  DDA - [Chapter 71A.12 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=71A.12)  RSN - [Chapter 71.24 RCW](https://app.leg.wa.gov/rcw/default.aspx?cite=71.24) | Initial Substantiated | **The AV is a client of the agency or program.**  **Written:** Provide the APS outcome report – AP. | Routine – if the AV is a client of the agency or program. |
| Initial Substantiated | **The AV is not a client of the agency or program**  **Written:** Use the appropriate part of this template to create a [courtesy notification letter](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/letters/Agency%20Notice.docx&action=default) to send to an agency or program under [RCW 74.34.068](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.068) to inform them that their employee, volunteer or contractor has an initial substantiated finding against a vulnerable adult who is not their client. | Routine - if the AV is not a client of the agency or program, and APS knows the AP is associated with the agency or program. |
| **Home Care Referral Registry (HCRR)** | Initial Substantiated | **Written:** Send a [courtesy copy of the perpetrator notification letter](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame2.aspx?sourcedoc=/sites/hcs/aps/letters/Notice%20of%20Finding.docx&action=default) to the statewide Program Manager of the Home Care Referral Registry at the same time it is sent to the alleged perpetrator. | Routine – when APS knows that the AP is on the HCRR caregiver referral registry. |
| **Consumer Directed Employer - Consumer Direct of Washington (CDWA)** | Initial Substantiated | **Written:** Provide the APS outcome report – AP. | Routine – if the AP was working as an individual provider through CDWA |
| **DOH**  **Health Services Quality Assurance:**  **Professionals and Facilities** | All | **Written:** Provide the APS intake report and APS outcome report.  **Note:** APS has an information sharing agreement with HSQA and will routinely share intake and outcome reports. APS will share additional information upon request.  APS may redact information not relevant to the investigation. | Routine - when the investigation involved a facility/service licensed/certified by DOH or a perpetrator they professionally license, certify or register. |
| Final Substantiated | The LBA will send an e-mail notice to DOH of a final finding against a professional under RCW 18.130 using the following e-mail address, [HSQAComplaintIntake@doh.wa.gov](mailto:HSQAComplaintIntake@doh.wa.gov). Attach the outcome report and the latest (if original was modified) AP initial substantiation finding notification letter. Write in the email subject line, “Final Finding.” | Routine when the AP’s name is placed on the Vulnerable Adult Abuse Registry |
| **RCS/DCYF (the facility licensing authority)** | Initial Substantiated | **Written:** Provide the APS outcome report.  **Note:** Upon request, for a purpose consistent with [Chapter 74.34 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34), APS may provide additional investigation record information. | Routine – when  the event occurred in a licensed (or unlicensed) facility or  the event did not occur in a facility, but may impact the facility. |
| **The operator/licensee of an AFH, AL, NF, ICF/IID, or DCYF foster home.** | Initial Substantiated | **Written:** Provide the APS outcome report – AP. | Routine – if the abuse, abandonment, or financial exploitation occurred in their facility. |
| **Long-Term Care Ombudsman** | All | **Written:** Provide the APS outcome report – AP. Include the name of the facility with the report. | Routine – when the Ombudsman was involved in the case. |
| **HCS HQ PM responsible for Adult Day Care and Adult Day Health certifications (Susan Worthington)** | Initial Substantiated | **Written:** Provide the APS outcome report. Include the name of the facility or entity with the report.  **Note:** Upon request, for a purpose consistent with [Chapter 74.34 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34), APS may provide additional investigation record information.  See [Medicaid ADC/ADH contracted providers](http://intra.altsa.dshs.wa.gov/hcs/documents/WA%20ADH%20Roster.pdf) for information on ADH | Routine – when the allegation occurred at an ADH/ADC program with a Medicaid contract. |

### Initial Substantiated Finding

If the investigation review of the recommended finding results in a determination that an allegation is substantiated, provide the following notifications of the youth finding or initial finding.

#### Notifying the Alleged Victim

In person or over the telephone, attempt to verbally inform the alleged victim that:

* The allegation was substantiated; and
* If the alleged perpetrator is 18 years of age or older, tell the alleged victim that APS will send a letter to notify the alleged perpetrator of the initial finding and their opportunity to request an administrative hearing to challenge the finding. Do not verbally notify the alleged victim if it was determined that an interview with the alleged victim was not possible (e.g., due to severe dementia).

If the alleged victim expresses objections to a letter being sent to the alleged perpetrator because of fear for the alleged victim’s physical safety, attempt to problem solve and offer protective services (e.g., protection order) or suggest a referral to other resources (e.g., domestic violence program) before sending the letter to the alleged perpetrator. Consult with the APS Senior Policy Advisor in extreme cases.

Upon request, APS will provide the alleged victim with a copy of the APS outcome report – AP, a courtesy copy of the notification letter APS sends to the alleged perpetrator, or both (redact the address of the alleged perpetrator before giving the copy of the letter to the alleged victim).

#### Notifying the Alleged Victim’s Legal Representative

The alleged victim may have a legal representative, which includes a designated attorney-in-fact, guardian, or conservator. The legal representative may be notified of the finding of the investigation as long as they are not the alleged perpetrator in the investigation, or other related investigations. If the legal representative is the alleged perpetrator, provide a written notification letter rather than verbal notification. See [Notification Summary Chart](#_Notification_Summary_Chart:). Only provide verbal or written notification to the attorney-in-fact if the Durable Power of Attorney has been triggered and the attorney-in-fact is playing an active role as the legal representative.

Provide verbal notification to the legal representative as well as the alleged victim. A copy of the APS outcome report – AP, a courtesy copy of the notification letter APS sends to the alleged perpetrator, or both, can be provided to the attorney-in-fact, guardian, or conservator upon request.

#### Notifying the Agency/Program Employer of the Alleged Perpetrator

Do not give a copy of an outcome report, notification letter or any identifying information regarding an **AP who is a DSHS employee, AAA employee, or AAA subcontractor** to a case manager or facility/program manager/owner in or outside the agency. An outcome report and notification letter are to be given only to the APS Regional Administrator.

APS is authorized by [RCW 74.34.068](http://app.leg.wa.gov/rcw/default.aspx?cite=74.34.068) to provide a written report of the outcome of an investigation with an initial substantiated finding, to the following agencies or programs when the alleged perpetrator is their employee, contractor, or volunteer:

* In-home services agencies licensed under [Chapter 70.127 RCW](http://app.leg.wa.gov/rcw/default.aspx?cite=70.127) (e.g., home health agencies, hospice agencies, and home care agencies)
* Programs authorized under [Chapter 71A.12 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=71A.12) (i.e., residential or vocational programs serving clients of DDA)
* Adult day care or day health programs
* Regional support networks authorized under [Chapter 71.24 RCW](http://app.leg.wa.gov/rcw/default.aspx?cite=71.24) and
* Managed care organizations
* Other agencies, which includes facilities.

The type of information that APS provides depends on whether the alleged victim is a client of the agency/program, which includes facilities.

When the alleged victim **is a client** of the agency/program:

* And the AP continues to be employed by the agency/program the day the initial substantiated finding is made:
  + Provide an outcome report - AP to the agency/program.
  + The appropriate parts of this optional [employer agency/program letter](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/letters/Agency%20Notice.docx&action=default) may be used as a cover letter when transmitting the report.
  + Fax, e-mail, or regular mail the letter to a pre-identified contact person within the agency/program.
  + Upload the outcome report - AP and the optional cover letter/fax transmittal sheet.
* And the AP is no longer employed by the agency/program the day the initial substantiated finding is made:
  + Provide an outcome report - AP to the agency/program.
  + The appropriate parts of this optional [employer agency/program letter](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/letters/Agency%20Notice.docx&action=default) may be used as a cover letter when transmitting the report.
  + Fax, e-mail, or regular mail the letter to a pre-identified contact person within the agency/program.
  + Upload the outcome report - AP and the optional cover letter/fax transmittal sheet.
* And the AP is no longer employed by the agency/program (where the incident occurred), but is employed by another agency/program the day the initial substantiated finding is made:
  + The APS program manager will determine whether to send a letter to inform the current agency/program under [Chapter 70.127 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=70.127), [Chapter 71A.12 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=71A.12) or [Chapter 71.24 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=71.24), or other agencies (including facilities).
  + The program manager, in consultation with the APS Senior Policy Advisor, will determine when to send a letter to inform another agency providing services to vulnerable adults or children.
  + Use the appropriate parts of this template to create the [employer agency/program letter](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/letters/Agency%20Notice.docx&action=default) (do not divulge the name of the alleged victim).
  + Send only the letter, do not send the outcome report.
  + Fax, e-mail, or regular mail the letter to a pre-identified contact person within the agency/program.

When the alleged victim that was mistreated by the AP is **not a client** of the agency/program (i.e., it was not an on-the-job allegation; the mistreatment of a vulnerable adult occurred elsewhere), but it has become known to APS that the alleged perpetrator is a current employee, contractor, or volunteer in an agency/program that serves vulnerable adults or children:

* The APS program manager will determine, when to send a letter to inform an agency/program under [Chapter 70.127 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=70.127), [Chapter 71A.12 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=71A.12) or [Chapter 71.24 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=71.24) or other agencies, which includes facilities. The supervisor/program manager, in consultation with the APS Senior Policy Advisor, will determine when to send a letter to inform another agency providing services to vulnerable adults or children.
* Use the appropriate parts of this template to create the [employer agency/program letter](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/letters/Agency%20Notice.docx&action=default) (do not divulge the name of the alleged victim).
* Send only the letter, do not send the outcome report.
* Fax, e-mail, or regular mail the letter to a pre-identified contact person within the agency/program.

#### Notifying the DSHS, DCYF, or AAA/Aging Network Case Manager of the Alleged Victim

The APS worker may provide a verbal courtesy notice to the case manager or designated case management contact person of the alleged victim that the APS worker intends to forward a recommendation for a substantiated finding of abandonment, abuse, financial exploitation, or neglect to the Investigation Review Team.

#### Notifying DSHS, DCYF, or AAA/Aging Network of a Substantiated Finding Against a DSHS, DCYF, or AAA/Aging Network Employee

When the alleged perpetrator is a DSHS, DCYF, or AAA/Aging Network employee, the APS Regional Administrator will verbally notify the DSHS/DCYF appointing authority or the AAA Director, and the DSHS/DCYF Human Resources Director when an initial substantiated finding is made.

The outcome report and notification letter are to be given only to the APS Regional Administrator (RA) and should not be placed in any non-APS files.

Only upon request by the DSHS/DCYF appointing authority or the AAA Director, the APS RA, or their delegate, may provide a copy of the APS outcome report – AP to the DSHS/DCYF appointing authority or the AAA Director.

#### Notifying the Consumer Directed Employer - Consumer Direct of Washington (CDWA)

Investigators will provide the APS Outcome Report - AP to CDWA for initial substantiated findings against an alleged perpetrator who is employed by Consumer Direct of Washington (CDWA).

Email the APS Outcome Report – AP via secure email to [infoCDWA@consumerdirectcare.com](mailto:infoCDWA@consumerdirectcare.com).

#### Notifying the Home Care Referral Registry

If, during intake or during the course of the investigation, APS becomes aware that the alleged perpetrator is a caregiver currently listed on the Home Care Referral Registry, APS will notify HCRR when the investigation results in an initial substantiated finding. See <http://www.hcrr.wa.gov/default.htm>.

APS shall provide this notification at the same time APS sends the initial substantiated finding notification letter to the alleged perpetrator.

#### Notifying Law Enforcement

Provide law enforcement with a copy of the outcome report of an investigation that resulted in a youth finding or initial substantiated finding of abandonment, abuse, financial exploitation, or neglect.

#### Notifying the DSHS Facility Licensing Authority

When the allegation occurred in a facility licensed or certified by DSHS, provide a copy of the outcome report with an initial substantiated finding to the DSHS division responsible for licensure or certification of that setting.

#### Notifying the Facility in which the Incident Occurred

When the allegation occurred in a facility licensed or certified by DSHS, provide a copy of the outcome report - AP with an initial substantiated finding to the owner/operator of that setting (e.g., AFH, AL, NF, CA Foster Home).

#### Notifying the Tribes

Follow the notification and communication protocol specified in the applicable tribal written working agreement when there is a substantiated finding involving a tribal member.

### Unsubstantiated, Inconclusive, or Substantiated-Unknown Perpetrator Findings

#### Notifying the Alleged Victim

APS will inform the alleged victim that the investigation finding was unsubstantiated, inconclusive, or substantiated – unknown perpetrator or the case was closed- no APS.

* Provide the finding verbally (in-person or phone call) and document the notification in TIVA2.
* If desired by the alleged victim, provide a copy of the outcome report-AP.

#### Notifying the Alleged Victim’s Legal Representative

The alleged victim may have a legal representative, which includes a designated attorney-in-fact, guardian, or conservator. The legal representative may be notified of the finding of the investigation as long as they are not the alleged perpetrator in the investigation, or other related investigations. If the legal representative is the alleged perpetrator, follow notification requirements for the alleged perpetrator. See [Notification Summary Chart](#_Notification_Summary_Chart:). Only provide verbal or written notification to the attorney-in-fact if the Durable Power of Attorney has been triggered and the attorney-in-fact is playing an active role as the legal representative.

Provide verbal notification to the legal representative as well as the alleged victim. A copy of the APS outcome report – AP, a courtesy copy of the notification letter APS sends to the alleged perpetrator, or both, can be provided to the attorney-in-fact, guardian, or conservator upon request.

#### Notifying the Alleged Perpetrator

When the investigation results in an unsubstantiated, or inconclusive finding or the case as closed – no APS, verbally inform the identified alleged perpetrator of the finding (in person or by phone) and document the notification in TIVA2.

* APS must notify the alleged perpetrator of the outcome of the investigation if the alleged perpetrator is an employee, contractor, or volunteer of an agency/program specified under [RCW 74.34.068](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.068).
* Upon request, provide the alleged perpetrator with a letter identifying the investigation finding.
* Create the letter using the [courtesy AP letter](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/letters/Unsubstantiated%20-%20Inconclusive.docx&action=default) template.
* The letter must not contain the name of the alleged victim nor disclose the identity of the reporter or any witnesses without their written consent.
* Either the APS worker or supervisor/program manager may sign the letter.
* Send the letter via regular mail to the alleged perpetrator’s last known place of residence.

#### Notifying the Agency/Program Employer of the Perpetrator

APS will not provide notification to an agency/program when the investigation determines the allegation is unsubstantiated, inconclusive or closed-no APS. Under [RCW 74.34.068](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.068), APS may only notify the agency/program employer of a substantiated finding.

**NOTE**: The alleged perpetrator may request a courtesy AP letter from APS that identifies the finding of the allegation against them as unsubstantiated, inconclusive, or the case was closed-no APS. If the alleged perpetrator shares this letter with their agency/program employer, and if the employer calls APS to inquire, APS may verify the validity of the information.

#### Notifying the DSHS (HCS/DDA), DCYF, AAA/Aging Network Case Manager of the Alleged Victim

APS workers can verbally notify the DSHS, DCYF, or AAA/Aging Network Case Manager of the alleged victim of the finding.

#### Notifying Law Enforcement

Upon request, provide law enforcement with a copy of the outcome report of an investigation that resulted in a finding that was unsubstantiated, inconclusive, substantiated–unknown perpetrator, or the investigationwas closed-no APS.

## Due Process and The Vulnerable Adult Abuse Registry

References:

* [42 U.S.C.1396r(g)(1)(D)](https://www.law.cornell.edu/uscode/text/42/1396r)
* [50 USC App. Sec. 511](https://law.justia.com/codes/us/2001/title50/app/soldiersa/dup1/sec511/)
* [Chapter 18.130 RCW](https://app.leg.wa.gov/RCW/default.aspx?cite=18.130)
* [Chapter 38.42 RCW](https://apps.leg.wa.gov/rcw/default.aspx?cite=38.42)
* [Chapter 388-103 WAC](https://app.leg.wa.gov/wac/default.aspx?cite=388-103)
* [RCW 4.28.080](https://app.leg.wa.gov/RCW/default.aspx?cite=4.28.080)
* [RCW 74.34.095(3)](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.095)
* [RCW 74.39A.056](https://app.leg.wa.gov/rcw/default.aspx?cite=74.39a.056#:~:text=RCW%2074.39a.,on%20long%2Dterm%20care%20workers.)
* [WAC 388-02-0155](https://apps.leg.wa.gov/WAC/default.aspx?cite=388-02-0155)
* [WAC 388-02-0570](http://apps.leg.wa.gov/WAC/default.aspx?cite=388-02-0215)
* [WAC 388-103-0100](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0100)
* [WAC 388-103-0210](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0210)

Due process is an alleged perpetrator’s constitutional right to notice of an initial substantiated finding, and the “opportunity to be heard” (challenge the finding) before a neutral body, which is the Office of Administrative Hearings (OAH). Legal Benefits Advisors (LBAs) represent the department in most administrative hearings at OAH. In some situations, the Attorney General’s Office will represent the department. See the [AGO-DSHS, ALTSA MOU](https://teamshare.dshs.wa.gov/sites/hcs/aps/After%20Event/Attorney%20General%20Legal%20Counsel%20Dated%20(2015).PDF).

### Notifying the Alleged Perpetrator

The requirements for notification and administrative appeal of a substantiated finding are specified in [Chapter 388-103 WAC](https://app.leg.wa.gov/wac/default.aspx?cite=388-103).

Within 10 business days of the Investigation Review Team (IRT) decision to make an initial substantiated finding, the HQ paralegal will send a notification letter signed by the Legal Benefits Advisor, paralegal, or their supervisor, to the alleged perpetrator using one of the following methods:

* Sending a copy of the notice by first-class mail and certified mail/return receipt requested, at the alleged perpetrator’s last known mailing address.
* Personal service of the notice as provided in [RCW 4.28.080](https://app.leg.wa.gov/RCW/default.aspx?cite=4.28.080).

Do not send a notice letter to the alleged perpetrator:

* Of a youth 11 or under finding or youth 12-17 finding.
* When the allegation was substantiated but the identity of the perpetrator age 18 or over is unknown.

The 10-day notification timeframe may be extended when necessary to:

* Accommodate the time it takes to translate the notification letter.
* Arrange for or provide safety precautions for the alleged victim.
* When APS is adhering to a specific request by law enforcement/prosecutor to not contact the alleged perpetrator (e.g., if a criminal investigation is in process).

Investigation Review Team does not need to reconvene to extend the 10-day notification timeframe.

Use the required wording of the appropriate notification letter template and letter attachments as the basis to create a letter to:

* The [individual alleged perpetrator](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/letters/Notice%20of%20Finding.docx&action=default)
* [Request the APS Hearing Form from OAH](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/WopiFrame.aspx?sourcedoc=/sites/hcs/aps/letters/APS%20Hearing%20Request%20(DSHS%2027-178).docx&action=default)
* The [List of OAH Field Offices](http://oah.wa.gov/Content-Area-Management/All-About-OAH-Hub/Office-Information)

Address the notification letter to the alleged perpetrator and provide a courtesy copy of the notification letter to the legal representative when the alleged perpetrator is 18 or older and known by APS to have a legal guardian or active attorney-in-fact (Durable Power of Attorney).

If the letter is returned by the post office with a forwarding address, re-send the notification letter using the updated address. The HQ paralegal will enter the address into TIVA2.

If the certified letter is returned, “Letter Undeliverable-Address Unknown,” the HQ paralegals in the Due Process Unit will:

* Research all databases (e.g., Barcode, ACES, CARE, Accurint) to attempt to obtain an address for the alleged perpetrator.
* Consider contacting collaterals in the investigation to locate the residence of the AP.
* Use personal service if appropriate.
* Send the notification letter once again both regular and certified/return receipt.
* Wait the allotted number of days per WAC that the AP has to request a hearing.
* If the AP has not requested a hearing within the allotted number of days per WAC or the letter was returned again, *undeliverable address unknown*, and personal service is not an option, place the name on the Vulnerable Adult Abuse Registry.
* The HQ paralegal will document unsuccessful attempts to obtain this information.

Notification letters regarding initial substantiated findings:

* Will not disclose the identity of the alleged victim, the reporter, or any witnesses.
* Will be translated into the preferred language of the alleged perpetrator and the legal guardian, if any. Mail the translated version with the English version. Follow [LTC Manual Chapter 15b](http://intra.altsa.dshs.wa.gov/docufind/LTCManual/) procedures to obtain translation of the customized text for these letters, and for translation into other languages.
* Will be created using the required template wording, that includes direction for:
  + Who signs the letter (Legal Benefits Advisor, paralegal, or their supervisor).
  + Mailing regular mail and certified mail with return receipt requested.
* Will be uploaded and documented in TIVA2

If the AP is a DSHS or DCYF employee:

* Implement standard alleged perpetrator notification procedures.
* Send an alleged perpetrator who is a DSHS employee or DCYF employee a substantiated finding notification letter that has been modified by removing the following text from the template: *You may be represented by an attorney or other person at the hearing.*
* A DSHS employed shop steward can represent an alleged perpetrator who is employed with DSHS and is a union member in pre-hearing and hearing activities to challenge an initial substantiated finding. The collective bargaining agreement (CBA) states that an employee has the right to union representation in matters that may affect their employment. Provisions of the CBA prevail over [WAC 388-02-0155](http://apps.leg.wa.gov/WAC/default.aspx?cite=388-02-0155) that prohibits DSHS or DCYF employees from representing an appellant against the department.

#### Alleged Perpetrator Dies Before Due Process

If the alleged perpetrator expires before the opportunity to request a hearing to challenge a substantiated finding or during the process of due process, the finding will remain an initial finding.

#### The Alleged Perpetrator is a Service Member on Active Duty or a Dependent of a Service Member on Active Duty

##### Service Member

The following active service members are entitled to benefits as outlined in [50 USC App. Sec. 511](https://law.justia.com/codes/us/2001/title50/app/soldiersa/dup1/sec511/) and [Chapter 38.42 RCW](https://apps.leg.wa.gov/rcw/default.aspx?cite=38.42):

* Army, Navy, Air Force, Marine Corps, and Coast Guard on active duty;
* National Guard called to active duty;
* Reserves ordered to report for duty; and
* Commissioned members of the Public Health Service and National Oceanographic and Atmospheric Administration.

In any civil action or proceeding where the service member is an alleged perpetrator (AP) or appellant, the service member in active duty is protected from civil actions and is entitled to have the adverse action stayed while in military service or within 180 days after termination of or release from military service.

Prior to sending the alleged perpetrator the notice of an initial substantiated finding, the HQ paralegal will search the Defense Manpower Data Center (DMDC) at <https://scra.dmdc.osd.mil/> to verify active-duty status:

* Print out the certificate stating whether the AP is or is not an active service member;
* Fill out and sign the affidavit addressing service status; and
* Upload the documents into TIVA2.

If the AP is a service member and does not respond to the finding notification letter within 30 calendar days, this action is considered a non-appearance:

* The HQ paralegal will complete a hearing request form on behalf of the AP and submit to OAH.
* OAH will send out its hearing notice.
* If the AP does not appear for the pre-hearing conference, the ALJ can enter a stay until the service member can appear.

##### Dependent of a Service Member

A dependent of a service member who is on active duty is entitled to the same protections against civil adverse actions as the service member. In this context, dependent means:

* The service member’s spouse;
* The service member’s minor child; or
* An individual for whom the service member provided more than one-half of the individual’s support for 180 days immediately preceding an application for relief under RCW 38.42.

If the AP is a dependent of a service member in active duty, send the initial substantiated finding notification letter as in regular due process. The dependent of a service member must submit an application for this benefit, stating that they are a dependent of a service member. The dependent is entitled to a stay of the proceedings or an appointed attorney. Contact the APS Office Chief of Legal and Records for this situation.

### Opportunity to Be Heard – The Administrative Hearing

The requirements for notification and administrative appeal of an initial substantiated finding are covered in the APS division rules ([Chapter 388-103 WAC](https://app.leg.wa.gov/wac/default.aspx?cite=388-103)), the Administrative Procedures Act ([Chapter 34.05 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=34.05)), and the DSHS Hearing rules ([Chapter 388-02 WAC](http://apps.leg.wa.gov/WAC/default.aspx?cite=388-02)).

An alleged perpetrator may request an administrative hearing to challenge an APS initial substantiated finding made on or after October 1, 2003.

An alleged perpetrator must request an administrative hearing timely for each initial substantiated finding. Generally, to be timely, the request must be received by OAH on or before the thirtieth (30th) calendar day after the day the notice is given to the alleged perpetrator. Specific requirements are under [WAC 388-103-0100](https://app.leg.wa.gov/wac/default.aspx?cite=388-103&full=true#388-103-0100).

If an administrative hearing is not requested, the initial substantiated finding becomes a final substantiated finding, and the perpetrator is placed on the Vulnerable Adult Abuse Registry (VAAR). *See* [Placing the Perpetrator on the Vulnerable Adult Abuse Registry.](#_Placing_the_Perpetrator)

When an administrative hearing has been requested (timely or not), the alleged perpetrator is referred to as the appellant.

### Discovery and Protective Order Procedure

Providing the appellant with the entire investigatory record (“discovery”) is a required aspect of due process and is permitted under [RCW 74.34.095(3)](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.095) when the alleged perpetrator has requested a hearing to challenge APS’ initial substantiated finding and requests the discovery.

#### When Discovery has been Requested

If the alleged perpetrator makes a timely request to OAH for an APS hearing, and requests discovery:

* The LBA will propose a protective order to the appellant for agreement.
* If agreed to, the LBA will present the order to the Administrative Law Judge (ALJ) for signature and entry. If not agreed to, the LBA will request the ALJ address a protective order on the record at a prehearing conference.

In either case, once a protective order is entered, the LBA will provide discovery to the appellant in accordance with the protective order.

The protective order will limit the appellant’s use of the APS investigation record information to challenging the APS finding in the administrative hearing. Although the ALJ has the discretion to order otherwise, the LBA will always present an order that protects the identities of both the alleged victim and the person who made the report to APS.

#### When Discovery has not been Requested

If the appellant does not request discovery, in a pre-hearing conference, the LBA will request that the ALJ enter a protective order to preserve the confidentiality of information submitted by APS in the hearing (such as exhibits and witness testimony).

### Witness Payment

The LBA will identify and determine potential DSHS-affiliated witnesses to testify for APS at an APS administrative hearing. DSHS-affiliated witnesses are not paid beyond their current salary for their testimony, time, and expertise.

The LBA will identify and determine potential witnesses who are not affiliated with DSHS who will testify without payment for their time and expertise. Mileage can be reimbursed at the standard state rate.

If the LBA is considering using the testimony of a paid expert witness during an administrative hearing, the LBA must consult with the APS Office Chief of Legal and Records.

### Case Dispositions Other Than Orders on the Merits and Orders on Jurisdiction

APS does not “settle” administrative hearings cases. This means the LBA will not agree to changing the initial substantiated finding to inconclusive or unsubstantiated in exchange for something on the part of the appellant (for example, giving the property back to an alleged victim in a financial exploitation case; or volunteering to withdrawal as an alleged victim’s guardian or attorney-in-fact).

If additional information related to a case is presented any time during the administrative hearing process, APS may determine that whether an initial substantiated finding should be changed to inconclusive or unsubstantiated:

* The LBA will consult with the APS Office Chief of Legal and Records to determine whether or not APS will modify the initial substantiated finding.
* If they are in agreement to modify, the supervisor will consult with the Deputy Director and Director of APS to make the final decision.

In cases where APS decides it cannot prove the findings by a preponderance of the evidence due to newly discovered or mitigating information, the LBA shall enter into a stipulation and order of dismissal with the appellant. If the appellant does not stipulate to the dismissal, the LBA shall change the finding to inconclusive, and move the ALJ to dismiss the hearing for lack of subject matter jurisdiction.

#### Review of an Initial Order – The DSHS Board of Appeals (BOA)

Either party may request review of an initial order entered by the ALJ. [*WAC 388-02-0570*](http://apps.leg.wa.gov/WAC/default.aspx?cite=388-02-0215). The LBA and the APS Office Chief of Legal and Records determine whether to appeal an initial order.

All BOA final decisions involving the APS program may be added by BOA to the BOA’s Index of Significant Decisions. Prior to moving the BOA to add an order to the index, the APS Office Chief of Legal and Records will consult with the APS Deputy Director.

### The Vulnerable Adult Abuse Registry

The department will maintain a registry of final findings and, upon request of any person, shall disclose the identity of a person with a final finding of abandonment, abuse, financial exploitation, or neglect. An integral component of this entry is the effective date. [*RCW 74.39A.056*](https://app.leg.wa.gov/rcw/default.aspx?cite=74.39a.056#:~:text=RCW%2074.39a.,on%20long%2Dterm%20care%20workers.)*;* [*Chapter 388-103 WAC*](https://app.leg.wa.gov/wac/default.aspx?cite=388-103)*.*

#### Placing the Perpetrator on the Registry

Dates when the initial substantiated finding becomes a final finding:

* If the alleged perpetrator did not request an administrative hearing (or did not timely request an administrative hearing). [*WAC 388-103-0100*](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0100)*.* the effective date on the registry is the date the initial substantiated finding notification letter was sent or personally served. The registry effective date remains the date of the initial substantiated finding letter, even when appealed if any judge’s order (which becomes final) dismisses an appeal for lack of subject matter jurisdiction.
* When the ALJ dismisses the hearing following default or withdrawal by the alleged perpetrator, and that dismissal order becomes a final order, the effective date on the registry is the date of the ALJ’s initial order.
* When the ALJ issues an initial order upholding the initial substantiated finding and the perpetrator fails to request a review of the ALJ's initial order by the Department's Board of Appeals (BOA), the effective date on the registry is the date of the ALJ’s initial order.
* When the BOA issues a final order upholding the initial substantiated finding. The effective date on the registry is the date of BOA’s final order.

In all circumstances when an initial substantiated finding becomes a final substantiated finding, the HQ Paralegal will place the perpetrator on the registry.

#### Changing a Registry Entry

In the following limited circumstances, an entry will be changed in the registry:

* When a final substantiated finding is overturned by a court of general jurisdiction, the registry entry must be changed in accordance with the Court’s order. Make a note in the TIVA2 Appeals Page and a comment in the box on the person’s Person Management – Abuse Registry page.
* If the perpetrator requests a hearing or a review by the BOA untimely, do not change the registry entry unless a hearing right is established (OAH) or good cause to be untimely (BOA) is established. If the registry entry is changed, make a note in the TIVA2 Appeals Page and a comment in the box on the person’s Person Management – Abuse Registry page.
* When a final finding is made against a nursing assistant, employed in a nursing facility or skilled nursing facility based upon a singular instance of neglect of a resident, the department may remove the finding of neglect from the department’s registry in response to a petition. Any such removal shall be based upon a written petition by the nursing assistant at least one year after the finding of neglect has been finalized. [[*42 U.S.C.1396r(g)(1)(D)*](https://www.law.cornell.edu/uscode/text/42/1396r)*;* [*WAC 388-103-0210*](https://app.leg.wa.gov/WAC/default.aspx?cite=388-103-0210)*.*](https://www.law.cornell.edu/uscode/text/42/1396r)  Refer any such request for name removal from the registry to APS Senior Policy Advisor.

### Providing Notice of Final Substantiated Findings

Although outcome reports are provided upon initial substantiated findings, the following notices are required once that finding becomes final.

#### Sending Final Findings of Professionals under RCW 18.130 to DOH

The HQ Paralegal will send an encrypted e-mail notice to DOH of a final finding against a professional under [Chapter 18.130 RCW](https://app.leg.wa.gov/RCW/default.aspx?cite=18.130) on the date that the name is placed on the Vulnerable Adult Abuse Registry using the following e-mail address, [HSQAComplaintIntake@doh.wa.gov](mailto:HSQAComplaintIntake@doh.wa.gov). Attach the outcome report and the latest (if the original was modified) AP initial substantiation finding notification letter. Write in the e-mail subject line, “Final Finding.”

#### Sending Notice of a Final Finding against a Nursing Assistant Employed in a Nursing Facility or Skilled Nursing Facility

The HQ Paralegal will report a final finding within 10 business days to the following:

* The current administrator of the facility in which the incident occurred
* The administrator of the facility that currently employs the nursing assistant, if known

#### Sending Notice of a Final Finding to RCS, HCS, AAA, DDA and DCYF Case Managers

The HQ Paralegal will report a final finding within 10 business days to the following when the entity is involved:

* HCS case manager
* AAA case manager
* DDA case manager
* DCYF contacts
* RCS contacts
* APS Office Chief of Legal and Records, but only when the perpetrator is an Individual Provider (IP), and when no other outcome report has been sent under this section. This requires the HQ Paralegal to search Individual ProviderOne (IPOne) or other systems related to IPs for each final finding to determine if the perpetrator is an IP
  + The date that the final finding was added to the Vulnerable Adult Abuse Registry/BCCU.
  + The final finding type of mistreatment - abandonment, abuse, financial exploitation, or neglect.
  + The AP was provided the opportunity to request an administrative hearing to challenge the finding.

## Case Record

References:

* [Administrative Policy 5.04](http://one.dshs.wa.lcl/Policies/Administrative/DSHS-AP-05-04.pdf)
* [Disposition Authority Number [DAN] 09-11-62143](https://www.sos.wa.gov/_assets/archives/RecordsManagement/department-of-social-and-health-services-records-retention-schedule-v.2.3-(october-2021).docx)

All APS documentation related to intake, investigation, and protective services is maintained electronically in TIVA2. Upload and document the receipt of documents and evidence in case notes within 10 business days of receipt. After the verification of a successful upload of the document or evidence, destroy the original paper document or evidence after 30 days ([Administrative Policy 5.04](http://one.dshs.wa.lcl/Policies/Administrative/DSHS-AP-05-04.pdf)). The uploaded document or evidence is considered the original.

* Upload all documents and evidence even if a minimal amount of information is relevant to the investigation.
* Upload each document separately into TIVA2 and use appropriate naming conventions.
* Write a concise, relevant summary of the document in case notes and refer to the uploaded document. Include where the document came from, who provided the document, and the date it was received, along with all relevant information (e.g., timeframe covered, observations)
* Do not copy and paste emails, other electronic records such as CARE notes, or other documents into case notes.
* Make sure any uploaded email only contains pertinent information to the current investigation.
* Text messages are not permitted for communication with participants of an investigation. In cases where the participant texts an APS worker, the APS worker will screenshot, upload the screenshot, and summarize the text in a case note. The APS worker will respond back to the participant through another means of communication such as a phone call, email, or home visit.
* If you have several types of documents (e.g., medical, financial, POA, etc.) upload each type separately so that each type of document is labeled appropriately.
* Documents that involve attorney/client privileged information such as AAG correspondence must be clearly marked as “Attorney Client Privilege - Do Not Disclose.”

### Record Retention

All records related to APS investigations will be retained for 35 years after the last activity\*. APS staff will need to retain all emails with any information related to APS investigations within an Outlook 35-year retention folder.

\*Last activity is defined as any action involving the alleged victim, including documentation of phone calls and receipt of documentation.

#### Electronic Evidence

* When a CD/DVD/Thumb drive is received, the APS investigator will upload the electronic records into TIVA2.
* The APS investigator will verify the electronic records in TIVA2 are true and correct. The APS investigator will give the CD/DVD/Thumb drive to their designated public records coordinators (PRCs) for proper labeling, appropriate packaging, and storage.
* The PRC will use barcode to label the CD/DVD/Thumb drive and store in a locked and secure cabinet or area.
* The regional records retention coordinator or PRC may send an archive box with the CD/DVD/Thumb drives to the state records center for storage to meet the required DSHS records retention schedule of 35 years. ([Disposition Authority Number [DAN] 09-11-62143](https://www.sos.wa.gov/_assets/archives/RecordsManagement/department-of-social-and-health-services-records-retention-schedule-v.2.3-(october-2021).docx))
* Records do not need to be held at the local office beyond 12 months of last activity. After 12 months of inactivity the records can be sent to Record Retention for archival. Coordination should occur with local records coordinators.
* If your office needs assistance, please contact the APS HQ Disclosure and Privacy Program Manager.

#### Paper Evidence

* When paper records are received by the APS worker, the APS worker will upload the records into TIVA2.
* The APS worker will verify the records are readable, complete, and accurate copy of the paper-based source documents. In instances where the content of the source document is not completely legible (faded receipt, coffee stain covering information, etc.), the source document must be retained for the entire minimum retention period.
* The APS worker will give the original hard copies to the clerical support staff who will then keep the records for 30 days from the date scanned, and then destroy using a secure destruction method (shred box) according to [Administrative Policy 5.04](http://one.dshs.wa.lcl/Policies/Administrative/DSHS-AP-05-04.pdf).

## Disclosure of APS Information

References:

* [42 CFR § 455.21](https://www.law.cornell.edu/cfr/text/42/455.21)
* [Chapter 70.02 RCW](https://app.leg.wa.gov/RCW/default.aspx?cite=70.02)
* [RCW 74.34.063](https://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.063)
* [RCW 74.34.067](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.067)
* [RCW 74.34.067](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.067)
* [RCW 74.34.068](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.068)
* [RCW 74.34.095](http://app.leg.wa.gov/rcw/default.aspx?cite=74.34.095)
* [RCW 74.34.200](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.200)

Intake, investigation, and protective services activities are documented in the APS electronic record. APS reports, the identity of the reporter, and all files, records, communications, and working papers used or developed in the investigation or provision of protective services are confidential. [*RCW 74.34.095*](http://app.leg.wa.gov/rcw/default.aspx?cite=74.34.095)*.*

Who has access to what APS information depends on the person’s role and whether the need for the information is for a purpose consistent with [Chapter 74.34 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34). This must be evaluated on a case-by-case basis.

### Within DSHS

Refer to the [Notification of Finding section](#_Initial_Substantiated_Finding) of this chapter for specific information about notification of an initial substantiated finding.

In situations involving clients of DSHS/Aging Network or facilities licensed by DSHS, APS may share intake, investigation, and protective service information within DSHS/Aging Network, as needed, to administer DSHS programs, facilitate investigation, case planning, provide protective services, and implement state and federal law.

* Consent by the individuals involved in the APS case is not required prior to sharing this information within DSHS/Aging Network.
* Document DSHS/Aging Network information requests and information sharing.
* Do not share APS attorney-client privileged information.
* Caution against secondary disclosure by the recipient, by including a notice on written material informing the recipient that the information from the APS case record is confidential and protected from further disclosure. [*RCW 74.34.095.*](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.095)

Also refer to the other applicable sections in this chapter for additional information about sharing information in these situations, including:

* [APS Investigation Involving a Client of a DSHS/AAA/Aging Network Case Manager](#_APS_Investigation_Involving)
* [Notification of APS Findings](#_Notification_of_Findings)

### Outside DSHS

While conducting an investigation or providing protective services, APS may need to obtain or share information about the alleged victim and the situation. For purposes of case planning and consultation related to the investigation or the provision of protective services, [RCW 74.34.067(3)](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.067) permits non-privileged information to be shared between APS and:

* Mandated reporters or the person who made the report
* Case managers
* Financial workers
* Contracted consultants
* Designated representatives of Washington Indian tribes

APS intake reports, outcome reports, or case record information may be shared with others as specifically mandated or permitted by statute, including:

* Law enforcement, prosecuting attorney, or DOH professional licensing authority. [*RCW 74.34.063*](https://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.063)*.*
* Specific agencies and programs. [*RCW 74.34.068*](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.068)*.*
* A facility in which a substantiated allegation occurred. [*RCW 74.34.067(8)*](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.067)*.*
* For purposes of case planning and consultation with mandated reporters or the person who made the report, case managers, contracted consultants, and designated representatives of Washington Indian tribes. *RCW 74.34.067(3).*

The reporter’s name is confidential and not subject to disclosure unless required by a court or presiding officer in an administrative proceeding. [*RCW 74.34.095(3).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.095) The reporter’s name must be redacted prior to release of the APS record.

Refer to the other applicable sections in this chapter for additional information about sharing information in these situations, including:

* [Coordinating with Other Investigative Authorities](#_Investigation:_Coordinating_with)
* [Notification of APS Findings](#_Notification_of_APS)

#### Certified Professional Guardianship and Conservatorship Board (CPGCB) and the Office of Public Guardianship (OPG)

APS may share information in specific cases with the CPGCB and the OPG as described in [RCW 74.34.067(6),](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.067) for:

* Recruiting or appointing appropriate guardians or conservators for certification
* Monitoring certified or public guardians or conservators
* Disciplining certified or public guardians or conservators

The public records coordinator will respond to all requests from the CPGCB or OPG. The public records coordinator will:

* Ask the CPGCB or OPG the purpose for the request to determine that the request meets statutory requirements and is consistent with the purposes of Chapter 74.34 RCW.
* Redact irrelevant information.
* Redact all reporter information.
* Stamp the pages with the WARNING stamp prohibiting secondary disclosure.
* Verbally and in the cover letter, inform the receiver that the documents are confidential per [RCW 74.34.095](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.095).

#### Court Orders, Subpoenas Duces Tecum, or Other Similar Demands for APS Information

Courts or presiding officers in administrative proceedings have the authority to order the disclosure of confidential APS information. [*RCW 74.34.095(3).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.095)

* If the order under [RCW 74.34.095(3)](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.095) is regarding the routine protective order and discovery for an administrative hearing over an initial substantiated finding, the LBA will refer to the [Discovery and Protective Order Procedure](#_Discovery_and_Protective).
* Otherwise, immediately forward any such requests to the APS Office Chief of Legal and Records.

#### Discovery

If APS case record information is being sought in conjunction with a legal proceeding (administrative hearing or court), refer the request to a Legal Benefits Advisor. Refer to [Due Process and Vulnerable Adult Abuse Registry](#_Due_Process_and) for specific information about disclosing information under these circumstances.

### Public Disclosure of APS Information

In addition to information outlined in this chapter, APS must also follow the confidentiality and disclosure requirements found in [Chapter 2](http://intra.altsa.dshs.wa.gov/docufind/LTCManual/) of the LTC manual (e.g., response timeframes).

#### Parameters for Every Public Disclosure Request for APS Information

When APS receives a public disclosure request for any APS records, communicate with the APS Disclosure & Privacy Program Manager at [apspublicrecords@dshs.wa.gov](mailto:apspublicrecords@dshs.wa.gov) to evaluate and respond to each request. The APS Disclosure & Privacy Program Manager will communicate and coordinate with the Attorney General’s Office and DSHS Public Disclosure Coordinator prior to disclosure, if needed.

State and federal laws, in addition to provisions in Chapter 74.34 RCW, may protect certain information from disclosure. For example, [Chapter 70.02 RCW](https://app.leg.wa.gov/RCW/default.aspx?cite=70.02) prohibits, unless specially authorized, the disclosure of information about HIV/AIDS or sexually transmitted diseases, the disclosure of records about alcohol/drug abuse or treatment, and the disclosure of information in records involving mental health services.

#### Summary Chart of Guidelines for Release of Requested APS Case Record Information

All requestsfor information must be evaluated on a case-by-case basis by the APS HQ Records Officer. The table below provides a general guideline for the dissemination of information from the APS case record.

| **Requester** | **Under These Circumstances** | **May have Access to this APS Case Record Information** |
| --- | --- | --- |
| **MFCD** | Upon request, when MFCD is considering or conducting an investigation. | Provide the MFCD with all requested APS information, un-redacted per federal law [42 CFR § 455.21](https://www.law.cornell.edu/cfr/text/42/455.21) and [APS MOU](https://teamshare.dshs.wa.gov/sites/hcs/aps/After%20Event/Attorney%20General%20-%20Medicaid%20Fraud%20Control%20Division%202021.pdf). |
| **Law enforcement**  **DSHS/Aging Network case manager**  **DSHS investigator**  **DSHS administrative hearing coordinator**  **Alleged victim, attorney-in-fact, legal guardian, conservator, or special agent**  **Court Visitor** | Upon written or verbal request from someone with a need to know the information **for a purpose consistent with Chapter 74.34 RCW**.  APS must ask for and evaluate the reason that the information is being requested in order to determine if disclosure of the information is **for a purpose consistent with Chapter 74.34 RCW**:   * Investigation of abandonment, abuse, financial exploitation, or neglect of vulnerable adults by the department or law enforcement * Case planning and consultation under [RCW 74.34.067](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.067) * Referral to law enforcement or prosecuting attorney under [RCW 74.34.063](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.063) * The provision of protective services by the department, including protection orders or guardianship, or * The pursuit of legal remedies including causes of action under [RCW 74.34.200](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.200). | Provide the APS case record after redacting information not specifically needed by the requester and as required by state or federal law.  Do not share attorney-client privileged communication of the Legal Benefits Advisor.  For non-APS hearings, APS workers will testify to the finding decision. A court order or order of a presiding officer in an administrative proceeding is required prior to APS testimony or release of case record documentation for submission into evidence. |
| **Coroner or medical examiner** | Upon written or verbal request from someone with a need to know the information **for a purpose consistent with Chapter 74.34 RCW** (i.e., the coroner or medical examiner is investigating whether abuse or neglect is related to the AV’s death). | Provide the APS case record after redacting information not specifically needed by the requestor and as required by state or federal law.  Do not share attorney-client privileged communication or work product of the Legal Benefits Advisor.  Share medical records. [*Chapter 70.02 RCW*](https://app.leg.wa.gov/rcw/default.aspx?cite=70.02.230)*.* |
| **Someone involved in the APS case:**   * **Alleged victim or legal guardian, conservator, or special agent** * **Court visitor** * **Attorney-in-fact** * **Alleged perpetrator** * **Collateral contact** * **Reporter (non-media)** | Upon written or verbal request **for the purposes not consistent with Chapter 74.34 RCW** (i.e., Not for the purposes of case planning or consultation, referral to other investigative authority, the provision of protective services, the pursuit of legal remedies, etc.) | Provide the requestor with a copy of any specific documents or items in the case record that the requestor had provided to APS (such as a letter, a photo, medical record, video, etc.)  Do not disclose information in the APS case record that was provided by someone other than the requestor.  APS will provide the requestor with additional information only after receiving an order from a judge or presiding officer in an administrative proceeding. *RCW* [*74.34.095(3).*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.095)See the discovery section regarding alleged perpetrator access to case record information for due process. |
| **All other requests including but not limited to:**   * **Court visitor in a guardianship action not filed by DSHS/AAG** * **Media** * **Legislative inquiry** * **Non-DSHS attorney** * **Public** | **Only upon court order** or the order of a presiding officer in an administrative proceeding. | APS will release the information from the APS case record that the judge or presiding officer has specifically ordered to be released.   * The court visitor will probably have this order incorporated at the time of appointment * The AAG may provide the requestor with a sample order to take to the judge to request access to the APS case record * If APS has reason to believe access to case record information may compromise the safety or well-being of someone involved in the case, then APS may challenge the requested access. |
| **DOH Health Services Quality Assurance (HSQA) investigator** | APS will follow the [RCS/APS/DOH HSQA MOU](https://teamshare.dshs.wa.gov/sites/hcs/aps/After%20Event/Department%20of%20Health%20(2016).pdf) regarding sharing information. | |
| **CPGCB and the OPG** | When making a referral consistent with the purpose of this chapter. | APS may share information in intakes and investigations with the CPGCB and OPG for the purposes described in [RCW 74.34.067(6).](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.067) |
| **HCRR** | When the AP is a caregiver listed on the referral registry | APS will provide a copy of the alleged perpetrator notification letter. |

## After Event Review

References:

* [Administrative Policy 9.01](http://one.dshs.wa.lcl/Policies/Administrative/DSHS-AP-09-01.pdf)
* [CFR 482.13 (c)(3)](https://www.law.cornell.edu/cfr/text/42/482.13)
* [RCW 26.44.020](https://apps.leg.wa.gov/RCW/default.aspx?cite=26.44.020)
* [RCW 74.34.020](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
* [RCW 74.34.035](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.035)
* [RCW 74.34.095](http://app.leg.wa.gov/RCW/default.aspx?cite=74.34.095)
* [RCW 74.34.300](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.300)
* RCW 9A.42.100

The department is required to conduct vulnerable adult fatality reviews in accordance with [RCW 74.34.300](http://app.leg.wa.gov/RCW/default.aspx?cite=74.34.300).

Staff are required to:

* Read [RCW 74.34.300](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.300) – vulnerable adult fatality reviews
* Follow DSHS [Administrative Policy 9.01](http://one.dshs.wa.lcl/Policies/Administrative/DSHS-AP-09-01.pdf)
* Notify their chain of command when there is a fatality, near fatality or major incident that may require an Incident Report or immediate attention
* Follow reporting requirements in [RCW 74.34.020](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020) and [RCW 74.34.035](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.035).

A **fatality** is a death of an individual.

A**near fatality** is when a physician has informed the department that the vulnerable adult is/was in serious or critical condition and their condition was suspected to be related to one of the factors identified:

* Abuse as defined in [RCW 74.34.020(2)](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
* Neglect as defined in [RCW 74.34.020(16)](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
* Self-Neglect as defined in [RCW 74.34.020(20)](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
* Abandonment as defined in [RCW 74.34.020(1)](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020)
* Endangerment with a controlled substance as defined in [RCW 9A.42.100](https://app.leg.wa.gov/RCW/default.aspx?cite=9A.42.100)
* Elopement
* Attempted suicide
* Medical equipment or the application and monitoring of medical equipment

A **major incident** is a matter requiring immediate attention of the Secretary, the appropriate Assistant Secretary, the Chief Risk Officer, and the Senior Director of Communications. This includes any situation involving harm or damage, or the threat of harm or damage as defined in [Administrative Policy 9.01](http://one.dshs.wa.lcl/Policies/Administrative/DSHS-AP-09-01.pdf).

### Reporting Requirements

[RCW 74.34.300](http://app.leg.wa.gov/RCW/default.aspx?cite=74.34.300) does not replace mandated reporters’ responsibility to report vulnerable adult mistreatment. All DSHS employees are mandated reporters per [RCW 74.34.020(13)](http://app.leg.wa.gov/RCW/default.aspx?cite=74.34.020) and must make a report to the department and/or law enforcement if there is reason to believe that a vulnerable adult was the victim of abandonment, abuse, financial exploitation, or neglect. [*RCW 74.34.035*](http://app.leg.wa.gov/RCW/default.aspx?cite=74.34.035).

In addition, when there is reason to suspect the near fatality or major incident of a vulnerable adult was caused by abuse, neglect, or abandonment by another person, mandated reporters shall report the incident to the department ([APS Intake number](https://www.dshs.wa.gov/altsa/home-and-community-services/reporting-abuse) or [APS Online Complaint Reporting](https://www.dshs.wa.gov/altsa/home-and-community-services/report-concerns-involving-vulnerable-adults)). But, if the near fatality or major incident of a vulnerable adult resulted from sexual or physical abuse, mandated reporters shall immediately report to the appropriate law enforcement agency and to the department.

Lastly, if there was reason to believe the fatality of a vulnerable adult was caused by abuse, neglect, or abandonment by another person, mandated reporters shall report the fatality to the medical examiner or coroner having jurisdiction, local law enforcement and make a report to the department ([APS Intake number](https://www.dshs.wa.gov/altsa/home-and-community-services/reporting-abuse) or [APS Online Complaint Reporting](https://www.dshs.wa.gov/altsa/home-and-community-services/report-concerns-involving-vulnerable-adults)) in the most expeditious manner possible.

If an intake worker becomes aware the alleged victim is deceased at the time of the intake report and the death is believed to have a nexus to the allegation, the intake worker will notify the intake supervisor. The intake supervisor will complete the [DSHS form 11-162 After Event Review Referral form](http://forms.dshs.wa.lcl/formDetails.aspx?ID=78103). The intake supervisor will submit the form to [altsaapsaer@dshs.wa.gov](file:///\\dshsapoly2411c\DATA1\APS_Policy\Chapter%206\New%20format\altsaapsaer@dshs.wa.gov%20) **within 14 calendar days from the date of knowledge.**

If there is an open investigation the APS worker will immediately notify their supervisor or program manager and submit the [DSHS form 11-162 After Event Review Referral form.](http://forms.dshs.wa.lcl/formDetails.aspx?ID=78103) The supervisor or program manager will review the intake and investigation and prioritize the case closure. The supervisor or program manager will email the After Event Review Referral form to the regional point of contact who will review the case, ensure the investigation is completed and the case is closed and will send the After Event Review Referral form to [altsaapsaer@dshs.wa.gov](mailto:altsaapsaer@dshs.wa.gov) **within 14 calendar days of the closure**.

[**DSHS form 11-162 After Event Review Referral form**](http://forms.dshs.wa.lcl/formDetails.aspx?ID=78103) **is for internal use only.** **The After Event Review Referral form completion should not be uploaded, or case noted in the investigation.** The form is not part of the investigative process.

All After Event Reviews are conducted by APS headquarters staff. APS headquarters may receive notice of a fatality, near fatality or major incident through APS, HCS or the AAA staff or from any source (e.g., community members, family members, the media, medical providers, or caregivers).

The After Event Review is a process to evaluate incidents of fatalities, near fatalities, and major incidents. What may be included in the review are the following elements:

* Facts of the incident
* Available records which may include but not limited to medical records, law enforcement, APS, RCS, DDA, Critical Incident Reports
* Applicable DSHS and Administration policy and procedures
* Applicable rules and statutes
* Actions of employees and contractors involved in the incident

All files, reports, records, communications, and working papers used or developed for purposes of a fatality review are confidential and not subject to disclosure pursuant to [RCW 74.34.095](http://app.leg.wa.gov/RCW/default.aspx?cite=74.34.095).

Headquarters may convene an After Event Review Case Staffing that may include representatives from within APS, other agency, division, or administration staff, or other individuals or professionals with expertise or relevant knowledge to the subject of the incident

An After Event Review Case Staffing may be initiated on any open investigation.

The After Event Review process will not address personnel issues. An employee investigation may be initiated at any time during the After Event Review when there is suspected violation of policy, practice, code of conduct, or law. Actions that generate an employee investigation include reasonable suspicion of the employee’s failure to:

* Comply with DSHS administrative policies.
* Comply with APS policies.
* Comply with applicable Collective Bargaining Agreements.
* Follow their duties and responsibilities in accordance with their position description.

Employee investigations and disciplinary actions will be conducted in accordance with DSHS policies and applicable Collective Bargaining Agreements.

For other APS Quality Assurance activities refer to [Long Term Care Manual Chapter 23](http://intra.altsa.dshs.wa.gov/docufind/LTCManual/).

## Mandated Reporter Requirements and Information

References:

* [Chapter 18.130 RCW](http://app.leg.wa.gov/rcw/default.aspx?cite=18.130)
* Chapter 74.09 RCW
* Chapter 74.39A RCW
* [RCW 26.44.030](http://app.leg.wa.gov/rcw/default.aspx?cite=26.44.030)
* [RCW 74.34.020](http://app.leg.wa.gov/rcw/default.aspx?cite=74.34.020)
* [RCW 74.34.035](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.035)
* [RCW 74.34.053](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.053)
* [RCW 74.34.063](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.063)

All DSHS staff are mandated reporters under [RCW 74.34.035](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.035). When a mandated reporter has reasonable cause to believe that abandonment, abuse, financial exploitation, or neglect of a vulnerable adult has occurred, the mandated reporter must immediately submit a report to the department. Reasonable cause to believe means it is probable that an incident of abandonment, abuse, financial exploitation, or neglect happened. Probable means that, based on evidence or information readily obtained from various sources, it is likely the incident occurred. Some types of contact between vulnerable adults are not required to be reported to law enforcement but must still be reported to DSHS   
See [RCW 74.34.035](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.035) for further details on mandatory and permissive reporting and confidentiality.

Make a report online at <https://www.dshs.wa.gov/altsa/reportadultabuse> or call the APS Centralized Intake line 1-877-734-6277; TTY – 1-833-866-5595.

Call the **RCS Complaint Resolution Unit (CRU) toll free at 1-800-562-6078** (TTY= 1-800-737-7931) if the allegation involves a vulnerable adult living in a residential facility (NF, AFH, AL, ESF, soldier’s home, residential habilitation center) or a certified program and there is a provider practice complaint. Go online or call the APS Intake number above if reporting abandonment, abuse, financial exploitation, neglect, or self-neglect of a vulnerable who lives in their own home or in a facility or certified program.

When there is reason to suspect that sexual assault or physical assault has occurred, mandated reporters shall immediately report to the appropriate law enforcement agency and to the department. Physical assault is not required to be reported if it meets the criteria in [RCW 74.34.035(4).](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.035) Reason to suspect means it is possible that an incident of sexual or physical assault occurred. Possible means that, based on information readily obtained from various sources, the incident could have happened.

Mandated reporters are also required to make a report to the medical examiner or coroner, as well as to the department and law enforcement, if they suspect a death of a vulnerable adult was caused by abuse, neglect, or abandonment by another person. [*RCW 74.34.035(5)*](http://apps.leg.wa.gov/rcw/default.aspx?cite=74.34.035).

**NOTE**: The department must immediately report to law enforcement when the initial report or the investigation indicates the alleged abandonment, abuse financial exploitation or neglect may be criminal. The department must make this report to law enforcement even if others have already made a report. [*RCW 74.34.063*](https://app.leg.wa.gov/RCW/default.aspx?cite=74.34.063).

A mandated reporter is not required by statute to report self-neglect by a vulnerable adult. However, reporting is encouraged to facilitate possible intervention.

Vulnerable adult reporting is mandatory for all:

* Employees of the department
* Law enforcement officers
* Social workers
* Professional school personnel
* Individual providers (defined in [RCW 74.34.020](http://app.leg.wa.gov/rcw/default.aspx?cite=74.34.020) as a person under contract to provide services in the home under [Chapter 74.09 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.09) or [Chapter 74.39A RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.39A))
* Employees or operators of any facility required to be licensed by the department (Assisted Living, nursing home, adult family home, soldiers’ home, residential habilitation center)
* Employees of a social service, welfare, mental health, adult day health, adult day care home health, home care, or hospice agency
* County coroners or medical examiners
* Christian Science practitioners
* Health care providers subject to [Chapter 18.130 RCW](http://app.leg.wa.gov/rcw/default.aspx?cite=18.130) (Includes, but is not limited to: physicians, physician’s assistants, physical therapists, occupational therapists, nurses, psychologists, podiatrists, dentists, nursing home administrators, optometrists, osteopaths, pharmacists, Emergency Medical Technician (EMT), paramedics, counselors, naturopaths, nursing assistants, dietitians, massage therapists, and radiology technologists).

All department employees are also mandated to report suspected child abuse and neglect. [*RCW 26.44.030*](http://app.leg.wa.gov/rcw/default.aspx?cite=26.44.030). To make a report, call toll free 1-866-EndHarm (1-866-363-4276) or the local Child Protective Services office:

Map

Description automatically generated

### Failure of a Mandated Reporter to Make an APS Report

Failure to make a mandated report or knowingly making a false report is a gross misdemeanor ([RCW 74.34.053](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34.053)).

When a mandated reporter fails to make a report:

* If the individual is unaware of the mandatory reporting requirements, provide the individual with information about his or her responsibility to make a report ([*DSHS brochure 22-810: Adult Protectives Services: Reporting Suspected Abuse, Neglect, Self-Neglect or Financial Exploitation*](https://teamshare.dshs.wa.gov/sites/hcs/aps/forms/APS_Mandated_Reporter_Brochure_updated.pdf)).
* Consult with the Regional Administrator or designee to determine if APS will file a report with either law enforcement or the prosecuting attorney to tell them of the mandated reporter’s failure to report alleged abuse, neglect, abandonment, or financial exploitation. Considerations include did the person know of his or her duty to report as a mandated reporter and know that the alleged victim was a vulnerable adult.

No facility, as defined by [Chapter 74.34 RCW](https://apps.leg.wa.gov/RCW/default.aspx?cite=74.34), agency licensed or required to be licensed under [Chapter 70.127 RCW](https://app.leg.wa.gov/rcw/default.aspx?cite=70.127), or facility or agency under contract with the department to provide care for vulnerable adults may develop policies or procedures that interfere with the reporting requirements of mandated reporters.

If APS encounters policies or procedures that interfere with reporting requirements, forward the information to:

* CRU regarding any facility licensed or certified by RCS (NF, AL, AFH, ESF, Soldier’s Home, RHC, certified program).
* Developmental Disabilities Administration (DDA) Regional Administrator or designee regarding any contracted DDA program.
* Department of Health (DOH) regarding any in-home services agency (home health, hospice, or home care agency).

### Permissive Reporting of the Abuse of Vulnerable Adults

Permissive reporters are strongly encouraged, but are not required, to report to the department or to law enforcement when there is reasonable cause to believe that a vulnerable adult is being or has been abandoned, abused, financially exploited, or neglected, or when the vulnerable adult is self-neglecting.

A permissive reporter is anyone not mandated in [Chapter 74.34 RCW](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34) (or required by WAC or contract) to make a report, including:

* Employee of a financial institution
* Attorney
* Long-Term Care Ombudsman

### Reporter Confidentiality and Immunity

Unless there is a judicial proceeding or the person consents, the identity of the person making the report under this section is confidential. Disclosure is permitted when making a referral or providing information to other agencies authorized to investigate the matter, such as law enforcement, Medicaid Fraud Control Division, and Department of Health Systems Quality Assurance.

Persons who report in good faith and/or testify about alleged abuse, neglect, abandonment, financial exploitation or self-neglect are not in violation of confidential communication privileges and are immune from liability as a result of the report or testimony.

## Resources

* 1. To order DSHS forms, go to the [ALTSA intranet](https://intra.altsa.dshs.wa.gov/), click Forms on the upper menu, choose DSHS Internet Forms from the drop down. Click Forms and Records Management Services from the left-hand menu, and follow the instructions for ordering, using the form number. [Forms and Records Management Services | DSHS (wa.gov)](https://www.dshs.wa.gov/office-of-the-secretary/forms-and-records-management-services)
  2. Visit the [APS SharePoint site](https://teamshare.dshs.wa.gov/sites/hcs/aps/_layouts/15/start.aspx#/) for frequently used forms, approved letter templates, training material, MOUs/agreements, and TIVA2 information.
  3. Check the [APS Intranet site](http://intra.altsa.dshs.wa.gov/aps/) for Management Bulletins, Resources, and information regarding Quality Assurance and Intervention Services.

## 

## APS List of Acronyms

**AA** – Alcoholics Anonymous

**AAA** – Area Agency on Aging

**AAG** – Assistant Attorney General

**ABDM** - Abandonment

**ACES** – Automated Client Eligibility System

**ADL** – Activity of Daily Living

**ADS** – Aging and Disability Services

**AFH** – Adult Family Home

**AGO** – Attorney General’s Office

**AIF** – Attorney-in-Fact

**ALF** – Assisted Living Facility

**ALJ** – Administrative Law Judge

**ALTC** – Aging & Long-Term Care

**ALTSA** – Aging & Long-Term Support Administration

**AP** – Alleged Perpetrator

**APPT** - Appointment

**APS** – Adult Protective Services

**APSAS** – Adult Protective Services Automated System

**APT** - Apartment

**ARC** – Adult Residential Care

**ATTY** - Attorney

**AV** – Alleged Victim

**BOA** – Board of Appeals

**BRO** - Brother

**CARE** – Comprehensive Assessment Reporting and Evaluation Tool

**CC** – Collateral Contact

**CD** – Chemical Dependency

**CFH** – Children’s Foster Home (private)

**CFR** – Code of Federal Regulations

**CIT** – Crisis Intervention Team

**CL** – Client

**CM** – Case Manager

**COPES** – Community Options Program Entry System

**CPGCB** – Certified Professional Guardianship and Conservatorship Board

**CPR** – Cardiopulmonary Resuscitation

**CPS** – Child Protective Services

**CRM** – Case Resource Manager

**CRT** – Crisis Response Team

**CRU** – Complaint Resolution Unit

**CSO** – Community Service Office

**DCFS** – Division of Children & Family Services

**DCR** – Designated Crisis Responder

**DCYF** – Department of Children, Youth, and Families

**DDA** – Developmental Disabilities Administration

**DLR** – Division of Licensed Resources

**DMHP** – Designated Mental Health Professional

**DOB** – Date of Birth

**DOH** – Department of Health

**DOH HPF** –The Office of Health Professions and Facilities

**DOH OII** – The Office of Investigation and Inspection

**DOL** – Department of Licensing

**DMV** – Department of Motor Vehicles

**DPOA** – Durable Power of Attorney

**DRA** – Deputy Regional Administrator

**DSHS** – Department of Social and Health Services

**DTR** – Daughter

**DV** – Domestic Violence

**DVR** – Division of Vocational Rehabilitation

**DX** – Diagnosis

**EARC** – Enhanced Adult Residential Care

**EJC** – Elder Justice Center

**EMT** – Emergency Medical Technician

**ESF** – Enhanced Services Facility

**FCSP** – Family Caregiver Support Program

**FE** – Financial Exploitation

**FH** – Foster Home (DCFS)

**FV** – Field Visit

**GAL** – Guardian Ad Litem

**GDTR** – Granddaughter

**GSON** - Grandson

**HCRR** – Home Care Referral Registry

**HCA** – Health Care Authority

**HCS** – Home & Community Services

**HV** – Home Visit

**HX** – History

**I&A** – Information & Assistance

**IADL** – Instrumental Activity of Daily Living

**ICF**– Intermediate Care Facility

**IFF** – Initial Face to Face

**IRT**- Investigation Review Team

**IP** – Individual Provider

**IUR** – Improper Use of Restraint

**JRA** – Juvenile Rehabilitation Administration

**L&I** – Department of Labor & Industries

**LBA** – Legal Benefits Advisor

**LE** – Law Enforcement

**LM** – Left Message

**LPN** – Licensed Practical Nurse

**LTCO** – Long-Term Care Ombudsman

**MA** – Mental Abuse

**MFCU** – Medicaid Fraud Control Unit

**MH** – Mental Health

**MOU** – Memorandum of Understanding

**MPC** – Medicaid Personal Care

**N** - Neglect

**NH** – Nursing Home

**NF** – Nursing Facility

**OPG** – Office of Public Guardianship

**OV** – Office Visit

**P1** – Provider One

**PA** – Physical Abuse

**PACE** – Program of All-Inclusive Care for the Elderly

**PCP** – Primary Care Provider

**PM** - Program Manager

**POA** – Power of Attorney12

**POR** – Public Online Report

**RA** – Regional Administrator

**RCS** – Residential Care Services

**RCW** – Revised Code of Washington

**RHC** – Residential Habilitation Center

**RN** – Registered Nurse

**RRT** – Regional Resource Team

**SA** – Sexual Abuse

**SER** – Service Episode Record

**SI&A** – Senior Information & Assistance

**SIS** - Sister

**SL** – Supported Living (DDA contracted services, formerly included ITS as one type)

**SME** – Subject Matter Expert

**SNF** – Skilled Nursing Facility

**SOLA** – State Operated Living Alternative (DDA)

**SSA** – Social Security Administration

**SSI** – Supplemental Security Income

**SSPS** – Social Service Payment System

**SSS**- Social Service Specialist

**SW** – Social Worker

**SX** - Symptoms

**TC** – Telephone Call

**TIVA** – Tracking Incidents of Vulnerable Adults

**TIVA2** – Tracking Incidents of Vulnerable Adults 2

**TRO** – Temporary Restraining Order

**TTY** - Teletypewriter

**TX** – Treatment

**USDVA** – United States Department of Veterans Affairs

**VA** – Vulnerable Adult

**VAPO** – Vulnerable Adult Protection Order

**VM** – Voicemail

**WAC** – Washington Administrative Code

**WADVA** – Washington State Department of Veterans Affairs

**Y/O** – Years old