

DEVELOPMENTAL DISABILITIES ADMINISTRATION  
RESIDENTIAL HABILITATION CENTER  
STANDARD OPERATING PROCEDURE

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TITLE: PREVENTION AND DETECTION OF ABUSE, NEGLECT, AND MISTREATMENT PROCEDURE 101.2

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**PURPOSE**

To establish processes and training to help a Residential Habilitation Center (RHC) prevent and detect abuse, neglect, and mistreatment of DDA clients.

**SCOPE**

This policy applies to all RHC employees, interns, contractors, and volunteers.

**PROCEDURE**

A. Training

1. All employees must complete an annual training on:
  - a. DDA 5.06, *Client Rights*;
  - b. DDA 5.13, *Mandatory Reporting*;
  - c. DSHS Administrative Policy 18.64, *Standards of Ethical Conduct*; and
  - d. RHC Standard Operating Procedure 102.2, *Employee Conduct*.
2. All direct client care service contractors and volunteers will be provided with training on abuse, neglect, or mistreatment.
3. All employees must complete a bi-annual training on de-escalation techniques through Therapeutic Options training which includes identifying signs of stress and behavior that may lead to abuse, neglect, or mistreatment of DDA clients.

B. Prevention

1. Each RHC must post information in the living units and other appropriate locations that state an employee's legal obligation to report abuse, neglect, and mistreatment.

2. If an employee is assigned to a living unit they are unfamiliar with, the employee must complete an orientation on the living unit with the charge or the charge's designee at the beginning of their shift.
3. The RHC must ensure the physical setup of a living unit does not contribute to possible abuse and neglect.
4. RHC management must:
  - a. Deploy supervisors for routine rounds on all shifts; and
  - b. Analyze supervisor deployment to determine whether current staffing meets the clients' needs.
5. Following an incident of confirmed abuse, neglect, or mistreatment, the RHC must develop and implement a written plan to prevent similar incidents in the future.

C. Detection

1. At the time of admission and annually thereafter, the RHC must provide a client and their family or guardian:
  - a. A list of client rights;
  - b. Procedures for reporting concerns and grievances;
  - c. Procedures for reporting abuse, neglect, and mistreatment; and
  - d. Information about advocacy organizations, such as the Office of Developmental Disabilities Ombudsmen.
2. RHC employees must:
  - a. Analyze behaviors and injuries for patterns that may suggest abuse, neglect, or mistreatment; and
  - b. Review incident trends at least quarterly.
3. Facility management must ensure both routine and non-routine observations are completed using tools identified by the facility.

**AUTHORITY**

42 CFR 483.420	<i>Client Protections</i>
42 CFR 483.12	<i>Freedom from Abuse, Neglect, and Exploitation</i>
Chapter 74.34	<i>Abuse of Vulnerable Adults</i>
Chapter 26.44	<i>Abuse of Children</i>

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DSHS Administration Policy 8.02    Client Abuse Reporting  
DDA Policy 5.13                      Protection from Abuse

## **DEFINITIONS**

**Abuse** means the willful action 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, and physical abuse, personal exploitation of a vulnerable adult and improper use of restraint which have the following meanings:

**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.

**Mental abuse** means any willful verbal or nonverbal action that threatens, humiliates, harasses, coerces, intimidates, isolates, unreasonably confines, or punishes a vulnerable adult. Mental abuse may include ridiculing, intimidating, yelling, or swearing.

**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.

**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.

**Sexual abuse** means any form of nonconsensual sexual contact, including but not limited to unwanted or inappropriate touching, rape, 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, 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.

**Resident to Resident or Client to Client Abuse** means one individual initiates non-accidental physical contact with another individual. The outcome may or may not result in physical injury or harm or fear of imminent harm or sexual coercion, harassment, or sexual exploitation of the other client/resident. If the RHC has failed to provide care and services to avoid physical harm, mental anguish, or mental illness, it should be considered neglect.

**Incident** means an occurrence involving a resident in which mistreatment, neglect, abuse, misappropriation of resident property or exploitation are alleged or suspected; an injury of unknown source, or cause, or circumstance; or an accident.

**Mistreatment** includes behavior or facility practices that result in any type of client exploitation such as financial, physical, sexual, or criminal. Mistreatment also refers to the use of behavioral management techniques outside of their use as approved by the specially constituted committee and facility policies and procedures.

**Neglect** means: (a) a pattern of conduct or inaction by a person or entity with a duty of care that fails to provide the goods and services that maintain physical or mental health of a vulnerable person, or that fails to avoid or prevent physical or mental harm or pain to a vulnerable adult; or (b) an act or omission by a person or entity with a duty of care that demonstrates a serious disregard of consequences of such a magnitude as to constitute a clear and present danger to the vulnerable adult's health, welfare, or safety, including but not limited to conduct prohibited under RCW 9A.42.100. For example, staff failure to intervene appropriately to prevent self-injurious behavior may constitute neglect. Staff failure to implement facility safeguards, once client to client aggression is identified, may also constitute neglect.

**SUPERSESSSION**

None.

Approved: /s/ Donald Clintsman Date: May 15, 2018  
Deputy Assistant Secretary  
Developmental Disabilities Administration