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## The who, what and where of mandated reporting

Hopefully, all people who witness or suspect maltreatment will report the abuse. However, mandated reporters are a special group required to report suspected maltreatment.

Mandated reporters are professionals or professional's delegate identified by law who **MUST** make a report if they have reason to believe that the abuse, neglect, or financial exploitation of a vulnerable adult has occurred. "Mandated reporter" means a professional or professional's delegate while engaged in:

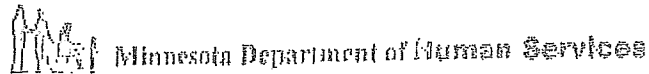
- Social services
- Law enforcement
- Education
- Direct care
- Licensed health and human services professionals (MS 214.01, subdivision 2)
- Employment in a licensed facility
- Medical examiner or coroner activities

## Common Entry Point

The Common Entry Point (CEP) is a designated unit at the local level that is responsible for receiving reports of suspected maltreatment. The CEP is available 24 hours per day to take calls from mandated and voluntary reporters of suspected maltreatment of vulnerable adults. The CEP will immediately report to a law enforcement agency any incident in which there is reason to believe a crime has been committed.

To report abuse or neglect of a vulnerable adult in Minnesota, contact the local Common Entry Point (CEP) office in the county where the vulnerable adult lives or where the maltreatment occurred.

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Before we go too far, we need to establish some common language and definitions. An attempt has been made to avoid 'legislative rhetoric' in our training materials; however, the reality is that some of the common language or definitions we use **ARE** from Statute and Rule. For the most part, you will use the link above (**MN STATUTE**) to connect to the exact legislative language.

**Vulnerable Adult**

Minnesota Statute (MS 626.5572, subd. 21) defines 'vulnerable adult' as any person 18 years of age or older who:

**Categorical:**

(1) Is a resident or inpatient of a facility

(2) Receives services at or from a facility required to be licensed to serve adults under sections MS 245A.01 to 245A.15

*Exception:* a person receiving outpatient services for treatment of chemical dependency or mental illness, or one who is served in the Minnesota sex offender program, is on a court hold order for commitment, or is committed as a sexual psychopathic personality or as a sexually dangerous person under chapter MS 253B, is not considered a vulnerable adult unless the person meets the requirements of clause (4)

(3) Receives services from a home care provider required to be licensed under section MS 144A.46; or from a person or organization that exclusively offers, provides, or arranges for personal care assistant services under the medical assistance program as authorized under sections MS 256B.04, subdivision 16, MS 256B.0625, subdivision 19a, MS 256B.0651, and MS 256B.0653 to 256B.0656 or

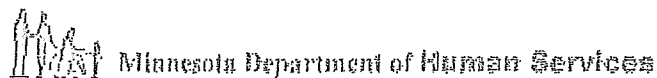
**Functional:**

(4) Regardless of residence or whether any type of service is received, possesses a physical or mental infirmity or other physical, mental, or emotional dysfunction:

(i) That impairs the individual's ability to provide adequately for the individual's own care without assistance, including the provision of food, shelter, clothing, health care, or supervision; and

(ii) Because of the dysfunction or infirmity and the need for care or services, the individual has an impaired ability to protect the individual's self from maltreatment.

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## Definitions overview

### Maltreatment

Maltreatment means abuse, neglect, or financial exploitation as defined below:

- **Abuse** is physical, emotional, or sexual (MS 656.5572, subd. 2)
- **Neglect** is the failure to provide for food, clothing, shelter, medical care and/or supervision (MS 626.5572, subd. 17)
- **Financial Exploitation** is the misuse of a funds, assets or property or the failure to use the vulnerable adult's financial resources to care for the vulnerable adult, which results in or is likely to result in detriment to the vulnerable adult (MS 626.5572, subd. 9)

### Abuse

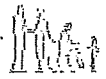
Abuse means an act against a vulnerable adult that constitutes a violation of, an attempt to violate, or aiding and abetting a violation of these statutes:

- Assault in the first through fifth degrees (MS 609.221 to 609.224)
- The use of drugs to injure or facilitate crime (MS 609.235)
- The solicitation, inducement, and promotion of prostitution (MS 609.322)
- Criminal sexual conduct in the first through fifth degrees (MS 609.342 to 609.3451)



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## Types of abuse

Conduct which is not an accident or therapeutic conduct as defined in this section, which produces or could reasonably be expected to produce physical pain or injury or emotional distress including, but not limited to, the following:

- Hitting, slapping, kicking, pinching, biting, or corporal punishment of a vulnerable adult
- Use of repeated or malicious oral, written, or gestured language toward a vulnerable adult or the treatment of a vulnerable adult which would be considered by a reasonable person to be disparaging, derogatory, humiliating, harassing, or threatening
- Use of any aversive or deprivation procedure (punishment) according the Jensen Settlement Agreement, unreasonable confinement, or involuntary seclusion, including the forced separation of the vulnerable adult from other persons against the will of the vulnerable adult or the legal representative of the vulnerable adult
- Use of any aversive or deprivation procedures for persons with developmental disabilities or related conditions not authorized under MS 245.825

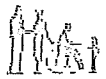
Any sexual contact or penetration as defined in MS 609.341, between a facility staff person or a person providing services in the facility and a resident, patient, or client of that facility

The act of forcing, compelling, coercing, or enticing a vulnerable adult against the vulnerable adult's will to perform services for the advantage of another.



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## Test your knowledge

Now that you've been exposed to some of the legal definitions involved with mandated reporting, let's see how those definitions work in specific situations. You will be provided with a scenario and several responses to each situation. Choose the correct response.

### Meet John:

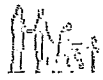
John is 25 years old and lives at an adult foster care home. He also attends a day training and habilitation program five days per week. John has limited communication abilities.

On Monday morning, John arrives at his day program as usual. As the day program staff persons are assisting him off of the van they notice a large bruise on the left side of his face and neck. When asked about the bruise, John is unable to tell the day program staff persons how he sustained the bruise.

What is the responsibility of the staff persons at the day program? Click the letter next to the correct answer.

- A** Call the adult foster care home, inform them of the bruise, and ask them to check it out when he returns in the evening.
- B** Assume that the adult foster care program knows about the bruise and that they are "handling" the situation.
- C** Report the unexplained bruise to the CEP (Common Entry Point). Also, have John evaluated by a nurse at the day program or a health care clinic in the community. Take pictures of the bruise.
- D** Do nothing since everyone gets a bruise once in awhile.

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### Test your knowledge

Let's try another example. Choose the correct response.

#### Meet Anna:

You go to your mother's house and she is visiting in the kitchen with a friend. Anna, your mom's friend, appears very fragile. She is very thin and uses a walker. You notice that she has bruises on the inside of her arm that appear to be the size of finger tips. When you ask her how she got those bruises she avoids the conversation. You know that her adult son comes home some weekends and you have heard Anna complain about his temper and alcohol consumption. You know that he is not staying with her now, but you're concerned that when he comes back she won't be safe.

What should you do? Click the letter next to the correct answer.

- A Call 911.
- B Call the Common Entry Point and make a report of suspected maltreatment.
- C Ask your mom to talk with Anna again to see if she will talk about the bruising.
- D Do nothing and assume that she can care for herself.

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*"B" is the correct answer*



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### Test your knowledge

Read the situation and answer the question below.

**Situation:**

A resident who has dementia and a history of aggressive behavior complains that the nursing assistant who put her to bed the night before slapped her.

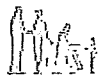
Is this incident reportable? Click the button next to the correct answer.

**Y** Yes, the incident should be reported.

**N** No, the incident does not need to be reported.

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"Y" is the correct answer



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## More definitions

We've covered some of the essential definitions, but we still have a ways to go.

### Neglect

Neglect means:

(a) The failure or omission by a caregiver to supply a vulnerable adult with care or services, including but not limited to, food, clothing, shelter, health care, or supervision which is:

- Reasonable and necessary to obtain or maintain the vulnerable adult's physical or mental health or safety, considering the physical and mental capacity or dysfunction of the vulnerable adult; and
- Not the result of an accident or therapeutic conduct

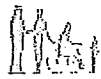
(b) The absence or likelihood of absence of care or services, including but not limited to, food, clothing, shelter, health care, or supervision necessary to maintain the physical and mental health of the vulnerable adult which a reasonable person would deem essential to obtain or maintain the vulnerable adult's health, safety, or comfort considering the physical or mental capacity or dysfunction of the vulnerable adult.



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### Test your knowledge

Let's look at a few more situations applying the definitions you've learned so far. Choose the correct response.

#### Meet Jane:

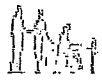
Jane is 30 years old and lives in an adult foster care facility. Jane is diagnosed with a traumatic brain injury and insulin dependent diabetes. An adult foster care staff person brings Jane to see her physician for a routine check-up. During the visit to her physician, Jane's blood sugar levels are noted to be very high. The physician asks Jane about the high blood sugar levels. Jane tells the physician that she ran out of insulin three days ago and that the person in charge of refilling her prescriptions at the facility said that they were "working on" getting her some more. The physician asks the staff person accompanying Jane about Jane not having any insulin, but the staff person has no knowledge.

Does this need to be reported and who is mandated to report? Click the button next to the correct answer.

- A** Yes, the incident needs to be reported to the Common Entry Point (CEP) by the staff person accompanying Jane to the appointment.
- B** Yes, the incident needs to be reported to the Common Entry Point (CEP) by the physician.
- C** No, the incident does not need to be reported. The physician will write a new prescription that the staff person can get filled on the way home.
- D** Both A and B.

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*answer is "D" is the correct answer*  
5/15/2015



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### Test your knowledge

Let's try another example. Read the situation and answer the question below.

#### Meet Marvel

Marvel is a 90 year old woman who is living alone since the death of her husband Bill, approximately one month ago. Bill had managed the finances, done the grocery shopping and maintained the yard. As her neighbor, you have noticed there has been no activity at the home in the past week. You have not seen Marvel in over a week and you are concerned that she may not have the ability to get to the grocery store. Marvel does not have a driver's license and her children live in other states. No one has picked up her mail and it is starting to pile up on her front step. Her yard has become overgrown and her plants have died.

Do you make a report of suspected maltreatment? Click the button next to the correct answer.

Yes, the situation should be reported to the CEP.

No, the situation does not need to be reported to the CEP.

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*Y is the correct answer*



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## Test your knowledge

Let's try another example. Read the situation and answer the question below.

### Incident:

A resident's care plan indicates that the resident is not to be left unsupervised on the side of the bed because of her poor sitting balance. The resident is left sitting on the side of the bed while the nursing assistant left the room quickly to get a clean towel and washcloth. The resident falls and sustains a fracture of her humerus.

Is this incident reportable? Click the button next to the correct answer.

**Y** Yes, the incident should be reported to the CEP.

**N** No, the incident does not need to be reported to the CEP.

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*Handwritten note:* "Y" is the correct answer



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## Financial exploitation

Financial exploitation means:

(a) In breach of a fiduciary obligation recognized else where in law, including pertinent regulations, contractual obligations, documented consent by a competent person, or the obligations of a responsible party (MS 144.6501, subdivision 1d), a person:

- (1) Engages in unauthorized expenditure of funds entrusted to the actor by the vulnerable adult which results or is likely to result in detriment to the vulnerable adult; or
- (2) Fails to use the financial resources of the vulnerable adult to provide food, clothing, shelter, health care, therapeutic conduct or supervision for the vulnerable adult, and the failure results or is likely to result in detriment to the vulnerable adult.

(b) In the absence of legal authority a person:

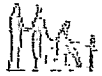
- (1) Willfully uses, withholds, or disposes of funds or property of a vulnerable adult
- (2) Obtains for the actor or another the performance of services by a third person for the wrongful profit or advantage of the actor or another to the detriment of the vulnerable adult
- (3) Acquires possession or control of, or an interest in, funds or property of a vulnerable adult through the use of undue influence, harassment, duress, deception, or fraud; or
- (4) Forces, compels, coerces, or entices a vulnerable adult against the vulnerable adult's will to perform services for the profit or advantage of another

(c) Nothing in this definition requires a facility or caregiver to provide financial management or supervise financial management for a vulnerable adult except as otherwise required by law.



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## Test your knowledge

Let's try another example. Read the situation and answer the question below.

### Meet Robert:

Robert is 18 years old and lives in an adult foster care home. Robert enjoys playing video games and owns all of the latest games. One evening while talking with a staff person named Jeff, Robert says that he sure wishes he could get his video golf game disk back from the staff person who works on the weekend. Jeff asks Robert some questions and Robert says that he "loaned" the game disk to a weekend staff person two weeks ago. Robert tells Jeff that he did not really want to loan the game to the weekend staff person and told him so, but the staff person took the game anyway and said he would return it in two weeks when he worked again. As they are talking, the weekend staff person comes into work, gives Robert his game disk, and tells Robert "thanks."

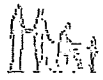
Should Jeff report this to the CEP? Click the button next to the correct answer.

**Y** Yes, the game disk is the property of Robert and the staff person "willfully withheld" the disk without legal authority.

**N** No, the weekend staff person was only borrowing the game disk and returned it.

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"N" is the correct answer



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### Test your knowledge

Read the situation and answer the question below.

#### Meet Joel:

Joel is a young man who is diagnosed with bipolar disorder. He attends an adult day program where he met a new friend, Jill. Jill also attends the same day program and is diagnosed with depression. You are the facilitator of a group session at the day program. After group, Joel tells you that Jill has been "borrowing" money from him and now he is not able to pay his rent. Joel stated when he asks Jill for his money back, she gets upset with him and calls him names. This is very upsetting to Joel because he likes Jill. You're not sure how much money Jill has borrowed, but you are concerned about Joel and his ability to say "no" to Jill the next time she asks for money. You are also concerned about Joel's inability to pay his rent and fear he may get evicted.

Do you call the Common Entry Point (CEP)? Click the button next to the correct answer.

- Yes, this situation should be reported to the CEP.
- No, this situation does not require that a report be filed with the CEP.

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*"Y" is the correct answer*



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### Test your knowledge

Let's try a final example. Read the situation and answer the question below.

**Incident:**

A resident's family member alleges that her mother's money has been stolen. According to the family member, she gave her mother, who is a resident of the facility, \$50 one week ago so that her mother would have money to get her hair done. However, the money is no longer in the drawer and her mother has not had her hair done.

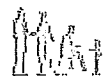
Is this incident reportable to the Common Entry Point (CEP)? Click the button next to the correct answer.

Yes, this situation should be reported to the CEP.

No, this situation does not require that a report be filed with the CEP.

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*Y is the correct answer*



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## Reporting maltreatment

A **REPORT** means a statement concerning all the circumstances known to the reporter at the time the statement is made surrounding the alleged or suspected maltreatment of a vulnerable adult.

It starts with a phone call:

A mandated reporter who has reason to believe that a vulnerable adult is being or has been maltreated, or who has knowledge that a vulnerable adult has sustained a physical injury which is not reasonably explained shall immediately (as soon as possible, but within 24 hours) make an oral report of the information to the Common Entry Point.

Note: Reports from individuals who are deaf, deaf blind or hard of hearing may come through a telecommunications device or through the Minnesota Relay Service and will be considered oral reports.

DHS licensed facilities may complete and use the Mandated Reporting Policy for Vulnerable Adults form below so you have the exact information and contact persons at your fingertips.

[Mandated Reporting Policy for Vulnerable Adults Form PDF](#)

## Information needed

Information that will be helpful to have on hand when making a report includes:

- Name, age and address of the vulnerable adult
- Your name and contact information (are you calling on the behalf of a facility or personally making the complaint)
- Brief description of the situation and the vulnerable adult
- Any evidence of previous maltreatment
- Location of the incident and any other information that you believe might be helpful in investigating the suspected maltreatment
- Current injuries, medical problems, or behavioral problems
- Names of relatives or concerned parties in or outside the home
- Name and address of alleged perpetrator
- Explain how you know about the situation, your relationship to the vulnerable adult

## Boarding Care Homes, Nursing Homes & Hospital Swing Beds

Effective August 1, 2009 an exception to oral reporting to the CEP is granted to the following Providers: A boarding care home that is licensed under sections MS 144.50 to 144.58 and certified under Title 19 of the Social Security Act, a nursing home that is licensed under section



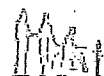
MS 144A.02 and certified under Title 18 or Title 19 of the Social Security Act, or a hospital that is licensed under sections MS 144.50 to 144.58 and has swing beds certified under Code of Federal Regulations, title 42, section 482.66. For these providers the report may be a duplicate of the initial report the facility submits electronically to the commissioner of health to comply with the reporting requirements under Code of Federal Regulations, title 42, section 483.13.



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## Contacting law enforcement

Mandated reporters may also make a report to law enforcement if they suspect a vulnerable adult has been sexually or physically assaulted, or if they have reasonable cause to believe that an act has caused fear of imminent harm.

### When a report is NOT required to the Common Entry Point (CEP)

A report is not required for any of the following events:

(a) A circumstance where federal law specifically prohibits a person from disclosing patient identifying information in connection with a report of suspected maltreatment, unless the vulnerable adult, or the vulnerable adult's guardian, conservator, or legal representative, has consented to disclose in a manner which conforms to federal requirements.

*Note: Facilities whose patients or residents are covered by such a federal law shall seek consent to the disclosure of suspected maltreatment from each patient or resident, or a guardian, conservator, or legal representative, upon the patient's or resident's admission to the facility. Persons who are prohibited by federal law from reporting an incident of suspected maltreatment shall immediately seek consent to make a report.*

(b) Verbal or physical aggression occurring between patients, residents, or clients of a facility, or self-abusive behavior by these persons does not constitute abuse unless the behavior causes serious harm. The operator of the facility or a designee shall record incidents of aggressions and self-abusive behavior to facilitate review by licensing agencies and county and local welfare agencies.

(c) Accident as defined in MS 626.5572, subd. 3, which mean a sudden, unforeseen, and unexpected occurrence or event which:

(1) is not likely to occur and which could not have been prevented by exercise of due care; and

(2) if occurring while a vulnerable adult is receiving services from a facility, happens when the facility and the employee or person providing services in the facility are in compliance with the laws and rules relevant to the occurrence or event.

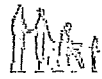
(d) Events occurring in a facility that result from an individual's error in the provision of therapeutic conduct as provided in MS 626.5572, subd. 17, paragraph (c), clause (4).

(e) Nothing in this section shall be construed to require a report of financial exploitation, as defined in MS 626.5572, subd. 9, solely on the basis of the transfer of money or property by gift or as compensation for services rendered.



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## Reporting maltreatment in a Minnesota Department of Health (MDH) licensed facility

All facilities licensed by the Minnesota Department of Health (MDH) are to report in accordance with the requirements in MS 626.557. In addition, any federally certified Skilled Nursing Facilities/Nursing Facilities (SNFs/NFs), Skilled Nursing Facilities (SNFs), Nursing Facilities (NFs), and hospitals with swing beds, have additional reporting requirements imposed by federal law.



### MDH Special Instructions

The federal regulations require that incidents of the following nature be reported to MDH within 24 hours of discovery: abuse, neglect, mistreatment, misappropriation of resident property, and injuries of unknown origin.

Reports of these incidents must be made to MDH via electronic notification. Specific instructions for how the reports are to be made are contained in MDH Information Bulletin 08-04 "Required Electronic Notification to MDH Via the Web for Reporting Incidents Within 24 Hours of the Incident's Discovery, as required at 42 CFR 483.13c(2) and for timely submission of the facility's investigative reports as required at 42 CFR 483.13 c(4)."

Facilities report to MDH via a secure web site. Each facility has received from MDH a user identification number, password, and instructions for filing an initial report and investigative report via the electronic system.

When the initial report related to the incident is made, a tracking number will automatically be assigned to the incident and the facility will receive a message, including the incident tracking number, confirming receipt of the report. Print this confirmation and retain it in your incident reporting files.

A mandated reporter must also submit a report to the Common Entry Point (CEP) to make an oral report of the incident, if reportable under the VAA. Effective August 1, 2009 an exception to oral reporting to the CEP is granted to the following Providers: A boarding care home that is licensed under sections MS 144.50 to 144.58 and certified under Title 19 of the Social Security Act, a nursing home that is licensed under section MS 144A.02 and certified under Title 18 or Title 19 of the Social Security Act, or a hospital that is licensed under sections MS 144.50 to 144.58 and has swing beds certified under Code of Federal Regulations, title 42, section 482.66. For these providers the report may be a duplicate of the initial report the facility submits electronically to the commissioner of health to comply with the reporting requirements under Code of Federal Regulations, title 42, section 483.13.

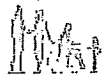
While this may initially appear as a duplication of effort, it is required by State law and the CEP has the added responsibility to forward the report to law enforcement if there is a suspected crime and to assess for the need of emergency protective services.

To see a detailed comparison of Federal and State requirements and definitions, click the link below:

[Comparison of Federal and State Requirements/Definitions PDF](#)

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## Reporting maltreatment in a Department of Human Services (DHS) licensed facility

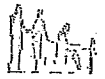
Facilities and services licensed under the Human Services Licensing Act MS 245A are required to have policies and procedures related to reporting suspected or alleged maltreatment (MS 245A.65 and MS 626.557, subdivision 4a).

The policies must include an internal reporting procedure, which allows an individual to report directly to the Common Entry Point (CEP) in addition to, or in lieu of, reporting to the facility designated reporter.

If you are a mandated reporter in a DHS licensed program and make an internal report to the facility designated reporter, you have met your mandated reporting responsibilities. It is the facility's responsibility to determine whether your information will be reported to the CEP, and if so, make the report. The facility must also respond to you in writing within two working days regarding whether a report was made to the CEP. This written notice must be provided in a manner that protects your confidentiality as a reporter.

A facility may not prohibit a mandated reporter from reporting externally and a facility is prohibited from retaliating against a mandated reporter who reports an incident to the CEP in good faith.

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## Confidentiality for mandated reporters

As a reporter, your identity is considered confidential and may not be disclosed.

**EXCEPTION:** The subject of the report may compel disclosure of the name of the reporter only with the consent of the reporter or upon a written finding by a court that the report was false and there is evidence that the report was made in bad faith. This subdivision does not alter disclosure responsibilities or obligations under the Rules of Criminal Procedure, except that where the identity of the reporter is relevant to a criminal prosecution, the district court shall do an in-camera review prior to determining whether to order disclosure of the identity of the reporter.

## Immunity

A person (including any form of a business or legal entity) who makes a good faith report is immune from any civil or criminal liability that might otherwise result from making the report, or from participating in the investigation, or for failure to comply fully with the reporting obligation under section 609.234 or 626.557, subd. 7 (MS 626.557 subd. 5(a)).

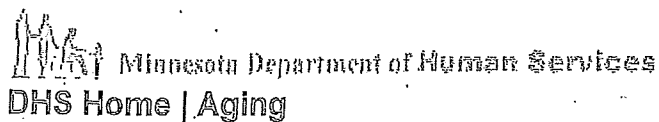
## Failure to report

A mandated reporter who negligently or intentionally fails to report is liable for damages caused by the failure. Nothing in MS 626.557 subd. 7 imposes vicarious liability for the acts or omissions of others. Additionally, an individual may be disqualified from providing direct contact services for failing to make a required report (MS 245C.15, subd. 4(b)). Facilities that fail to make mandated reports may be subject to a fine.

## False reports

A person or facility that intentionally makes a false report under the provisions of this section shall be liable in a civil suit for any actual damages suffered by the reported facility, person or persons and for punitive damages up to \$10,000 and attorney's fees (MS 626.557 subd. 6).

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### **Maltreatment investigations**

The maltreatment report is distributed from the Common Entry Point (CEP) to the lead investigative agency within two business days of receipt of the report. If there is any reason to believe that a crime has been committed, law enforcement shall initiate a response immediately.

The mandated reporter may request an initial disposition of the CEP report from the lead investigative agency. The agency will provide this information within five business days of receipt of the report, provided that the notification will not endanger the vulnerable adult or hamper the investigation.

### **Conducting maltreatment investigations**

There are three agencies that can take the lead in conducting the maltreatment investigation. MS 626.5572, Subd. 13 defines the **LEAD INVESTIGATIVE AGENCY** as:

The primary administrative agency responsible for investigating reports made under section MS 626.557.

- (a) The Department of Health is the lead investigative agency for the facilities which are licensed or are required to be licensed as hospitals, home care providers, nursing homes, residential care homes, or boarding care homes.
- (b) The Department of Human Services is the lead investigative agency for the programs licensed or required to be licensed as adult day care, adult foster care, programs for people with developmental disabilities, mental health programs or chemical health programs.
- (c) The county social service agency or its designee is the lead investigative agency for all other reports, including reports involving vulnerable adults receiving services from an unlicensed personal care provider organization under section MS 256.0659 (Laws of Minnesota, 2009, Chapter 79, Effective July 1, 2009).

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### Primary and Secondary Person or Position to Ensure Internal Reviews are Completed

The internal review will be completed by Rachelle Pariseau (name or position).  
If this individual is involved in the alleged or suspected maltreatment, Cari Leagfeld  
(name or position) will be responsible for completing the internal review.

### Documentation of the Internal Review

The facility must document completion of the internal review and provide documentation of the review to the commissioner upon the commissioner's request.

### Corrective Action Plan

Based on the results of the internal review, the license holder must develop, document, and implement a corrective action plan designed to correct current lapses and prevent future lapses in performance by individuals or the license holder, if any.

### Staff Training

The license holder shall ensure that each new mandated reporter receives an orientation within 72 hours of first providing direct contact services to a vulnerable adult and annually thereafter. The orientation and annual review shall inform the mandated reporters of the reporting requirements and definitions specified under Minnesota Statutes, sections 626.557 and 626.5572, the requirements of Minnesota Statutes, section 245A.65, the license holder's program abuse prevention plan, and all internal policies and procedures related to the prevention and reporting of maltreatment of individuals receiving services.

The license holder must document the provision of this training, monitor implementation by staff, and ensure that the policy is readily accessible to staff, as specified under Minnesota Statutes, section 245A.04, subdivision 14.

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

## MALTREATMENT OF VULNERABLE ADULTS REPORTING POLICY FOR DHS LICENSED PROGRAMS

As a mandated reporter, if you know or suspect that a vulnerable adult has been maltreated, you must report it immediately (within 24 hours).

### Where to Report

- You can report to the Common Entry Point at 651-554-6000 (phone number).
- Or, you can report internally to (name or position) Rachelle Pariseau. If the individual listed above is involved in the alleged or suspected maltreatment, you must report to Karen Lee (name or position).

### Internal Report

- When an internal report is received, Rachelle Pariseau (name or position) is responsible for deciding if the report must be forwarded to the Common Entry Point. If that person is involved in the suspected maltreatment, Karen Lee (name or position) will assume responsibility for deciding if the report must be forwarded to the Common Entry Point. The report must be forwarded within 24 hours.
- If you have reported internally, you will receive, within two working days, a written notice that tells you whether or not your report has been forwarded to the Common Entry Point. The notice will be given to you in a manner that protects your identity. It will inform you that, if you are not satisfied with the facility's decision on whether or not to report externally, you may still make the external report to the Common Entry Point yourself. It will also inform you that you are protected against any retaliation if you decide to make a good faith report to the Common Entry Point.

### Internal Review

When the facility has reason to know that an internal or external report of alleged or suspected maltreatment has been made, the facility must complete an internal review and take corrective action, if necessary, to protect the health and safety of vulnerable adults. The internal review must include an evaluation of whether:

- (i) related policies and procedures were followed;
- (ii) the policies and procedures were adequate;
- (iii) there is a need for additional staff training;
- (iv) the reported event is similar to past events with the vulnerable adults or the services involved; and
- (v) there is a need for corrective action by the license holder to protect the health and safety of vulnerable adults.