

**STATE OF CONNECTICUT  
DEPARTMENT OF DEVELOPMENTAL SERVICES**

**Procedure No:** I.F. PR. 004

**Subject: Abuse and Neglect/Investigation:**

Recommendations and  
Prevention Activities

**Section:** Human Rights and Legal Responsibilities

**Issue Date:** August 14, 2009

**Effective Date:** August 14, 2009

**Approved:** /s/ Peter H. O'Meara

**A. Purpose**

The purpose of this procedure is to develop a standard, consistent approach for the implementation of Policy I.F.PO.001, Abuse and Neglect, associated with recommendations made as an outcome of an investigation, and abuse and neglect prevention activities.

**B. Applicability**

This procedure is applicable to individuals with mental retardation and service providers subject to Connecticut General Statutes related to the abuse and neglect reporting and investigation systems in the state of Connecticut.

**C. Definitions**

Refer to Definitions in Abuse and Neglect Policy No. I.F.PO.001.

**D. Implementation**

**1. Recommendation Development**

a. At the completion of an investigation, recommendations are made to remediate any issues identified as a result of the findings contained in the investigation report.

b. Recommendations primarily address investigation results related to individual, administrative, programmatic, or case management issues.

c. For investigations completed by a Qualified Provider pool investigator, draft recommendations can be made by any or all employees in the following positions:

- i. Qualified Provider pool investigator;
- ii. Qualified Provider Executive Director;
- iii. DDS A/N Liaison;
- iv. DDS Private Sector ARD;
- v. DDS Regional Director or Designee.

d. For investigations completed by a DDS Lead Investigator, Lead Special Investigator or DDS pool investigator, draft recommendations can be made by any or all employees in the following positions:

- i. DDS pool investigator;
- ii. DDS A/N Liaison;
- iii. DDS Public Sector ARD;
- iv. DDS Regional Director or Designee.

e. Recommendations are finalized and accepted by the DDS Regional Director or Designee and returned to the A/N Liaison.

i. The A/N Liaison will close the investigation in eCAMRIS as related to the DDS.

## 2. Recommendation Tracking and Verification of Implementation

a. The A/N Liaison ensures that all finalized recommendations are entered into the statewide abuse and neglect data base.

b. The A/N Liaison sends a letter or email containing finalized recommendations to the Qualified Provider Administrator or the applicable DDS ARD or Designee requesting a written response to the recommendations within 30 days. Copies of the recommendations are sent by the A/N Liaison to:

i. the Regional Quality Coordinator;

ii. the DDS Resource Manager, as applicable;

iii. the Supervisor of Case Management for action and follow up by the Case Manager.

c. If the Qualified Provider Administrator or applicable DDS ARD or Designee does not forward written responses to the recommendations within 30 days, the A/N Liaison will:

i. notify the appropriate Resource Manager for follow up with the Qualified Provider Administrator; or

ii. follow up with the appropriate DDS staff in cases of recommendations/responses falling under the purview of the DDS.

d. The Regional Quality Monitor will verify that the actions outlined by the provider have been implemented during their regularly scheduled visit.

e. As applicable, if there are additional recommendations contained in the OPA M-5, the above process is repeated.

f. For Individual/Family Home

i. When the A/N Liaison receives the final report from the investigating agency, the findings and recommendations will be provided to the assigned Case Manager, the applicable Supervisor of Case Management, and the DDS ARD responsible for oversight of the program.

ii. The Supervisor of Case Management and the DDS ARD overseeing the program will have access to the completed investigation report. The Supervisor will inform the Case Manager if the allegation was or was not substantiated. If substantiated, the Case Manager will be informed of the findings and recommendations.

## 3. Protective Service Plans

a. Upon completion of any investigation which falls under the jurisdiction of OPA, OPA may request Protective Services. The components of the DDS OPA Interagency Agreement of June 2008 related to *Protective Service Plan* will be followed.

- i. If an OPA PSP is electronically posted to the wrong DDS region, the A/N Liaison will forward it to the correct region and inform OPA upon discovery.
- ii. The A/N Liaison will notify the appropriate DDS ARD, Supervisor of Case Management, and Case Manager of the completion of the investigation and the protective service request.
  - (a) The A/N Liaison will notify the Dental Coordinator if the protective service request contains a dental component.
- iii. The Case Manager will develop a written plan to address the request for protective services and submit it to the A/N Liaison within 15 calendar days of receipt of the request.
  - (a) The A/N Liaison will forward the plan to the OPA investigator assigned to the case within 15 calendar days from the receipt of the request.
  - (b) If the plan is determined incomplete or unacceptable by OPA, the A/N Liaison will notify the DDS ARD and the Supervisor of Case Management, request a revised plan be developed, and forward the revised plan to the OPA investigator as soon as possible.
- iv. The A/N Liaison will enter the date of request and the date the protective service plan was written into eCAMRIS.
- v. DDS shall review each case, including meeting with the individual to whom protective services are being provided at least once every six months, to determine whether continuation or modification of the plan is warranted.
  - (a) The A/N Liaison shall forward the written status update of the plan completed by the Case Manager to OPA every six months.
- vii. Upon the written request from DDS, OPA may terminate a protective service plan. OPA shall respond in writing to the A/N Liaison's written request to terminate the protective service plan within 15 calendar days of receipt of such request.

#### 4. Recommendations contained in OPA AID Death Investigation Reports

- a. Upon the posting of an OPA AID Death Investigation Report on the secure network, a representative from the DDS Division of Legal and Government Affairs will forward the report to the appropriate DDS central and regional office representatives.
- b. The DDS Regional Director or Designee from the region in which the death of the individual occurred will share the investigation report with pertinent staff, and will coordinate and facilitate the development of the responses to recommendations, as applicable, with appropriate DDS and Qualified Provider staff.
- c. The responsible Regional Director or Designee will forward a formal written response to recommendations contained in the Death Investigation Report to OPA AID within 30 days of the receipt of the report.
- d. The Regional Director or Designee from the region in which the death occurred will coordinate the verification of the implementation of responses.

## 5. Abuse and Neglect Prevention Activities

- a. All Qualified Providers shall undertake activities to prevent occurrences of abuse and neglect. The Qualified Provider shall identify individuals whom they support who are at greater risk for abuse and neglect and develop plans for prevention.
- b. Qualified Providers will provide annual training to all staff (mandated reporters) in the recognition of, prevention of, and obligation to report abuse and neglect.
- c. The department shall review abuse and neglect data on a regular basis to identify trends, systemic deficiencies and the presence of dangerous conditions or practices contributing to suspected or substantiated abuse and neglect. The Commissioner or designee will direct that appropriate action be taken on the basis of such analyses, as well as responding to requests for Immediate Protective Services.

## **E. References**

DDS Policy No. I.F. PO. 001: Abuse and Neglect  
DDS Procedure No. I.P. 001: Abuse and Neglect/Allegations: Reporting and Intake Processes  
DDS Procedure No. I.P. 002: Abuse and Neglect/Notification: Allegations and Completed Investigations to Appropriate Parties  
DDS Procedure No. I.P. 003: Abuse and Neglect/Investigation: Assignment, Tracking, Review, Completion

### CT General Statutes

CGS Section 46a-11a – 11h: “Protection and Advocacy for Persons with Disabilities”  
CGS Section 53-20: “Crimes”  
CGS Section 53a-59a, 53a-60b, 53a-60c, 53a-61a, 53a-65 et seq.: “Penal Code”  
CGS Section 17a-101 et seq.: “Abuse of Children”  
CGS Section 17a-210 et seq.: “Department and Commissioner of Mental Retardation”  
CGS Section 17a-238: “Rights of Persons under Supervision of Commissioner of Mental Retardation”  
CGS Section 17a-247a – 247e: Statutes Governing the “DDS” Abuse/Neglect Registry  
CGS 17b-451: “Protective Services for the Elderly”

### Rules, Regulations

#### Regs. Conn. Agencies

DDS, Sections 17a-247e-1 through 17a-247e-9, “DDS” Abuse and Neglect Registry

### Rules, Regulations and Policy – External

#### Federal Registry

42 C.F.R. 442.1 through 442.119 – ICF/MR Regulations

## **F. Attachments**

See attachments in I.F.PO.001, Abuse and Neglect