

Tool:

Abuse Prevention Policy and Procedure Checklist



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Tool: Abuse Prevention Policy and Procedure Checklist

483.12: Freedom from abuse, neglect and exploitation

The resident has the right to be free from abuse, neglect, misappropriation of resident property, and exploitation, including freedom from corporal punishment, involuntary seclusion and any physical or chemical restraint not required to treat the resident’s medical symptoms.

Purpose and Intent of 483.12

To develop a comprehensive Abuse Prevention Management and Reporting Program encompassing individual residents, facility resident population, resident representatives, facility staff, vendors and/or contractors as well as the facility environment.

To assure that the individual facility has followed all the required steps for the development and implementation of a comprehensive Abuse Prevention Management and Reporting Program in accordance with the new Requirements of Participation (RoP), the following checklist captures specific action items for successful completion. The far left column represents the actual Requirements of Participation (RoP) language and the right column indicates specific leadership strategies for successful completion and implementation of the revised RoP. When preparing updated policies and procedures, it is recommended to include actual RoP language as applicable. Please note that CMS has not issued its interpretative guidance for the new Requirements of Participation (RoP), therefore additional updates may be necessary once the guidance is released.

Suggested Checklist: Comprehensive Abuse Prevention Management and Reporting Program and Policy and Procedure

Regulation	Recommended Actions
<p>(a) The facility must-</p> <p>(1) Not use verbal, mental, sexual, or physical abuse, corporal punishment, or involuntary seclusion;</p>	<p><input type="checkbox"/> Review, revise and institute an Abuse Policy and Procedure in accordance with the new RoP. See regulatory requirements as well as template policy and procedure.</p> <p><input type="checkbox"/> Update all definitions and new terms: abuse, verbal abuse, sexual abuse, physical abuse, mental abuse, involuntary seclusion, exploitation, misappropriation, mistreatment, neglect, injuries of unknown origin, immediately, resident representative, covered individual, person-centered care.</p>

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Regulation	Recommended Actions
	<ul style="list-style-type: none"> <input type="checkbox"/> All Staff training on the revised Abuse Policy and Procedure. Update training for orientation, annual, agency staff, as needed. Provide training to staff on the freedom from abuse, neglect, and exploitation requirements. <input type="checkbox"/> Review, revise and conduct Resident and Resident Representative training on Abuse Policy and Procedure and Facility Grievance Procedure <input type="checkbox"/> Conduct updated training for Management Personnel on supervising and monitoring for abuse per the new RoP requirements as indicated. <input type="checkbox"/> Update Abuse Prevention Posters outlining definitions, reporting and requirements. Update postings in accordance to the Elder Justice Act.
<p>(2) Ensure that the resident is free from physical or chemical restraints imposed for purposes of discipline or convenience and that are not required to treat the resident’s medical symptoms. When the use of restraints is indicated, the facility must use the least restrictive alternative for the least amount of time and document ongoing re-evaluation of the need for restraints.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Review and update the Policy and Procedure for the use of Physical Restraints <input type="checkbox"/> Review the Restraint/Device Assessment and re-evaluation Form <input type="checkbox"/> Review and update the Policy and Procedure for the use of Psychotropic Medications/Chemical Restraints outlining use, alternatives and reduction plans <input type="checkbox"/> Policy on Gradual Dose Reductions for Psychotropic Medications/Chemical Restraints <input type="checkbox"/> Review and update Behavior Program policies and procedures
<p>(3) Not employ or otherwise engage individuals who-</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Proof of background checks for new employees prior to employment and ongoing verification for all existing employees

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Regulation	Recommended Actions
<p>(i) Have been found guilty of abuse, neglect, exploitation, misappropriation of property, or mistreatment by a court of law: (ii) Have a Finding entered into the State nurse aide registry concerning abuse, neglect, exploitation, mistreatment of residents or misappropriation of their property; or (iii) Have a disciplinary action in effect against his or her professional license by a state licensure body as a result of a finding of abuse, neglect, exploitation, mistreatment of residents or misappropriation of property</p>	<p><input type="checkbox"/> Policies and Procedures for Pre-Employment Screening (Background checks and verification of certification, licensure, etc.)</p> <p><input type="checkbox"/> Proof of verification with the State nurse aide registry with no findings of abuse, neglect, exploitation, mistreatment or misappropriation</p> <p><input type="checkbox"/> Proof of verification with the State Licensing Board of valid licensure with no disciplinary action in effect as a result of a finding of abuse, neglect, exploitation, mistreatment or misappropriation</p> <p><input type="checkbox"/> Proof of background checks for agency staff</p>
<p>(4) Report to the State nurse aide registry or licensing authorities any knowledge it has of actions by a court of law against an employee, which would indicate unfitness for service as a nurse aide or other facility staff.</p>	<p><input type="checkbox"/> Documentation on how facility will notify the State nurse aide registry or licensing authorities with any knowledge it has of actions by a court of law indicating unfitness for service as a nurse aide or licensed professional</p>
<p>(b) The facility must develop and implement written policies and procedures that: (1) Prohibit and prevent abuse, neglect, and exploitation of residents and misappropriation of resident property (2) Establish policies and procedures to investigate any such allegations, and (3) Include training as required (4) Establish coordination with the QAPI program (5) Ensure reporting of crimes occurring in federally-funded long-term care facilities in accordance with section 1150B of the Act. The policies and procedures must include but are not limited to: (i) Annually notifying covered individuals, as defined in section 1150B(a)(3) of the Act, of that individual’s obligation to comply with the following reporting requirements.</p>	<p><input type="checkbox"/> Abuse Policy and Procedure outlining all elements identified in 483.12(4)(b)</p> <p><input type="checkbox"/> Proof of resident assessment process to determine risk and/or vulnerability to include:</p> <ul style="list-style-type: none"> • Preadmission assessment • Vulnerability Assessment, including Wandering and Elopement • Behavior Assessment • Cognitive Assessment • Comprehensive dementia assessment <p><input type="checkbox"/> Resident to Resident Altercation/Abuse Policy and Procedure</p> <p><input type="checkbox"/> Documentation of education on facility comprehensive dementia program</p>

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Regulation	Recommended Actions
<p>(A) Each covered individual shall report to the State Agency and one or more law enforcement entities for the political subdivision in which the facility is located in any reasonable suspicion of a crime against any individual who is a resident of, or is receiving care from, the facility.</p> <p>(B) Each covered individual shall report immediately, but not later than 2 hours after forming the suspicion, if the events that cause the suspicion result in serious bodily injury, or not later than 24 hours if the events that cause the suspicion do not result in serious bodily injury.</p> <p>(ii) Posting a conspicuous notice of employee rights as defined at section 1150B(d)(3) of the Act.</p> <p>(iii) Prohibiting and preventing retaliation, as defined at section 1150B(d)(1) and (2) of the Act.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Update internal Resident One to One Policy and Procedure as applicable <input type="checkbox"/> Cross reference and update all internal Abuse Prevention policies to include the provisions of the Elder Justice Act Requirements and general maltreatment reporting requirements as well as state specific requirements for notification, reporting and response <input type="checkbox"/> Education with sign in sheets identifying proof of annual notification of covered individuals of their obligation to comply with reporting requirements <input type="checkbox"/> Documentation on how the facility verify reporting to the State Agency and local law enforcement of a reasonable suspicion of a crime in the required timeframes <input type="checkbox"/> Posting of notice of employee rights as defined at Section 1150B(d)(3) of the Act in a conspicuous place in the facility <input type="checkbox"/> Evidence of training for Facility Management, Front-Line Staff and Residents/Resident Representative on the prohibition and prevention of retaliation as defined at section 1150B(d)(1) and (2) of the Act. <input type="checkbox"/> Incorporate Resident Abuse Prevention into QAPI program. Update QAPI P&P to reflect changes and requirements as indicated in the RoP Phase 3 implementation requirements.

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Regulation	Recommended Actions
<p>(c) In response to allegations of abuse, neglect, exploitation, or mistreatment, the facility must:</p> <p>(1) Ensure that all alleged violations involving abuse, neglect, exploitation or mistreatment, including injuries of unknown source and misappropriation of resident property, are reported immediately, but no later than 2 hours after the allegation is made, if the events that cause the allegation involve abuse or result in serious bodily injury, or not later than 24 hours if the events that cause the allegation do not involve abuse and do not result in serious bodily injury, to the administrator of the facility and to other officials (including to the State Survey Agency and adult protective services where state law provides for jurisdiction in long-term care facilities) in accordance with State law through established procedures.</p> <p>(2) Have evidence that all alleged violations are thoroughly investigated.</p> <p>(3) Prevent further potential abuse, neglect, exploitation, or mistreatment while the investigation is in progress.</p> <p>(4) Report the results of all investigations to the administrator or his or her designated representative and to other officials in accordance with State law, including to the State Survey Agency, within 5 working days of the incident, and if the alleged violation is verified appropriate corrective action must be taken</p>	<p><input type="checkbox"/> Update Abuse Policy and Procedure to include updated reporting, investigation, and protection requirements per new RoP</p> <p><input type="checkbox"/> Education with sign in sheets identifying proof of annual notification of covered individuals of their obligation to comply with reporting requirements to include immediate notification of the facility Administrator and if suspicion of a crime resulting in serious bodily injury, reporting to the State Agency and Local Law Enforcement must occur no later than 2 hours after suspicion or allegation and if the allegation/suspicion of a crime does not result in serious bodily injury, a report to the State Agency and Local Law Enforcement agency must be completed no later than 24 hours.</p> <p><input type="checkbox"/> The facility must have evidence (documentation forms) of a thorough investigation including resident statements, witness statements, staff statements, environmental review, resident physical assessment, etc., including a timeline of events.</p> <p><input type="checkbox"/> The facility must have evidence that the resident(s) is protected during the investigation (i.e. documentation with time clock verification of employee clocking out and leaving the building)</p>

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Regulation	Recommended Actions
	<input type="checkbox"/> Documentation system to substantiate reporting of the results of the investigation to the administrator and other officials in accordance with State law and the State Survey Agency within working days <input type="checkbox"/> Documentation, including verification from employee personnel file, of corrective action taken as a result of the investigation

The below areas serves as a cross reference for facility leaders to conduct addition policy and procedure review across departments to incorporate the changes set forth in 483.12: Freedom from abuse, neglect and exploitation. This listing is not all encompassing however should serve as a resource for leaders as they update their internal policies, procedures and operational processes.

- Resident Rights
- CMS Definitions
- Employee Orientation
- Annual Training Requirements
- Quality Assurance and Performance Improvement
- Caregiver Background Checks
- Hiring Protocols
- Staff Training and Education
- Comprehensive Dementia Program
- Pre- Admission and Admission Policies
- Elopement Policy
- Incident Accident Policy and Procedure
- Behavior Management
- Physical Device and Chemical Restraint Policy and Procedure
- Problem Resolution/Grievance Process

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