A. Policy Statement

The Department of Developmental Services (DDS) does not tolerate abuse or neglect of individuals with intellectual disability.

Any employee of the department or a DDS Qualified Provider who observes the abuse or neglect of an individual shall intervene immediately on the individual’s behalf and shall immediately report the situation according to procedures established with this policy and all its associated procedures.

Staff members who report, in good faith, suspected incidents of abuse or neglect shall not be subjected to any penalty or reprisal by administrative or supervisory staff for that report.

DDS staff shall provide technical assistance regarding prevention and reporting of abuse and neglect to agencies providing services to individuals.

DDS shall review reported incidents of abuse and neglect to prevent conditions and practices that may cause abuse and neglect to occur. This review shall be conducted on a regular basis as established by state law and departmental procedures.

B. Applicability

This policy and its associated procedures are applicable to individuals with intellectual disability 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

The following definitions apply to this policy and all associated procedures.

Abuse: The willful infliction by a caregiver of physical pain or injury, or the willful deprivation of services necessary to the physical safety of an individual.

Abuse/Neglect (A/N) Liaison: In DDS, a position responsible to receive and track abuse and neglect allegations and investigations, and coordinate regional abuse and neglect activities as described in the following procedures.

Assault: The act of intentionally causing physical injury or harm.

Assistant Regional Director (ARD): In DDS, the position that oversees the operation of certain program types and is under the supervision of the Regional Director.
Caregiver: A person who has responsibility for the care of an individual with intellectual disability.

Case manager: The primary DDS contact for individuals who are eligible for DDS supports and services.

Completed investigation: The report of an investigation conducted by a DDS or Qualified Provider investigator which has been reviewed for quality and approved by the DDS Regional Director or Designee.

Dental coordinator: In DDS, a position within Health and Clinical Services responsible for assisting DDS staff in acquiring necessary dental services for individuals.

Department of Children and Families (DCF): The state agency that has jurisdiction over allegations of abuse and neglect for children under the age of 18. DCF is an agency authorized by Connecticut General Statutes to substantiate abuse or neglect for purposes of the DDS Abuse/Neglect Registry.

Department of Public Health (DPH): The state agency that has jurisdiction over the certification of medical facilities, ICFs/MR, and the licensure of medical practitioners.

Department of Social Services (DSS): The state agency that has jurisdiction over allegations of abuse and neglect for individuals age 60 and above. DSS is an agency authorized by Connecticut General Statutes to substantiate abuse or neglect for purposes of the DDS Abuse/Neglect Registry.

DDS Abuse/Neglect Registry: A registry, mandated by CGS 17a-247a to 17a-247e inclusive, administered and maintained by the DDS, which contains the names of employees who have been terminated or separated from employment as a result of substantiated abuse or neglect.

DDS Abuse/Neglect Registry Monitoring form: A form, completed by a DDS Lead Investigator, indicating completion of the statutory provision of monitoring a Qualified Provider Investigation Report for purposes of the DDS Abuse/Neglect Registry.

DDS Notification of Termination or Separation for Purposes of the Registry form: A form completed by a Qualified Provider or public agency staff person, or an individual who hires his or her own staff, notifying the DDS Division of Human Resources of an employee terminated or separated from employment as a result of substantiated abuse or neglect.

DDS Abuse/Neglect Investigation Review form: A form, completed by a DDS Lead Investigator, indicating involvement in, review of, and agreement with a Qualified Provider Investigation Report.

DDS Division of Investigations (DOI): A division within the DDS comprised of experienced investigators who are involved in and responsible for overseeing investigation processes.

DDS Intake Form: A form completed by the Regional Abuse/Neglect Liaison which documents any allegation for which there is no intake form from the agency having jurisdiction.
DDS Internal Audit Unit: A unit within the DDS that conducts financial compliance audits of the department’s regional and central office operations and of service providers.

DDS Investigation Report Form: A standard format utilized by DDS and Qualified Provider investigators when completing an investigation.

DDS Lead Investigator: Investigator positions assigned to the DOI responsible for conducting investigations and/or monitoring investigations completed by both DDS and Qualified Provider pool investigators.

DDS Lead Special Investigator: Investigator positions assigned to the DOI responsible for conducting investigations.

DDS OPA Interagency Agreement: An agreement that governs activities related to abuse and neglect allegations, investigation assignment, completion and outcomes for individuals between the ages of 18 and 59.

eCAMRIS: The DDS automated internal data system containing information regarding individuals who are clients of DDS.

False Claims Act: A federal law that prohibits individuals or companies from making false claims or statements to a program funded by the federal government.

False Claims Act Report form: A form utilized to report allegations of violations of the False Claims Act, or under CGS Section 4-33a, Misuse of State Funds.

Financial exploitation: The theft or misappropriation of property and/or monetary resources, which are intended to be used for or by an individual.

Frequent reporting protocol: A proposal, written by the DDS and approved by the OPA that operates to interrupt the normal reporting provisions for a specific individual already known to both agencies.

Immediate Protective Service Plan (IPSP): An immediate plan, requested by the Office of Protection and Advocacy (OPA) that DDS take immediate actions or measures necessary to protect the health and safety of an individual with intellectual disability, who may or may not be known to the department.

Individual plan (IP): A plan based on the department’s mission and guiding principles, intended to incorporate all aspects of an individual’s life, such as significant past events, accomplishments and strengths, relationships, home life, work, day, retirement, or school, leisure and community life, health and wellness, and finances. An individual plan includes, but is not limited to, the following components: an assessment and profile of the individual’s current life situation and future vision; assessment and analysis of the individual’s abilities, preferences, and support needs; identification of desired outcomes; development of strategies and action plans to address needs, personal goals and desired outcomes; identification of supports and services to be provided; and evaluation of the individual’s progress on an ongoing basis to assure that the individual’s needs and desired outcomes are being met.

Individual plan – Short form: Plans developed for individuals who live at home with their family, or in their own homes, and do not receive DDS funded residential supports or
ongoing HCBS Waiver supports, including individuals who pay directly for employment supports or day services.

**Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID):** A facility certified by the Department of Public Health (DPH) to provide active treatment services to individuals in residence.

**Neglect:** The failure by a caregiver, through action or inaction, to provide an individual with the services necessary to maintain his or her physical and mental health and safety, including incidents of inappropriate or unwanted individual to individual sexual contact. Neglect is also a situation in which an individual lives alone and that individual is not able to provide the services that are necessary to maintain his or her physical health, mental health, and/or safety.

**Office of Protection and Advocacy for Persons with Disabilities (OPA):** The state agency which has jurisdiction over all allegations of and investigations into abuse and neglect of individuals who have intellectual disability between the ages of 18 to 59 years old, and for individuals placed in psychiatric facilities. OPA also has jurisdiction over death investigations for which abuse or neglect is alleged as contributing to the individual’s death, and is an agency authorized by Connecticut General Statutes to substantiate abuse or neglect for purposes of the DDS Abuse/Neglect Registry.

**OPA Abuse Investigation Division (AID):** The division within the OPA responsible for conducting or monitoring all abuse and neglect investigations.

**OPA “Do Not Take” (DNT):** A decision made by OPA AID indicating that an allegation does not fall under the statutory jurisdiction of OPA.

**OPA intake referral:** A document generated by OPA which records and details the specific nature of the allegation of suspected abuse or neglect, as reported, indicates whether further investigation is warranted, and notes assignment of a primary investigating agency.

**OPA M-5:** The form that indicates the completion of the OPA investigation monitoring process, and documents agreement or disagreement with the findings of an investigation.

**Planning and support team (PST):** A group of persons that includes the individual, his or her family/guardian/advocate, as applicable, friends, people who support the individual in each of the service areas and any other person whose participation is relevant. The planning and support team assists the individual to develop, implement, and evaluate his or her individual plan and to obtain, manage, evaluate and adjust supports as needed.

**Pool investigator:** An employee of DDS or a DDS Qualified Provider trained by DDS and assigned to investigate allegations of abuse or neglect.

**Programmatic neglect:** Failure to provide oversight in developing or implementing an individual’s program, and/or ensuring staff training which ensures an individual’s well-being and safety.

**Protective service plan (PSP):** A plan developed at the completion of the OPA investigation or monitoring process to address recommendations contained in, or added to, an investigation report. The plan is developed by the case manager and contains provisions to protect the
safety and wellbeing of the individual. The written plan is completed and forwarded to OPA within 15 business days of the request, is updated every six months, and can only be terminated by OPA upon written request by DDS.

Psychological abuse: Acts that inflict emotional harm, invoke fear and/or humiliate, intimidate, degrade, demean or otherwise negatively impact the mental health or safety of an individual.

Qualified provider administrator: In a non-DDS organization, appointee of the governing body to act in its behalf in the overall management of the agency.

Qualified provider: Agencies or individuals funded, licensed, certified or approved by DDS to provide waiver services. For individuals or families who self-direct, a Qualified Provider employee may be hired by the individual or family to provide supports and services to the individual. In such cases, the Qualified Provider is the employer of record.

Redactions: Edits made to a DDS or Qualified Provider investigation report in order that pertinent findings may be disclosed to a requesting party (guardian, Qualified Provider, state agency) without compromising the investigative process or disclosing other confidential information.

Sexual abuse: Any sexual contact or encouragement of sexual activity between a family member, paid staff or a volunteer and an individual, regardless of consent.

Self-direction: Circumstances in which an individual or family chooses the manner by which supports and services are provided. This can include the individual or family being an employer, and directly hiring and managing staff. Also see definitions of “Qualified Provider” and “Support Broker.”

Sexual contact: Fondling of the breasts, genital area, abdomen, inner thighs or buttocks, masturbation or sexual intercourse.

Sexual intercourse: Vaginal intercourse, anal intercourse, fellatio or cunnilingus between persons regardless of sex. Penetration, however slight, is sufficient to be considered vaginal intercourse, anal intercourse or fellatio and does not require emission of semen. Penetration may be committed by an object manipulated into the genital or anal opening of the individual’s body.

Support broker: For individuals or families who directly hire their own employees and are the employer of record, a case management position that assists in employer-related activities. Broker services can be obtained from a DDS Support Broker, or the individual can purchase the services from an Independent Support Broker.

Verbal abuse: The use of offensive and/or intimidating language that can provoke or upset an individual.

Willful: Intentional acts or omissions or the reckless disregard for the safety and consequences of one’s acts or omissions.

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

Regulations of Connecticut State Agencies
Sections 17a-247e-1 through 17a-247e-9, inclusive, “DDS” Abuse and Neglect Registry

Federal Registry
42 C.F.R. 442.1 through 442.119 – ICF/IID Regulations

E. I.F. PO.001 Attachments:

I.F. PO.001 Attachment A DDS and OPA Interagency Agreement of June 2008
I.F. PO.001 Attachment B DDS Investigation Report Form
I.F. PO.001 Attachment C DDS Abuse/Neglect Investigation Review Form
I.F. PO.001 Attachment D DDS Abuse Neglect Registry: Monitoring Printable Form
I.F. PO.001 Attachment E DDS Abuse Neglect Registry: Monitoring Template Format
I.F. PO.001 Attachment F Notification of Termination or Separation for Registry Purposes Printable Form
I.F. PO.001 Attachment G DDS Abuse/Neglect Registry: Notification of Termination or Separation Template Format Under revision, please use I.F.P0.001 Attachment F
I.F. PO.001 Attachment H DDS Intake Printable Form
I.F. PO.001 Attachment I DDS Intake Template Format
I.F. PO.001 Attachment J DDS False Claims Act/Misuse of State Funds Report Form
I.F. PO.001 Attachment K OPA Sample Intake Referral
I.F. PO.001 Attachment L OPA Sample M-5
I.F. PO.001 Attachment M DDS and OPA Frequent Reporting Protocol