

To: Mandatory Reporters for Residents of Nursing Homes  
Long Term Care Facilities

From: Dorian Long  
Program Administration Manager, Social Work Services

Date: September 24, 2015

Re: Review of Procedures and Mandated Reporting Form (W-410)

This memo is to update procedures and requirements regarding Connecticut General Statutes Sec.'s 17b-407 through 17b-408, which requires that suspected abuse, neglect, exploitation or abandonment of a resident in a long-term care facility be reported to the Commissioner of the Department of Social Services (effective 7/1/99).

The statute requires any mandatory reporter who has reasonable cause to suspect or believe that a long-term care resident has been abused, neglected, exploited or abandoned, report this information, or cause a report to be made, to the Social Work Division of the Department of Social Services within 72 hours of the incident. The following are definitions from the Connecticut State Statutes, Sec. 17b-450 that pertain to this reporting requirement:

Mandatory Reporters include "...Any physician or surgeon licensed under the provisions of chapter 370, any resident physician or intern in any hospital in this state, whether or not so licensed, and any registered nurse, licensed practical nurse, medical examiner, dentist, optometrist, chiropractor, podiatrist, social worker, clergyman, police officer, pharmacist, physical therapist, long-term care facility administrator, nurse's aide or orderly in a long-term care facility, any person paid for caring for a patient in a long-term care facility, any staff person employed by a long-term care facility and any person who is a sexual assault counselor or a domestic violence counselor ."

Abuse "...includes, but is not limited to, the willful infliction of physical pain, injury or mental anguish, or the willful deprivation by a caregiver of services which are necessary to maintain physical or mental health."

Neglect" refers to the failure or inability of an elderly person to provide for himself or herself the services which are necessary to maintain physical and mental health or the failure to provide or arrange for provision of such necessary services by a caregiver."

Exploitation "...refers to the act or process of taking advantage of an elderly person by another person or caregiver whether for monetary, personal, or other benefit, gain or profit."

Abandonment "...refers to the desertion or willful forsaking of an elderly person by a caregiver or foregoing of duties or the withdrawal or neglect of duties and obligations owed an elderly person by a caregiver or other person."

We receive numerous reports of resident-to-resident altercations. Incidents between residents need only be reported when the facility has made a determination that the resident who is the alleged "abuser" has

the capability to take such action “intentionally, knowingly or recklessly” or, in the case of neglect, a person is acting with “criminal negligence,” as described in the CGS Penal Code Sec. 53a-3 Definitions:

A person acts “intentionally” with respect to a result or to conduct described by a statute defining an offense when his (her) conscious objective is to cause such result or to engage in such conduct.

A person acts “knowingly” with respect to conduct or to a circumstance described by a statute defining an offense when he (she) is aware that his conduct is of such nature or that such circumstance exists.

A person acts “recklessly” with respect to a result or to a circumstance described by a statute defining an offense when he (she) is aware of and consciously disregards a substantial and unjustifiable risk that such result will occur or that such circumstance exists. The risk must be of such nature and degree that disregarding it constitutes a gross deviation from the standard of conduct that a reasonable person would observe in the situation.

A person acts with “criminal negligence” with respect to or as a result of failing to perceive a substantial and unjustifiable risk that could occur. The risk must be of such nature and degree that the failure to perceive it constitutes a gross deviation from the standard of care that a reasonable person would observe in the situation.

Incidents meeting this legal standard, as a potential crime, must be reported to the police.

The determination of a resident’s capability to form intent should be made consistent with normal assessments of a resident’s condition and capabilities. Incidents among residents, which do not constitute abuse, should be addressed through facility assessment and care planning and incident reports to the State of Connecticut Department of Public Health as required by federal and state law.

As a reminder, the Office of the Long Term Care Ombudsman should continue to receive complaints directly from residents, family members or others acting on behalf of the resident. If a resident complains of “rough handling,” the facility is to ensure that resident is aware of the advocacy services provided by the Ombudsman. The facility should assist the resident in accessing the services of the Ombudsman.

Reports should be filed using the W-410 (Mandated Reporter Form) that is attached. This memo in no way impacts your reporting obligations to the Connecticut Department of Public Health.

If you have questions regarding the content of this memo, please call the Social Work Division at 1-888-385-4225. As a reminder, the fax number to send reports to is 860-424-5091. Telephone reports are not acceptable. Thank you.

Attachment

cc: Connecticut Department of Public Health

State LTC Ombudsman

**MANDATED REPORTER FORM FOR LONG TERM CARE FACILITIES**

**Resident in Need of Protection Being Referred**

Last Name:	First Name:	M.I.:
Date of Birth: ____/____/____	S.S. #: ____/____/____	Age:

**Long Term Care Facility**

Name of Long Term Care Facility: \_\_\_\_\_  
 Facility Address: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 Telephone: (        ) \_\_\_\_\_ Fax: (        ) \_\_\_\_\_

Report of Suspected:  
 \_\_\_\_\_ Abuse        \_\_\_\_\_ Neglect        \_\_\_\_\_ Exploitation        \_\_\_\_\_ Abandonment  
 Date of incident (if known): \_\_\_\_\_  
 Relationship of the alleged perpetrator to the resident (i.e. family, facility staff, other resident, etc.): \_\_\_\_\_  
 \_\_\_\_\_

Who Has Been Notified/Involved?:  
 \_\_\_\_\_ CT Department of Social Services    \_\_\_\_\_ CT Department of Public Health    \_\_\_\_\_ State or Local Police

If this is a resident/family complaint, have you offered to contact the office of the Long Term Care Ombudsman program on their behalf?        \_\_\_\_\_ Yes        \_\_\_\_\_ No

Please provide information regarding the nature and extent of the situation and any other details which might be helpful in investigating the case and protecting the resident.  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Investigation pending and summary to follow.        \_\_\_\_\_ Yes        \_\_\_\_\_ No

Referral/Reporter Information:  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Telephone: (        ) \_\_\_\_\_ Fax: (        ) \_\_\_\_\_  
 Relationship to the Resident: \_\_\_\_\_ Date of Report: \_\_\_\_\_  
 Does the Reporter Wish to be:        \_\_\_\_\_ Anonymous        \_\_\_\_\_ Identified

**Note: Incidents between residents need only be reported when the facility has determined that the resident has the capability to act intentionally, knowingly or recklessly, in accordance with definitions contained in Penal Code 531.3.**

**TELEPHONE REPORTS ARE NOT ACCEPTABLE**