College of Direct Support

Maltreatment Laws Worksheet

As a direct support professional (DSP) it is important to know the local laws and definitions of maltreatment specific to your professional role. As you progress through the course on Maltreatment Prevention and Response in the College of Direct Support you can fill in the following information. This information will help you fulfill your legal roles related to maltreatment. You should complete all this information and have it reviewed by a supervisor or instructor.

Complete this worksheet based on laws and policies for your role as a DSP and as required by your employer. For example, if you work in elder care you may not need to review definitions of maltreatment to children.

For a list of State related Statues Regarding Child Maltreatment you may go to the following site and search your state:

http://www.childwelfare.gov/systemwide/laws_policies/state/

For a resource on conducting a search of your local adult protection laws and contacts for reporting you can go to the following Websites:

http://www.americanbar.org/groups/law aging/resources/elder abuse.html At this site you can download the document called *Information About Laws Related to Elder Abuse*.

http://www.ncea.aoa.gov/resources/index.aspx

At this site you can click on your state to learn more.

Directions: Fill in all of the sections of the worksheet. Helpful resources may include your employer's policies and procedures. It may also include local laws and state statutes for maltreatment. Ask for help from your employer or your state or county health and human service offices if you are unsure where to find the answers.

1. In m	ny state/region Yes □	and my services area a DSP is a man	dated reporter.
a.	What penaltion	es does a DSP face for not reporting?	

b. What protections does a DSP have for "good faith" reporting?

c. What consequences are possible for false, reckless or malicious reportir	ng?
2. Are the people I support covered by maltreatment laws? (Select one) Yes □ No □	
3. In my state/local community the definition of maltreatment is: (Write down including recognized types of maltreatment in your area. Examples include phy emotional abuse, neglect, financial exploitation, and sexual exploitation.)	
4. For each form of maltreatment you listed above list the type and give 2 exam of maltreatment. For example, if a form of abuse is exploitation place the word then give two different examples of exploitation. This might include asking som for to buy you gifts which is financial exploitation. Another example would be t a person you care for while he or she is undressed for personal use. This would exploitation.	"exploitation" neone you care aking pictures of
There may be more types in your local definitions than space provided. If so, us paper or the back of this sheet. There may also be less. Most regions define abe exploitation as distinct forms of maltreatment. Remember, these may be differ adult protection and child protection.	use, neglect, and
Form 1(type)	(example) (example)
Form 2(type)	(example) (example)
Form 3(type)	(example) (example)

Form 4	(type)	
	(type)	
maltreatment in yWhen to rHow to re	important details of the process you would tour state/region. Include: eport (timelines). port (verbal, written) to whom to report and in what order.	ake to report suspected
6. Regional contac	ts: (Only complete sections that apply to you	r employment as a DSP.)
•	/agent designated by your employer to whor al maltreatment. (if one is designated).	m you are asked to internally
Name:		
Position:		
Phone:		
Email:		
Eave		
I ax		

as required.)	
List the specific entity outside of your employer that local laws indicate report maltreatment must be made. (This would refer to protective services.)	s of suspected
For Adults:	
Name:	
Position:	
Phone:	
Email:	
Fax:	
Address:	
How soon after the incident would you need to report to this agency?	
Is contact with this organization required by DSP or is internal reporting all acceptable?	one
For Children: (You can write "same" if it is the same as adults.)	
Name:	
Position:	
Phone:	
Email:	
Fax:	
Address:	

Give two examples of when you would report to an outside the agency first. (Voluntarily or

How soon after the incident would you need to report to this agency?

Is contact with this organization required by DSP or is internal reporting alone acceptable?	
Local law enforcement contact: (Call 911 in emergencies if it is available in you	ır region.)
Name:	
Position:	
Phone:	
Email:	
Fax:	
Address:	
and give two examples. 8. Are you required to report incidents of harm or suspected maltreatment to the Ombudsmen's office? (This is for protection of people in long-term care facilities. For information go to http://www.ltcombudsman.org/about-ombudsmen) Yes □ No □	more
If yes, please list the closest regional office of your State's Ombudsman progra	ım:
Name:	
Position:	
Phone:	
Email:	
Fax:	
Address:	

Describe which types of incidents you would be required to report to the Ombudsman and give two examples.

How soon after the incident would you need to report to this agency?	
Will every incident reportable to this office also be considered maltreatmentate? Why or why not?	ent in your
9. Are the people you support eligible for services through your State's Protect Advocacy and Disability Rights Office? (Go to http://www.napas.org/ for more Yes \(\square\$ No \(\square\$ \)	
Name:	_
Position:	<u>-</u>
Phone:	<u>-</u>
Email:	<u>.</u>
Fax:	-
Address:	<u>-</u>

Describe which types of incidents the local protection and advocacy or disability rights office would handle (when would you engage them and why) and give two examples.

Is there anything else you should know about maltreatment definitions and reporting specific to your state? If so, list it here.
Please review this form with a supervisor or trainer to ensure completeness and accuracy.
Please review this form with a supervisor or trainer to ensure completeness and accuracy. Keep a copy for your records and review as needed.