

# **VULNERABLE ADULTS**

## **Minnesota Sex Offender Program**

Issue Date: 8/4/15      Effective Date: 9/1/15      Policy Number: 210-5058

**POLICY:** All employees, agents, or persons providing services in the program (including, but not limited to, contractors, consultants and volunteers) are mandated reporters and must report any suspected abuse, neglect or financial exploitation they have reason to believe has occurred.

The Minnesota Sex Offender Program (MSOP) maintains a program abuse prevention plan and develops an individual abuse prevention plan for each client identified as a vulnerable adult. The MSOP has a procedure for internal and external reporting and review of vulnerable adult maltreatment allegations.

The MSOP ensures vulnerable adult assessments are completed as outlined in this policy.

**AUTHORITY:** Minn. Stat. chap. §245A.65 (License Holder Requirements Governing Maltreatment of Vulnerable Adults)  
Minn. Stat. chap. §626.557 (Reporting of Maltreatment of Vulnerable Adults)  
Minn. Stat. chap. §626.5572 (Definitions for the Vulnerable Adult Act)

**APPLICABILITY:** Minnesota Sex Offender Program (MSOP), program-wide

**PURPOSE:** To provide procedures for identifying and managing vulnerable adults, reporting suspected maltreatment of vulnerable adults, and internally reviewing maltreatment allegations.

### **DEFINITIONS:**

Abuse – defined in Minn. Stat. §626.5572 subd. 2.

Accident – defined in Minn. Stat. §626.5572 subd. 3.

Caregiver – defined in Minn. Stat. §626.5572 subd. 4.

Common Entry Point – defined in Minn. Stat. §626.5572 subd. 5. (The statewide number for the Minnesota Adult Abuse Reporting Center (MAARC) is 1-844-880-1574.

Financial Exploitation – defined in Minn. Stat. §626.5572 subd. 9.

Immediately – defined in Minn. Stat. §626.5572 subd. 10.

Internal Reporter – defined in Minn. Stat. §245A.65 subd. 1(a)(2). The MSOP primary internal reporter is the facility clinical director. The MSOP secondary internal reporter is the facility Health Services charge nurse.

Internal Reviewer – defined in Minn. Stat. §245A.65 subd. 1(b)(2). The MSOP primary internal reviewer is the assistant facility director or designee. The MSOP secondary internal reviewer (involved if there is reason to believe the primary reviewer was involved in the alleged or suspected maltreatment) is the facility director.

Licensed Independent Mental Health Professional – defined in Minn. Stat. §245.462 subd. 18.

Maltreatment – defined in Minn. Stat. §626.5572 subd. 15.

Mandated Reporter – defined in Minn. Stat. §626.5572 subd. 16.

Neglect – defined in Minn. Stat. §626.5572 subd. 17.

Serious Harm – demonstrable injury to the vulnerable adult resulting in temporary or permanent impairment or loss of function of a limb, organ or other body part.

Therapeutic Conduct – defined in Minn. Stat. §626.5572 subd. 20.

Vulnerable adult – defined in Minn. Stat. §626.5572 subd. 21(4).

## **PROCEDURES:**

### **A. Identification of Vulnerable Adults**

#### **1. Initial Assessment**

A client is assessed to determine if he or she is a functionally vulnerable adult within 24 hours of admission or readmission to the MSOP.

a) A licensed independent mental health professional (or license-eligible mental health professional under the supervision of a licensed independent mental health professional) completes the Vulnerable Adult Assessment (210-5058a-3105, attached).

b) If a licensed independent mental health professional (or license-eligible mental health professional under the supervision of a licensed independent mental health professional) is not available at the time of admission, Health Services staff complete the assessment during the admission Nursing Assessment. A licensed independent mental health professional (or license-eligible mental health professional under the supervision of a licensed independent mental health professional) must review the assessment by the end of the next business day. The reviewer must clearly document in the client's record any resulting change to that assessment.

#### **2. Reassessment**

a) A client not previously identified as a functionally vulnerable adult is reassessed to determine if he or she is now a functionally vulnerable adult:

(1) if there has been sufficient change noted in the client's functioning; and

(2) within 24 hours of any incident involving suspected maltreatment and/or verbal or physical aggression occurring between clients causing serious harm or self-abusive behavior causing serious harm:

(a) reported to the Internal Reporter or to the county's Common Entry Point;  
or

(b) required to be reported if one or more of the adults involved in the incident had been vulnerable adults.

b) A client identified to be a functionally vulnerable adult may be reassessed to determine if he or she continues to meet the criteria for a vulnerable adult if there has been a change noted in the client's functioning or living environment.

#### **3. Reassessment Process Following an Incident**

- a) For incidents involving one or more clients, the officer of the day (OD) notifies a clinical supervisor or the RN charge nurse of the need to complete vulnerable adult assessments for any involved clients not previously identified as vulnerable adults.
- b) A licensed independent mental health professional (or license-eligible mental health professional under the supervision of a licensed independent mental health professional) completes the Vulnerable Adult Assessment.
- c) If a licensed independent mental health professional (or license-eligible mental health professional under the supervision of a licensed independent mental health professional) is not available at the time of the incident being reported to staff, licensed Health Services staff completes the assessment. A licensed independent mental health professional (or license-eligible mental health professional under the supervision of a licensed independent mental health professional) must review the assessment by the end of the next business day and complete a new Vulnerable Adult Assessment if there is any resulting change to that assessment.
- d) If it is determined one or more of the clients is a vulnerable adult, a report is made to the Common Entry Point following Procedure E, below.

B. Program Abuse Prevention Plan

- 1. MSOP must establish and enforce an ongoing written Program Abuse Prevention Plan (210-5058h, attached). This plan must be reviewed at least annually using the assessment factors in the plan and any substantiated maltreatment findings occurring since the last review.
- 2. Client rights coordinators ensure a copy of the Program Abuse Prevention Plan is posted on each residential unit in the facility. It must also be available upon request to mandated reporters, persons receiving services and legal representatives.

C. Individual Abuse Prevention Plan (IAPP)

- 1. The client's primary therapist or clinical supervisor develops an Individual Abuse Prevention Plan (IAPP) for a client identified by MSOP as a vulnerable adult (see the Individual Abuse Prevention Plan (210-5058b-3020, attached)).
- 2. The IAPP must be completed as soon as possible, but no later than two business days after the client is identified as a vulnerable adult.
- 3. The IAPP contains:
  - a) an individualized assessment of:
    - (1) the client's need for protection from maltreatment in the areas of self-harm, physical abuse, sexual abuse, emotional abuse, and financial exploitation;
    - (2) the client's risk of maltreatment of others; and
    - (3) the risk the client might reasonably be expected to pose to visitors to the facility and persons outside the facility, if unsupervised;
  - b) staff responsibilities to minimize the risk of maltreatment to the client and other vulnerable adults as well as visitors; and

- c) input from the client to the fullest extent possible. The client's legal representative (guardian), as applicable, must also be given the opportunity to participate in the development of the plan.
- 4. When the assessment indicates the client does not need specific reduction measures in addition to those in the Program Abuse Prevention Plan, the primary therapist or clinical supervisor documents the determination in the IAPP.
- 5. The primary therapist or clinical supervisor reviews the IAPP immediately following any incident of actual or suspected maltreatment or change in the client's functioning and updates the IAPP as necessary.
- 6. The primary therapist initiates a review and evaluation of the plan at least quarterly as part of the treatment progress review, referencing the individual assessment and any reports of maltreatment relating to the client. The primary therapist documents the review in the Quarterly Treatment Progress Report (215-5007b-3030, Phoenix report) or the Annual Treatment Progress Report (215-5007c-3340, Phoenix report).
- 7. Staff members document any required monitoring of the identified vulnerable adult on the Observation Data Form (210-5058c-3511, attached).
- 8. When a client identified as a vulnerable adult is temporarily transferred from the MSOP to another health care facility, or to a detention facility, the IAPP is suspended. The IAPP is reviewed, updated as appropriate and reinstated upon the client's return to an MSOP facility. The client's primary therapist or clinical supervisor immediately reviews the IAPP and updates it as necessary.

D. Training of Mandated Reporters

- 1. All mandated reporters must receive initial training within 72 hours of first providing direct contact services to a vulnerable adult. Mandated reporters must receive annual training.
- 2. The initial and annual training must provide information about the reporting requirements, the definitions of maltreatment, the requirements of the program and individual abuse prevention plans, and all internal policies and procedures related to the prevention and reporting of maltreatment of individuals receiving services.

E. Reporting Suspected Maltreatment

- 1. Clients are asked to promptly report suspected maltreatment to any MSOP staff person. Clients may also choose to report directly to the Common Entry Point, as noted in the MSOP's maltreatment reporting options (210-5058j, attached) posted on each residential unit in the facility.
- 2. Any mandated reporter who witnesses, to whom a client reports, or who themselves are directly involved with any behavior which might be defined as maltreatment:
  - a) immediately intervenes and ensures the client's safety via any available resource or assistance required;
  - b) immediately reports the incident to the internal reporter and/or the Common Entry Point within 24 hours of initial knowledge of the incident:

- (1) Minnesota Adult Abuse Reporting Center (MAARC) at 1-844-880-1574 (available 24/7); or
    - (2) Online at [www.mn.gov/dhs/reportadultabuse](http://www.mn.gov/dhs/reportadultabuse) (mandated reporters only).
    - (3) The report must have sufficient information to identify the client, the person believed to be responsible for the suspected maltreatment (if known), the date and time of the incident (if known), and the nature and extent of maltreatment; and
  - c) completes a Level 1 Incident Report (see MSOP Division Policy 410-5300, "Incident Reports") when the suspected maltreatment of a client involves staff. An Incident Report is not considered a maltreatment report under this policy.
3. When reported internally:
- a) the internal reporter ensures the confidentiality of the mandated reporter is maintained;
  - b) the internal reporter assesses whether the reported behavior meets the criteria for reporting to the Common Entry Point;
    - (1) The internal reporter makes a report to the Common Entry Point if one or more of the clients involved in the incident have already been deemed a vulnerable adult.
    - (2) If the report relates to an incident reportable if one or more of the involved clients had been a vulnerable adult, but one or more of the clients involved in the incident has not been identified as a vulnerable adult, the internal reporter ensures a new Vulnerable Adult Assessment is immediately completed. If the assessment finds a client now meets the criteria for Vulnerable Adult status, the internal reporter reports the incident to the Common Entry Point.
    - (3) Reports to the Common Entry Point must be made within 24 hours of the time initial knowledge of the incident was received.
      - (a) Minnesota Adult Abuse Reporting Center (MAARC) at 1-844-880-1574 (available 24/7); or
      - (b) Online at [www.mn.gov/dhs/reportadultabuse](http://www.mn.gov/dhs/reportadultabuse) (mandated reporters only).
    - (4) The internal reporter completes the Internal Vulnerable Adult Report Form (210-5058i, attached) and forwards a copy to the MSOP Policy and Compliance Director.
  - c) if the internal reporter determines a report of suspected maltreatment does not meet the criteria for reporting to the Common Entry Point, the internal reporter documents the reason for the decision on the Internal Vulnerable Adult Report Form; and
  - d) within two days of receipt of the report, the internal reporter notifies the mandated reporter in writing whether or not the report was forwarded to the Common Entry Point, using the Notice of Status of Report of Suspected Maltreatment (210-5058d, attached). This written notification includes a statement the program may not prohibit the mandated reporter from choosing to report this or any other incident to an external agency and may not take retaliatory action against any mandated reporter who reports an incident to the

Common Entry Point in good faith. The internal reporter provides the written notification in a manner protecting the confidentiality of the report and reporter.

**F. Internal Review**

1. The internal reviewer ensures an Internal Review of Maltreatment Report (210-5058e, attached) is conducted in response to reports of observed or suspected maltreatment (and/or when the facility has reason to know an internal or external report of maltreatment has been made).
2. The internal reviewer ensures no staff member involved in the suspected maltreatment participates in the internal review.
3. Based on the results of this review, MSOP staff must develop, document, and implement a corrective action plan designed to correct any current lapses and prevent future lapses in performance by individuals or the program.

**G. Maintaining Documentation**

The MSOP Policy and Compliance Director ensures a record of all reports of maltreatment and internal reviews for reports of alleged maltreatment are maintained and are available to the Commissioner upon request. The documentation provided to the Commissioner may consist of a completed checklist verifying completion of each of the requirements of the internal review.

**H. Information for Clients and Legal Representatives**

All clients or legal representatives are informed of this policy and their rights under the Vulnerable Adult Act as part of their orientation to the facility.

1. Upon the client's arrival to the assigned residential unit, and within 24 hours of admission, unit staff provide the client with orientation regarding the Program Abuse Prevention Plan and maltreatment reporting options (see MSOP Policy 202.100, "Admission the MSOP").
2. This orientation may be completed within 72 hours of admission if documentation received by the Admissions Coordinator during the admissions process can support significant benefit to the client by a later orientation. The Admissions Coordinator notifies a client rights coordinator to provide this orientation to the client.
3. Reasonable modifications are made for clients with identified needs.
4. A client rights coordinator contacts the client's legal representative, as applicable, to provide this orientation.

- I. Client rights coordinators ensure MSOP's maltreatment reporting options (210-5058j, attached) are posted on each residential unit in the facility. These options are available upon request to mandated reporters, clients and the client's legal representative.

**REVIEW:** Annually

**REFERENCES:** MSOP Division Policy 410-5300, "Incident Reports"  
MSOP Policy 202.100, "Admission to the MSOP"

**ATTACHMENTS:** Vulnerable Adult Assessment (210-5058a-3015)  
Individual Abuse Prevention Plan (210-5058b-3020)  
Observation Data Form (210-5058c-3511)

Notice of Status of Report of Suspected Maltreatment (210-5058d)  
Internal Review of Maltreatment Report (210-5058e)  
Program Abuse Prevention Plan (210-5058h)  
Internal Vulnerable Adult Report Form (210-5058i)  
Options to Report Maltreatment of a Vulnerable Adult (210-5080j)  
Quarterly Treatment Progress Report (215-5007b-3030, Phoenix report)  
Annual Treatment Progress Report (215-5007c-3340, Phoenix report)

**SUPERSESSION:** MSOP Policy 202.058, “Vulnerable Adults,” 3/3/15.  
All facility policies, memos, or other communications whether verbal, written, or transmitted by electronic means regarding this topic.

/s/  
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Minnesota Sex Offender Program