

# Policy Transmittal Developmental Disabilities



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**Number:**  
**Issue date:**

**Topic:** Developmental Disabilities

**Due date:**

**Transmitting (check the box that best applies):**

- New policy   
  Policy change   
  Policy clarification   
  Executive letter  
 Administrative Rule   
  Manual update   
  Other:

**Applies to (check all that apply):**

- |   |   |
|---|---|
| <input type="checkbox"/> All DHS employees                              | <input type="checkbox"/> County Mental Health Directors   |
| <input type="checkbox"/> Area Agencies on Aging: {Select type}          | <input type="checkbox"/> Health Services  |
| <input type="checkbox"/> Aging and People with Disabilities             | <input type="checkbox"/> Office of Developmental Disabilities Services (ODDS)   |
| <input type="checkbox"/> Self Sufficiency Programs                      | <input type="checkbox"/> ODDS Children’s Intensive In Home Services   |
| <input checked="" type="checkbox"/> County DD program managers          | <input checked="" type="checkbox"/> Stabilization and Crisis Unit (SACU)  |
| <input checked="" type="checkbox"/> Support Service Brokerage Directors | <input checked="" type="checkbox"/> Other (please specify): Adult Abuse Investigators-DD, Office of Training, Investigations and Safety (OTIS). |
| <input type="checkbox"/> ODDS Children’s Residential Services           |   |
| <input type="checkbox"/> Child Welfare Programs                         |   |

<b>Policy/rule title:</b>	Policy Guidance to Community Developmental Disabilities Programs (CDDP) and OTIS staff responsible for completing intake screening activities associated with reports of alleged abuse as required by ORS 430.731.		
<b>Policy/rule number(s):</b>	N/A	<b>Release number:</b>	N/A
<b>Effective date:</b>	February 15, 2022	<b>Expiration date:</b>	N/A
<b>References:</b>	Chapter 430 — Mental and Behavioral Health Treatment; Developmental Disabilities		
<b>Web address:</b>	N/A		

## **Discussion/interpretation:**

The Oregon Department of Human Service, Office of Developmental Disabilities Services (ODDS) and the Office of Training, Investigation and Safety (OTIS) are providing policy guidance to Community Developmental Disabilities Programs (CDDP) and OTIS staff responsible for completing intake screening activities associated with reports of alleged abuse as required in ORS 430.731.

This policy defines intake and screening activities related to reports of alleged abuse and provides direction to ensure consistent and comprehensive documentation statewide. The consistent and comprehensive documentation supports increased safety of vulnerable individuals, opportunities for intervention and prevention, tracking of intake information, measuring associated workload, and clearly documenting outcomes of intakes.

## **Implementation/transition instructions:**

### **Definitions**

#### **Intake**

The process of documenting information received where the reporter perceives alleged abuse or neglect of an individual, they believe is vulnerable; a reporter's request for services to address a concern of health or safety of an individual they believe is vulnerable; or a report of concern involving a provider.

Consistent documentation of intake information allows for the initiation of protective services, identification of patterns of concern that may point to underlying issues, and/or the seamless transfer of a reporter's concerns to referring agencies.

#### **Screening**

Screening is completed by an Adult Abuse Investigator (AI) and is the assessment of a reported concern. Screening involves the process of gathering information about an alleged incident or concern where the health or safety of a vulnerable individual may be at risk.

Upon evaluation of the screening information an Adult Abuse Investigator must make a screening decision that determines if there is reasonable cause to believe the statutory definition of abuse applies to the allegation presented. If a statutory definition of abuse can be applied the intake should be assigned for investigation. Screening activities may also result in decisions concerning protective services, recommended actions and reporting of licensing concerns.

## **Intake/Screening Process**

The intake/screening process will be completed by a trained Adult Abuse Investigator

(AI). Complaints of alleged abuse are received through numerous means (phone, incident reports, letters, licensing, case management reports, etc.) and are reported by individual who may not be familiar with statutory definitions of abuse. It is important for those taking and/or reviewing reported information to understand a reporter may not clearly identify their concern as abuse. The AI receiving and/or reviewing the intake report must measure the information against the statutory definitions of abuse to determine if there is a reasonable cause to believe an allegation of abuse may be present.

The intake process begins when the reporter of information has a perceived concern for the health or safety of an individual, referred to as an alleged victim (AV). The perceived concern is based on the perception of the person reporting the concern. If information is being provided through a third party, the perception of the person providing the original information needs to be considered.

If there is no perceived concern for the health or safe of an individual AIs will follow local protocol for documenting non screening activities. These concerns or requests generally involve the request for information, questions concerning eligibility, contact information, and other general questions.

When an individual reporting information has a perceived concern for the health or safety of an AV, the intake/screening process will be initiated and will be documented in the Centralized Abuse Management system (CAM). The AI is responsible for gathering information from the reporter and identifying additional collateral contacts and/or documentation needed to make an assessment if there is reasonable cause to believe there is an allegation of abuse. The intake/screening process will flow through a decision tree outlined in the attached CDDP Intake/Screening Flow document. An intake/screening will be classified as either “No Abuse Concern” or “Abuse Concern”. Through gathered information the AI must assess if the reporter perceives the AV is experiencing abuse or neglect, resulting in the health or safety concerns.

The first step of any intake is to assess the need for immediate protective services and ensure they have been offered. If the report involves possible criminal behavior the AI must confirm information is reported to law enforcement either by making the report or confirming through law enforcement the report has been made by another individual.

**Below is the process for completing “No Abuse Concern” and “Abuse Concern” intakes.**

### **No Abuse Concern**

1. The reporter perceives a health or safety concern for an AV but does not perceive abuse or neglect, and the AI has no reasonable cause to believe there is the potential of abuse or neglect based on information gathered.

2. Initiate and complete an intake in CAM.
  - a. Identify the intake type as “No Abuse Concern”.
  - b. Complete the Intake Report Information providing a comprehensive summary of the concern reported. This summary must include:
    - i. When and how the information was received
    - ii. Who made the report and how the reporter received the information if they are a third-party reporter
    - iii. A comprehensive summary of events and the perceived concern of the person providing the information. The summary will include at a minimum:
      - Identification of the perceived health and safety concern
      - Who was involved
      - Any observed injury/harm
      - Any other pertinent information that supports the reporters perceived concern
  - c. Complete a Screening Decision Detail that at a minimum comprehensively summarizes:
    - i. Information received and reviewed
    - ii. How no perceived abuse or neglect was determined
    - iii. Any provider concerns identified
    - iv. Any recommendations provided to the reporter or others
  - d. Document any offered protective services, recommended actions, or referrals to other programs for services/support (i.e., Aging and People with Disabilities, Community Mental Health, Child Welfare, etc.).
  - e. Document any persons contacted or notified as part of this intake.
3. Report any provider concerns to the licensing entity for review. Health and safety concerns may not rise to abuse or neglect but can involve a certification or licensing compliance issue. Documenting provider concerns also assist in identifying potential deficiencies or patterns of behaviors within a provider setting. Early identification allows for intervention at the earliest point and increases the opportunity to prevent more serious concerns.
4. If the AV is confirmed as a non-DD client in CAM, check the AV’s last name as

unknown and record the first name in the name field. The AV's full name will be recorded in the "Alias" name field. This associates the person to the intake and allows other CAM users to appropriately search for the person record using the full name.

### **Abuse Concern**

1. The reporter reports a health or safety concern for the AV and perceives abuse or neglect of the AV is involved.
2. Identify if the AV meets the definition of an adult defined in ORS 430.375. If the AV does not meet the definition of an adult an "Abuse Concern" intake is still completed. The AV will be entered following guidelines provided in number 4 above under the "No Abuse Concern".
3. Report any provider concerns to the licensing entity for review. Health and safety concerns may not rise to abuse or neglect but can involve a certification or licensing compliance issue. Documenting provider concerns also assist in identifying potential deficiencies or patterns of behaviors within a provider setting. Early identification allows for intervention at the earliest point and increases the opportunity to prevent more serious concerns.
4. Complete an intake in CAM.
  - a. Identify the intake type as "Abuse Concern".
  - b. Complete a comprehensive summary of the concern reported. This summary must include:
    - i. When and how the information was received.
    - ii. Who made the report and how they received the information if they are a third-party reporter.
    - iii. A comprehensive summary of events and the perceived concern of the original reporter. The summary will include at a minimum:
      - Identification of the perceived concern and the allegation of abuse or neglect being made
      - Who was involved
      - Any observed injury/harm
      - Any other pertinent information that supports the reporter's perceived concern
  - c. Complete a Screening Decision Detail that at a minimum comprehensively

summarizes:

- i. The perceived concern of abuse of neglect
  - ii. Summary of the information received and reviewed
  - iii. Analysis of how the information gathered does or does not support a reasonable cause to believe the reported information meets a definition of abuse
  - iv. Any provider concerns identified
  - v. Summary of immediate protective services offered
  - d. Record any protective services provided or offered.
  - e. Record any recommended.
  - f. Document any persons contacted or notified as part of this intake.
5. Below is a matrix for Allegation Screening Decisions and Reason for Closing Allegations.

<b>Eligible DD Client</b>	<b>Other Program Eligible</b>	<b>Reasonable Cause to Believe</b>	<b>Allegation Screening Decision</b>	<b>Reason for Closing Allegation</b>
No	Yes	Yes	Closed at Intake	Information and Referral
No	No	Yes/No	Closed at Intake	Not Eligible for Program Services
Yes	NA	NA	Closed at Intake	Does Not Meet Definition of Abuse
Yes	Yes	Yes	Assign for Investigation	NA

6. If the Abuse Concern intake involves a non-DD client that is potentially eligible under other program services, ensure intake information is thoroughly documented, notify the eligible program of the intake, and provide CAM intake number. A representative from the other program may be added as an “Investigation Team Member” if requested by the program. This will allow the other program to access the DD intake in CAM. The referral to other program services must be documented in the Screening Detail and entered as a referral.

**Training/communication plan:**

This policy will be reviewed at the CDDP Adult Investigator quarterly meeting scheduled in April 2022. OTIS Abuse Investigation Coordinators (AIC) and OTIS

Investigations managers will be available for consultation with abuse investigators. Detailed training sessions will be offered after the policy becomes effective. These trainings will include FAQs and other quick reference guide documents.

**Local/branch action required:**

Managers and AICs will notify abuse investigators of the new policy expectations. AICs and OTIS managers will conduct random reviews of screenings to ensure the policy is being implemented effectively. AICs and managers will provide coaching to abuse investigators as needed.

**Central office action required:**

OTIS will create training material and assist in facilitating training for adult abuse investigators. OTIS will ensure that FAQs and reference materials are kept up to date per this policy.

**Communication:**

This transmittal will be discussed during the next Monthly Transmittal Review. Please send questions in advance to [ODDS.Questions@dhsosha.state.or.us](mailto:ODDS.Questions@dhsosha.state.or.us).

The Monthly Transmittal Review is held the second Wednesday of every month at 2 pm using the Zoom platform. Please register in advance for these meetings:

<https://www.zoomgov.com/meeting/register/vJlsc-qvqD8iGURx5OQk8TAdIS6Arg9ZAf4>

After registering, you will receive a confirmation email containing an appointment and information about joining the meeting. American Sign Language (ASL) and live captioning will be provided. To request other accommodations or languages, please send an email to [ODDS.Questions@dhsosha.state.or.us](mailto:ODDS.Questions@dhsosha.state.or.us) at least three business days prior to the meeting.

**Field/stakeholder review:**  Yes  No

**If yes, reviewed by:** Engagement and Innovation Website and OTIS  
Investigations Advisory Group

**Filing instructions:** <https://www.oregon.gov/dhs/SENIORS-DISABILITIES/DD/Pages/Transmittals.aspx>

*If you have any questions about this policy, contact:*

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