

Lilia Teninty

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Number: APD-AR-16-083

Issue date: 12/9/2016

Topic: Developmental Disabilities

Due date:

Subject: Notification to the Department of persons accused of abuse, when the person is either a DHS employee or volunteer, or an independent provider.

Applies to (check all that apply):

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| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input type="checkbox"/> Area Agencies on Aging | <input type="checkbox"/> Health Services |
| <input type="checkbox"/> Aging and People with Disabilities | <input type="checkbox"/> Office of Developmental |
| <input type="checkbox"/> Self Sufficiency Programs | Disabilities Services(ODDS) |
| <input checked="" type="checkbox"/> County DD Program Managers | <input type="checkbox"/> ODDS Children's Intensive |
| <input type="checkbox"/> ODDS Children's | In Home Services |
| <input type="checkbox"/> Residential Services | <input type="checkbox"/> Stabilization and Crisis Unit (SACU) |
| <input type="checkbox"/> Child Welfare Programs | <input checked="" type="checkbox"/> Other (<i>please specify</i>): OAAPI abuse |
| | investigators and CDDP abuse |
| | investigation specialists. |

Action required:

Relating to investigations conducted under OAR 407-045-0250 through 407-045-0360, abuse of individuals with developmental disability (DD). Abuse investigators conducting interviews of persons accused are already required to ask if a person is an Oregon Department of Human Services (DHS) employee or volunteer ([DHS SDS 0292](#)).

Additionally, it is now required for abuse investigators to ask if the accused person is an Independent Provider (Personal Support Worker {PSW} or non-PSW independent provider).

The incident under abuse investigation need not be related to the DHS employment or service agreement for the Independent Provider. The investigator will document the responses of the person asked both questions in the investigation report.

The CDDP or OAAPI abuse investigator will complete the following actions in response to an affirmative response:

- a) The investigator shall ask the person for contact information for the case manager and the case management entity that oversees the service agreement involving the independent provider.
- b) The investigator shall notify ODDS of the allegations being investigated via a secure email to: ODDS.ProviderActionRecommendation@state.or.us.
- c) The investigator shall contact the case manager or case management entity.
- d) Case management entities must notify ODDS within five (5) days of being notified that an Independent Provider is under investigation for abuse per the process outlined in the Action Request Transmittal [APD-AR16-060](#) and the "Independent Provider Terminations and Inactivation Worker Guide." The investigator will follow the process outlined in [APD-IM-16-068](#) through completion of the investigation, approved for closure by OAAPI.

Reason for action:

Oregon Administrative Rule (OAR) 407-007-0420 requires all DHS employees and volunteers identified as person accused of abuse in an opened investigation to notify the DHS Office of Human Resources within five (5) days of receiving a letter outlining their obligation.

The Department is including the expectation that the investigator identify if the person accused of abuse is also an independent provider or PSW.

Related Oregon Administrative Rules:

[Abuse Check Rules for Department Employees and Volunteers](#)

[Abuse Reporting and Protective Services in Community Programs and Community Facilities for Adults with DD](#)

[Independent Providers Delivering DD Services](#)

Field/stakeholder review: Yes No

If yes, reviewed by: CDDP policy group

If you have any questions about this action request, contact:

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