

DEVELOPMENTAL DISABILITIES ADMINISTRATION  
Olympia, Washington

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TITLE: PROTECTION FROM ABUSE: MANDATORY REPORTING POLICY 5.13

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Authority: [42 C.F.R. 483.420](#) *Condition of participation: Client protections*  
[Chapter 9A.16 RCW](#) *Defenses*  
[Chapter 11.130 RCW](#) *Uniform Guardianship, Conservatorship, and Other Protective Arrangements Act*  
[Chapter 18.20 RCW](#) *Assisted Living Facilities*  
[Chapter 18.51 RCW](#) *Nursing Homes*  
[Chapter 18.130 RCW](#) *Regulation of Health Professions—Uniform Disciplinary Act*  
[Chapter 26.44 RCW](#) *Abuse of Children*  
[Chapter 70.124 RCW](#) *Abuse of Patients*  
[Chapter 70.127 RCW](#) *In-Home Services Agencies*  
[Chapter 70.128 RCW](#) *Adult Family Homes*  
[Chapter 70.129 RCW](#) *Long-Term Care Resident Rights*  
[Chapter 71A.12 RCW](#) *State Services*  
[Chapter 71A.20 RCW](#) *Residential Habilitation Centers*  
[Chapter 72.36 RCW](#) *Soldiers' and Veterans' Homes and Veterans' Cemetery*  
[Chapter 74.34 RCW](#) *Abuse of Vulnerable Adults*

References: [DSHS Administrative Policy 8.02](#), *Client Abuse*  
[DSHS Administrative Policy 9.01](#), *Incident Reporting*  
[DSHS Administrative Policy 18.89](#), *Investigations*  
[DDA Policy 12.01](#), *Incident Management and Reporting*

DSHS/Washington State Patrol Protocol  
DSHS/AAG Medicaid Fraud Control Unit Memorandum of Understanding

Resources: [How to Report Child Abuse and Neglect Information for Mandatory Reporters](#) (Vulnerable Adults)

## **BACKGROUND**

Several state laws require Department of Social and Health Services employees, volunteers, and contractors to report suspected abuse, neglect, exploitation, and abandonment of children and vulnerable adults:

- [Chapter 26.44 RCW](#) mandates the reporting of any suspected abuse or neglect of a child to either Department of Children, Youth and Families Child Protective Services or law enforcement.
- [Chapter 74.34 RCW](#) mandates that when there is reasonable cause to believe that abandonment, abuse, financial exploitation, or neglect of a vulnerable adult has occurred, mandated reporters shall immediately report to the department. When there is suspected sexual or physical assault of a vulnerable adult, or there is reasonable cause to believe that an act has caused fear of imminent harm it must be reported to DSHS and law enforcement.
- [RCW 70.124.030](#) mandates the reporting of suspected abuse or neglect of state hospital patients.
- Chapter [74.34 RCW](#) divides reporters into two types: mandated and permissive. Mandated reporters include all DSHS employees, service providers, law enforcement officers, social workers, and others (see the RCW 74.34 or [Definitions](#) section of this policy for complete description). Under state law, volunteers at a facility or program providing services to vulnerable adults fall into the permissive category.
- For a contractor, volunteer, intern, or work-study student to work in a regional Field Services office, Residential Habilitation Center, or a State-Operated Community Residential Program they must agree to follow mandatory reporting requirements.

## **PURPOSE**

This policy establishes the process the Developmental Disabilities Administration uses to prevent abuse and neglect and to protect, to the extent possible, the health, safety, and well-being of clients, and ensure that allegations involving abuse, neglect, exploitation, and abandonment of clients is reported.

## **SCOPE**

This policy applies to all DDA employees, contractors (except as identified below), volunteers, interns, and work-study students.

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Note: Contracted community residential service providers and state-operated community residential providers must follow the requirements of [DDA Policy 6.12](#), *Mandatory Reporting Requirements for Residential Providers*. County and county-contracted providers must follow the requirements of [DDA Policy 6.08](#), *Mandatory Reporting Requirements for County and County Contracted Providers*. These provider types do not fall under this policy.

## DEFINITIONS

See Attachment A for a complete list of definitions of terms used in this policy. Attachment B contains different types of abuse and neglect.

## POLICY

- A. Abuse and neglect of children and vulnerable adults is prohibited by law and will not be tolerated. All administration employees, contractors, volunteers, interns, and work-study students must report every incident of observed, reported, or suspected abuse, neglect, exploitation, and abandonment, as well as injuries of unknown origin.
- B. A mandated reporter does not have to witness or have proof that an incident occurred. As long as there is reasonable cause to believe that a child or a vulnerable adult has been abused or neglected, a mandated reporter must make a report.
- C. Failure to report can result in disciplinary action. Furthermore, failure to report is a gross misdemeanor under Washington State law ([RCW 74.34.053](#) and [RCW 26.44.080](#)). Any DDA employee, contractor, or volunteer found to have knowingly failed to report in their capacity as a mandated reporter will be reported to the appropriate law enforcement agency and may be prosecuted to the extent the law allows. In Washington State, the maximum punishment for a gross misdemeanor is 364 days in county jail or a fine of up to \$5,000.
- D. DDA does not tolerate harassment or retaliation toward any reporter who reports in good faith.
- E. A reporter who reports in good faith is immune from prosecution and protected from dismissal under [RCW 70.124.060](#).
- F. A false report made intentionally, maliciously, or in bad faith is a misdemeanor under [RCW 74.34.053](#) and [RCW 26.44.080](#). Any DDA employee, contractor, or volunteer found to have knowingly made a false report is reported to the appropriate law enforcement

agency and may be prosecuted to the extent the law allows. In Washington State, a misdemeanor maximum punishment is 90 days in jail and up to a \$1,000 fine.

- G. In accordance with [RCW 74.34.035](#), a facility or agency must not develop policies or procedures that interfere with mandatory reporting requirements.
- H. When a report is made to the DSHS APS Central Intake, the mandatory reporter has the right to remain anonymous, except as permitted by [RCW 74.34.035\(8\)](#) and [RCW 74.34.095\(1\)](#). The investigative agency will not release the reporter's name unless a name is required for reporting to, or coordinating with, other investigative entities, as required by judicial proceeding, or the reporter consents to disclosure.

## PROCEDURES

### A. What to Report

- 1. A mandated reporter must report allegations of abuse, neglect, exploitation and abandonment of vulnerable adults and children under Washington State Law [Chapter 74.34 RCW](#) and [Chapter 26.44 RCW](#).

Note: If there is reason to suspect that physical or sexual abuse has occurred, or there is reasonable cause to believe that an act has caused fear of imminent harm to a vulnerable adult, a mandated reporter must also immediately report the incident to the appropriate local law enforcement agency.

- 2. Under [RCW 74.34.035](#), a mandated reporter must also report any suspicious death of a vulnerable adult to the local coroner or medical examiner and local law enforcement. To determine the local coroner or medical examiner for a specific county, visit the [Member Directory](#) on the Washington Association of County Officials website.
- 3. A mandated reporter must report injuries to a client that are of unknown origin and raise suspicion of possible abuse or neglect, to the appropriate reporting department. When determining whether to report an injury of unknown origin, the reporter must consider the following:
  - a. The extent of the injury;
  - b. The location of the injury (e.g., the injury is located in an area not generally vulnerable to trauma);

- c. The presence of multiple injuries;
- d. Repeated injuries of unknown origin; or
- e. Injuries inconsistent with the client’s condition, pattern of behavior, or routine.

**B. When to Report**

1. When a DDA employee, contractor, volunteer, intern, or work-study student in the course of their duties has reasonable cause to believe that any client has been abused, neglected, or exploited, regardless of the source of information, they must immediately make a report to the investigative agency (see Section C below).
2. “Immediately” means there should be no delay between reporter awareness of the incident/allegation and making the report. Reporting should occur as soon as the safety of all clients is assured, and all necessary emergency measures have been taken.
3. Reports must be made immediately regardless of employee leave or days off. A mandated reporter’s responsibilities are not limited to the workplace, and apply at all times, including off-duty hours, per DSHS Administrative Policy 8.02, *Client Abuse Reporting*.
4. When a DDA employee becomes aware of an incident, the employee must make a report to DDA Central Office. See [DDA Policy 12.01](#), *Incident Management and Reporting*, for additional information on timelines and requirements.

**C. Information in a Report**

1. When making a report to APS, CPS, and RCS, each report, oral or written, must contain as much information as possible, including:
  - a. Victim name – The name and address of the vulnerable adult or child and the name of the facility or agency providing care for the vulnerable adult or child;
  - b. The nature and extent of the allegation;
  - c. Perpetrator name – The identity of the alleged perpetrator(s), if known;

- d. Contact information – The name, address, and phone numbers of the alleged victim, witnesses, and the legal guardian or alternate decision maker;
- e. Reporter’s information – The name, phone number, and address of the person making the report;
- f. History – Any history of previous allegations of abuse, neglect, exploitation, or abandonment; and
- g. Any other information that may be helpful in establishing the extent of the allegations.

**D. Notifying a Supervisor**

- 1. Immediately after making the report to the investigative agency, a mandated reporter must also report the incident to their supervisor in the manner specified by their office or facility procedures. If the immediate supervisor is not available, the mandated reporter must report the incident to the next highest supervisor or management representative so designated by the office or facility.
- 2. If the suspected perpetrator is the person to whom the mandated reporter would usually report, report the incident to the next highest supervisor or management representative at the office or facility.

**E. How to Report – Mandatory Reporting Contacts**

**1. Reports involving children**

Contact the local Child Protective Services (CPS) office using the [DCYF Mandatory Reporters website](#)

For after-hours reports, call the DCYF statewide number at 1-866-End-Harm (1-866-363-4276)

**2. Reports involving 18-21 year olds in children’s licensed staffed residential facilities and certified state-operated facilities providing 24-hour care for children**

DCYF statewide number– 1-866-363-4276 (1-866-End-Harm)

3. **Reports involving vulnerable adults**

[Report Adult Abuse website](#)

DSHS Adult Protective Services (APS) Central Intake – 1-877-734-6277

4. **Reports related to provider practice issues involving adults living in nursing homes, assisted living facilities, adult family homes, or supported living program settings**

[Report Adult Abuse website](#)

Residential Care Services (RCS)/Complaint Resolution Unit (CRU) statewide number: 1-800-562- 6078. TTY – 1-800-737-7931.

5. **Reports involving adult patients at Eastern and Western State Hospitals**

Eastern State Hospital – 1-509-565-4000

Western State Hospital – 1-253-761-7599

F. **OFFICE, FACILITY, AND AGENCY PROCEDURES**

1. All administration offices, facilities, and contractors must have written procedures in place to implement this policy and provide training to staff and volunteers on recognizing and reporting suspected client abuse, neglect, exploitation, and abandonment.
2. DDA offices and facilities must use this policy as the regional and local facility policy regarding mandatory reporting. Any additional local procedures must have the prior written approval of DDA’s Assistant Secretary or designee.
3. Written procedures and training must be available to all employees, volunteers, interns, contractors, and work-study students, and include:
  - a. Timelines for reporting suspected abuse, neglect, exploitation, and abandonment;
  - b. Reference to, or attachments of, relevant state and federal statutes and regulations regarding client abuse and the specific types of programs to which they pertain;
  - c. Current links and information of the investigative agencies for filing reports by telephone or online;

- d. The responsibilities of reporting staff, supervisors, administrative staff, and witnesses;
  - e. Instruction on recognizing abuse, neglect exploitation, and abandonment;
  - f. Instructions for notifying local law enforcement if there is reason to suspect that sexual or physical assault or fear of imminent harm has occurred;
  - g. Instructions for reporting a suspicious death to the medical examiner or coroner and local law enforcement;
  - h. Instructions for protecting clients in an emergency;
  - i. Instructions for coordinating with a sexual assault specialist or center, as appropriate;
  - j. Instructions for protecting evidence when necessary;
  - k. Investigation procedures, where applicable;
  - l. Implementing preventive measures and corrective action; and
  - m. Instructions for initiating an external review when a report of known or suspected client abuse or neglect involves the acts or omissions of an administrator or supervisor.
4. Upon hire, each DDA employee, volunteer, intern must take the online DSHS Mandatory Reporter Training. This training is required every two years for all DDA employees.
5. If a DSHS employee is an alleged perpetrator:
- a. The appropriate management representative must comply with:
    - i. DSHS Administrative Policy 18.62, *Allegations of Employee Criminal Activity*;
    - ii. DSHS Administrative Policy 8.02, *Client Abuse Reporting*;
    - iii. The DSHS/Washington State Patrol Interagency Agreement;



- iv. Any negotiated agreements; and
  - v. Other applicable policies.
- b. The appointing authority should contact their Human Resources Consultant for advice before placing an employee on an alternative work assignment.

**EXCEPTIONS**

No exceptions to this policy are allowed.

**SUPERSESSION**

DDD Policy 5.13, *Protection from Abuse: Mandatory Reporting*  
Issued August 1, 2015

Approved:  Date: April 15, 2024  
Deputy Assistant Secretary  
Developmental Disabilities Administration

Attachment A – *Definitions*

Attachment B – *Clarifying Examples of Abuse, Neglect, Personal and Financial Exploitation, and Self-Neglect*

## ATTACHMENT A

### Definitions

#### GENERAL

**ALTSA** means the Aging and Long-Term Support Administration.

**Adult Protective Services (APS)** means the ALTSA Division that conducts investigations of reported allegations and may offer protective services to the alleged adult victim.

**Agency** means all service providers identified in the scope.

**Child Protective Services (CPS)** means the Department of Children, Youth, and Families unit that takes a report of abuse, neglect, abandonment or exploitation, conducts the investigation, and may offer protective services if the alleged victim is under age 18, or is age 18-21 and receives services from a children's staffed residential home or a certified state-operated facility providing 24-hour care for children.

**Client** means a person determined eligible for DDA services.

**Complaint Resolution Unit (CRU)** means the Residential Care Services (RCS) Division unit that takes reports of abandonment, abuse, neglect, personal or financial exploitation, or provider practice concerns when the alleged victim receives services from a supported living, adult family home, group home, group training home provider or resides in a licensed facility.

**Division of Licensed Resources (DLR)** means the Department of Children, Youth, and Families that licenses out-of-home settings. DLR staff are also responsible to investigate reported licensing concerns when there has been a violation or allegation of violation of minimum licensing requirements. This includes children's group home providers, licensed staffed residential settings, and staff working at these facilities.

**Good faith** means a state of mind indicating honesty and lawfulness of purpose.

**Injury of Unknown Origin** means an injury that was not observed directly by the reporting person and the injury is not reasonably determined to be related to the client's condition, diagnosis, known and predictable interaction with surroundings, or related to a known sequence of prior events.

**Mandated reporter** means an employee of the Department of Social and Health Services or the Department of Children, Youth, and Families; law enforcement officer; social worker; professional school personnel; individual provider; an operator of a facility or a certified residential services and supports agency under chapter 71A.12 RCW; an employee of a facility; an employee of a social service, welfare, mental health, adult day health, adult day care, home health, home care, hospice, or certified residential services and supports agency; county coroner or medical examiner; Christian Science practitioner; or health care provider subject to

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### Definitions

chapter 18.130 RCW. Refer to [RCW 26.44.030](#) for a list of people with a duty to report child abuse or neglect.

**Reasonable cause to believe** means that the reporter, in making the report of abuse or neglect, acts with good faith intent, judged in light of all the circumstances then present.

**Residential Care Services (RCS)** means the AL TSA division responsible for the licensing and oversight of adult family homes, assisted living facilities, nursing facilities, intermediate care facilities for individuals with intellectual disabilities, and certified community residential services and supports.

**Suspicious death** means there is no medically reasonable explanation for the cause of death, or it is possible that criminal activity, substandard care, negligence, or abusive treatment may have caused or was a factor in the death.

### CHILDREN ([RCW 26.44.020](#))

**Child** or **Children** means any person under age 18.

**Abuse or neglect** means sexual abuse, sexual exploitation, female genital mutilation as defined in [RCW 18.130.460](#), or injury of a child by any person under circumstances which cause harm to the child's health, welfare, or safety, excluding conduct permitted under [RCW 9A.16.100](#); or the negligent treatment or maltreatment of a child by a person responsible for or providing care to the child.

**Negligent treatment or maltreatment** means an act or a failure to act, or the cumulative effects of a pattern of conduct, behavior, or inaction, that evidences a serious disregard of consequences of such magnitude as to constitute a clear and present danger to a child's health, welfare, or safety, including but not limited to conduct prohibited under [RCW 9A.42.100](#). When considering whether a clear and present danger exists, evidence of a parent's substance abuse as a contributing factor to negligent treatment or maltreatment shall be given great weight. The fact that siblings share a bedroom is not, in and of itself, negligent treatment, or maltreatment. Poverty, homelessness, or exposure to domestic violence as defined in RCW 7.105.010 that is perpetrated against someone other than the child does not constitute negligent treatment or maltreatment in and of itself.

**Sexual exploitation** includes allowing, permitting, or encouraging a child to engage in prostitution by any person; or allowing, permitting, encouraging, or engaging in the obscene or pornographic photographing, filming, or depicting of a child by any person.

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#### VULNERABLE ADULTS (RCW 74.34.020)

**Abandonment** means action or inaction by a person or entity with a duty of care for a vulnerable adult that leaves the vulnerable person without the means or ability to obtain necessary food, clothing, shelter, or health care.

**Abuse** means the intentional, willful, or reckless action or inaction that inflicts injury, unreasonable confinement, intimidation, or punishment on a vulnerable adult. In instances of abuse of a vulnerable adult who is unable to express or demonstrate physical harm, pain, or mental anguish, the abuse is presumed to cause physical harm, pain, or mental anguish. Abuse includes sexual abuse, mental abuse, physical abuse, and personal exploitation of a vulnerable adult, and improper use of restraint against a vulnerable adult which have the following meanings:

- (a) **Sexual abuse** means any form of nonconsensual sexual conduct including, but not limited to, unwanted or inappropriate touching, rape, molestation, indecent liberties, sexual coercion, sexually explicit photographing or recording, voyeurism, indecent exposure, and sexual harassment. Sexual abuse includes any sexual conduct between a staff person, who is not also a resident or client, of a facility or a staff person of a program authorized under [Chapter 71A.12 RCW](#), and a vulnerable adult living in that facility or receiving service from a program authorized under [Chapter 71A.12 RCW](#), whether or not it is consensual.
- (b) **Physical abuse** means the intentional, willful, or reckless action of inflicting bodily injury or physical mistreatment. Physical abuse includes, but is not limited to, striking with or without an object, slapping, pinching, choking, kicking, shoving, or prodding.
- (c) **Mental abuse** means an intentional, willful, or reckless verbal or nonverbal action that threatens, humiliates, harasses, coerces, intimidates, isolates, unreasonably confines, or punishes a vulnerable adult. Mental abuse may include ridiculing, yelling, or swearing.
- (d) **Personal exploitation** means an act of forcing, compelling, or exerting undue influence over a vulnerable adult causing the vulnerable adult to act in a way that is inconsistent with relevant past behavior or causing the vulnerable adult to perform services for the benefit of another.

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- (e) **Improper use of restraint** means or the inappropriate use of chemical, physical, or mechanical restraints for convenience or discipline or in a manner that:
- (i) Is inconsistent with federal or state licensing or certification requirements for facilities, hospitals, or programs authorized under chapter 71A.12 RCW;
  - (ii) Is not medically authorized; or
  - (iii) Otherwise constitutes abuse under this section.

**Chemical restraint** means the administration of any drug to manage a vulnerable adult's behavior in a way that reduces the safety risk to the vulnerable adult or others, has the temporary effect of restricting the vulnerable adult's freedom of movement, and is not standard treatment for the vulnerable adult's medical or psychiatric condition.

**Facility** means a residence licensed or required to be licensed under Chapter 18.20 RCW, assisted living facilities; Chapter 18.51 RCW, nursing homes; Chapter 70.128 RCW, adult family homes; Chapter 72.36 RCW, soldiers' homes; or Chapter 71A.20 RCW, residential habilitation centers; or any other facility licensed or certified by the department.

**Financial exploitation** means the illegal or improper use, control over, or withholding of the property, income, resources, or trust funds of the vulnerable adult by another person or entity for any person's or entity's profit or advantage other than the vulnerable adult's profit or advantage. Financial exploitation includes, but is not limited to:

- (a) The use of deception, intimidation, or undue influence by a person or entity in a position of trust and confidence with a vulnerable adult to obtain or use the property, income, resources, or trust funds of the vulnerable adult for the benefit of a person or entity other than the vulnerable adult;
- (b) The breach of a fiduciary duty, including, but not limited to, the misuse of a power of attorney, trust, or a guardianship appointment, that results in the unauthorized appropriation, sale, or transfer of the property, income, resources, or trust funds of the vulnerable adult for the benefit of a person or entity other than the vulnerable adult; or
- (c) Obtaining or using a vulnerable adult's property, income, resources, or trust funds without lawful authority, by a person or entity who knows or clearly should know that the vulnerable adult lacks the capacity to consent to the release or use of their property, income, resources, or trust funds.

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**Mechanical restraint** means any device attached or adjacent to the vulnerable adult's body that the person cannot easily remove that restricts freedom of movement or normal access to their body. "Mechanical restraint" does not include the use of devices, materials, or equipment that are:

- (a) Medically authorized, as required; and
- (b) Used in a manner that is consistent with federal or state licensing or certification requirements for facilities, hospitals, or programs authorized under chapter 71A.12 RCW.

**Neglect** means:

- (a) A pattern of conduct or inaction by a person or entity with a duty of care that fails to provide the goods and services that maintain physical or mental health of a vulnerable adult, or that fails to avoid or prevent physical or mental harm or pain to a vulnerable adult; or
- (b) An act or omission that demonstrates a serious disregard of consequences of such a magnitude as to constitute a clear and present danger to the vulnerable adult's health, welfare, or safety, including but not limited to conduct prohibited under [RCW 9A.42.100](#).

**Physical restraint** means the application of physical force without the use of any device, for the purpose of restraining the free movement of a vulnerable adult's body. "Physical restraint" does not include:

- (a) Briefly holding without undue force a vulnerable adult in order to calm or comfort the person; or
- (b) Holding a vulnerable adult's hand to safely escort the person from one area to another.

**Self-neglect** means the failure of a vulnerable adult, not living in a facility, to provide for oneself the goods and services necessary for the vulnerable adult's physical or mental health, and the absence of which impairs or threatens the vulnerable adult's well-being. This definition may include a vulnerable adult who is receiving services through home health, hospice, or a home care agency, or an individual provider when the neglect is not a result of inaction by that agency or individual provider.

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**Vulnerable adult** means a person age 18 or older who:

- (a) Is sixty years of age or older who has the functional, mental, or physical inability to care for oneself;
- (b) Subject to a guardianship under RCW 11.130.265 or adult subject to conservatorship under RCW 11.130.360;
- (c) Has a developmental disability as defined under [RCW 71A.10.020](#);
- (d) Is admitted to a licensed facility (i.e., boarding home, nursing home, adult family home, soldiers' home, intermediate care facility for individuals with intellectual disabilities, or any other facility licensed by DSHS);
- (e) Is receiving services from home health, hospice or home care agencies licensed or required to be licensed under [Chapter 70.127 RCW](#);
- (f) Is receiving services from an individual provider; or
- (g) Self-directs their own care and receives services from a personal aide under [Chapter 74.39 RCW](#).

## ATTACHMENT B

### Clarifying Examples of Abuse, Neglect, Financial Exploitation, And Self-Neglect

The following examples, which are not all-inclusive, are provided to assist staff in identifying suspected or actual abuse, neglect, exploitation, and self-neglect. **While many examples are straightforward, others may be less obvious and need to be considered in a larger context.**

#### A. Physical Abuse

- Biting
- Choking
- Kicking
- Pinching
- Pushing
- Shaking (especially a child under three years of age)
- Shoving
- Prodding
- Slapping
- Striking with or without an object
- Twisting limbs (joint torsion)
- Causing or willfully allowing the person to do bodily harm to themselves or willfully allowing another client to physically harm them
- Controlling a person through corporal punishment
- Not allowing the client to eat, drink, or care for physical needs such as elimination
- Retaliation following a physical attack, verbal abuse, or other unwelcome action by a client
- Using excessive force when restraining an agitated client

#### B. Sexual Abuse

- Any sexual contact between staff or volunteer of a facility and a client, whether or not it is consensual
- Inappropriate or unwanted sexual touching including but not limited to:
  - Fondling
  - Intercourse
  - Oral sex
  - Rape
  - Sodomy
- Sexual coercion
- Sexual harassment
- Sexually explicit photographing, filming, or videotaping
- Showing, selling, or otherwise distributing pornographic materials
- Female genital mutilation as defined in RCW 18.130.460

#### C. Mental Abuse

- Coercion
- Harassment



## ATTACHMENT B

### Clarifying Examples of Abuse, Neglect, Financial Exploitation, And Self-Neglect

- Inappropriately isolating a vulnerable adult or child from family, friends, or regular activity
- Making derogatory or disparaging remarks about a person and their family in front of the person or within hearing distance of any client
- Oral, written or gestural language threatening harm or intended to frighten clients
- Verbal assault such as ridicule, intimidation, yelling, or swearing

#### D. Neglect

- Abandoning a client in situations where other persons, objects or the environment may injure the client
- Allowing the physical environment to deteriorate to the point that a client is subject to hazardous situations, such as electrical, water, and structural hazards
- Failure to promptly respond to medical emergencies or requests for medical treatment
- Failure to follow prescribed treatments
- Failure to attend to clients in hostile or dangerous situations
- Failure to supervise which results in a client wandering, missing, or running away
- Willful failure to protect the client from physical abuse by another client or staff
- Willful failure to protect a child from sexual contact with another child

#### E. Exploitation (Including Personal and Financial)

- Using clients to perform work that should be done by paid employees
- Using client financial resources for personal gain or for activities not related to client care

#### F. Self-neglect

Self-neglect occurs when a vulnerable adult **is** unwilling or unable to do needed self-care for their physical or mental health. This can include such things as:

- Not eating enough food to the point of malnourishment
- Living in filthy, unsanitary, or hazardous conditions, refusing urgent medical care or a pattern of declining necessary medical care