

Guidelines for Facility Self-Reporting

Certified Facilities

F225 – The facility must ensure that all alleged violations of mistreatment, neglect, or abuse, injuries of unknown source, and misappropriation of resident property are immediately reported to the facility administrator and to other officials in accordance with State law through established procedures (including the State survey and certification agency). Immediately means as soon as possible, but ought not exceed 24 hours after discovery of the incident. This does not mean that the facility has up to 24 hours to report; the report should be made as soon as possible, but in no circumstance should the reporting timeframe exceed 24 hours.

The facility must have evidence that all alleged violations are thoroughly investigated, and must prevent further potential abuse while the investigation is in progress.

The results of all investigations must be reported to the administrator or his designated representative and to other officials in accordance with State law (including to the State survey and certification agency) within 5 working days of the incident, and if the alleged violation is verified appropriate corrective action must be taken.

The requirement is to report and investigate all alleged violations. This is more stringent than the state requirements which include the language “reasonable cause to believe”.

Policies and Procedures:

Policies and procedures must cover the following areas:

- Screening
- Training
- Prevention
- Identification
- Investigation
- Protection
- Reporting/Response

Policies and procedures should be consistent with regulatory requirements, including reporting requirements – ensure policies and procedures **do NOT** include “reasonable cause to believe” language.

Facilities must also meet the additional reporting requirements included under the affordable healthcare act for suspected crimes. These additional reporting requirements must be included in the policies and procedures.

Facilities must ensure policies and procedures contain specific reporting timeframes.

Facilities must ensure policies and procedures include prohibitions from taking or using photographs or recordings in any manner that would demean or humiliate a resident(s).

State-Licensed Only Facilities

Section 198.070.1, RSMo, requires long-term care (LTC) administrators or employees who have “***reasonable cause to believe*** that a resident of a facility has been abused or neglected... shall immediately report or cause a report to be made to the department.”

The LTC employee should have ***reasonable cause to believe*** that the abuse or neglect occurred and the facility must ensure that all employees report allegations of abuse or neglect to the facility administrator. This allows an administrator or director of nursing a short amount of time to conduct an internal investigation to determine if there is reasonable likelihood that the alleged abuse or neglect actually occurred; and, in the case of “neglect,” that the allegation actually rises to the level of “neglect.” Once a determination is made that there is ***reasonable cause to believe*** the abuse or neglect occurred, the LTC employee is mandated to immediately report, or cause such a report to be made, to the department.

Misappropriation of RESIDENT property does not fall under a STATE mandated reporting category in state licensed only facilities, however, it should be reported if the alleged perpetrator is a facility employee for the purpose of a potential employee disqualification list (EDL) investigation.

How to File a Facility Self-Report

During normal business hours (Monday – Friday between 8:00 a.m. and 5:00 p.m.) facilities are encouraged to call their regional office directly to report incidents that may require a self-report to be generated. Regional office staff will then determine whether the information meets the self-reporting criteria. Regional office staff will verify whether the caller is making the report on behalf of the facility.

- Region 1 (Springfield) - (417) 895-6435; Fax (417) 895-6290
- Region 2 (Poplar Bluff) – (573) 840-9580; Fax (573) 840-9586
- Region 3 (Kansas City) – (816) 889-2818; Fax (816) 889-2888
- Region 4 (Cameron) – (816) 632-6541; Fax (816) 632-1810
- Region 5 (Macon) – (660) 385-5763; Fax (660) 385-4706
- Region 6 (Jefferson City) – (573) 751-2270; Fax (573) 526-1269
- Region 7 (St. Louis) – (314) 340-7360; Fax (314) 340-3414

After hours and on weekends facilities must call the Elder Abuse & Neglect Hotline (1-800-392-0210) to report an incident that meets the self-reporting criteria in lieu of calling the regional office. ***In addition*** to calling the hotline, a report may also be faxed to the regional office in order to meet mandatory reporting timeframes. Faxed reports clearly indicate the facility and reporter name and shall include a specific description of the incident, the resident(s) affected, the name staff person(s) involved, and any action taken by the facility as a result of the allegation.

Facility Investigative Documentation

1. Specific description of the incident (persons involved, date, time, and location of the incident).
2. Relevant information/documentation from the resident's medical record (i.e., face sheet, nurse's notes, MDS, care plans, physician notes, discharge information).
3. A description of the resident's injury and photographs, if possible.
4. Names, addresses, home telephone numbers, dates of birth, social security numbers, and positions for staff involved in the incident.
5. Written statements by all persons with knowledge of the incident. Statements must be signed and dated and give specific details.
6. Documentation of interviews with other residents who might have been affected or that the involved staff person worked with to determine if there are additional concerns.
7. Documentation of any interviews conducted with persons who might have some knowledge of the incident.
8. Copy of disciplinary action taken including the date, if any action was taken.
9. Summary of investigation, including corrective actions/monitoring the facility implemented to prevent the incident from reoccurring.
10. Police report and contact information, if completed and when available.
11. Any other relevant information that would helpful to show what happened for the specific incident and actions taken by the facility not included in the above dot points.