Washington State Department of Social & Health Services
Transforming lives

DEVELOPMENTAL DISABILITIES ADMINISTRATION (DDA)

Residential Services Providers and County and County-Contracted Providers: Mandatory Reporting of Abuse, Neglect, Exploitation, or Abandonment of a Child or Vulnerable Adult

All administrators, owners / operators, employees, contractors, and volunteers of any existing or proposed community residential services provider or county or county-contracted provider must abide by Washington State law, which prohibits abuse, neglect, exploitation, and abandonment of a child or vulnerable adult. Any related reporting procedures published by the Department of Social and Health Services must also be followed.

Clients must be treated with kindness, respect, care and consideration at all times. Abuse, neglect, exploitation, and abandonment are not permitted under any circumstances.

Check the policy that you have reviewed.

Residential provider employees:

☐ DDA Policy 6.12 Incident Management and Reporting Requirements for Residential Providers.

County and county-contracted provider employees:

☑ DDA Policy 6.08 Incident Management and Reporting Requirements for County and County-Contracted Providers.

Check the boxes to confirm the following:

☐ I have read the policy identified above in its entirety and understand:
- ☐ How to report suspected abuse, neglect, exploitation, and abandonment of a client;
- ☐ My legal requirement as a mandatory reporter to report suspected abuse, neglect, exploitation, and abandonment of a client;
- ☐ The definitions of abuse, neglect, exploitation, and abandonment;
- ☐ Failure to report such incidents can result in a disciplinary action, including termination, and is a gross misdemeanor under Washington State law;
- ☐ My responsibilities to protect vulnerable adults and children from abuse, neglect, exploitation, and abandonment; and

☐ As a mandated reporter, I must report any suspicious death, physical or sexual abuse of a vulnerable adult to the local coroner or medical examiner and local law enforcement under RCW 74.34.035.

☐ I have had an opportunity to ask questions of my supervisor or DDA staff regarding this policy and have had those questions answered.

PRINT LEGAL NAME	EMPLOYEE SIGNATURE	DATE
PRINT WITNESS LEGAL NAME	WITNESS SIGNATURE	DATE
PROVIDER NAME		

c: Employee File

FOR IMAGING ONLY	PERSONNEL ID	DOC DATE	SECTION	DOC TYPE	SUB DOC TYPE	HR REP
			Training	Form	Mandatory	