F-Tags Connected with Dementia Driven Resident to Resident Sexual Contact

F-Tags
*F150 Resident Rights
*F242 Self-Determination and Participation
The resident has the right to... Interact with members of the community both inside and outside the facility

F-Tags
*F157 Notification of Changes
*F201 & F202 Transfer and Discharge Requirements/Documentation
F-Tags
*F272 Assessment
*F279 Care Plan
*F280 Participation in Care Planning

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F-Tags
*F281 Professional Standards
*F309 Quality of Care

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F-Tags
*F323 Accidents
Even though a resident may have a cognitive impairment, he/she could still commit a willful act. However, there are instances when a resident's willful intent cannot be determined. In those cases, a resident-to-resident altercation should be reviewed under this tag, F323.
F-Tags
*F493 Governing Body
The facility must have a governing body, or designated persons functioning as a governing body, that is legally responsible for establishing and implementing policies regarding the management and operation of the facility.

F-Tags
*F223 Abuse
The resident has the right to be free from verbal, sexual, physical, and mental abuse, corporal punishment, and involuntary seclusion.

F-Tags
*F224 Staff Treatment of Residents
The facility must develop and implement written policies and procedures that prohibit . . . abuse of residents . . . .
F-Tags

*F226 Reporting/Investigating Allegations of Abuse

Self-Investigations

**F225** The facility must ensure that all alleged violations involving mistreatment, neglect, or abuse, including injuries of unknown source and misappropriation of resident property are reported immediately to the administrator of the facility and to other officials in accordance with State law through established procedures (including to the State survey and certification agency).

Self-Investigations

**F225** The facility must have evidence that all alleged violations are thoroughly investigated, and must prevent further potential abuse while the investigation is in progress.
<table>
<thead>
<tr>
<th>Self-Investigations</th>
</tr>
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<tbody>
<tr>
<td><strong>F225</strong> 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.</td>
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</tbody>
</table>

- **Self-Investigations**
  - The “immediate” requirement means within 24 clock hours after any staff member becomes aware of the allegation. This is for the report to the survey agency. This is independent of the obligation to notify the attending physician and the family or sponsor, which should always be done as soon as possible.
  
  *This means all staff must be aware of this obligation!*

- **Self-Investigations**
  - The “immediate” requirement means within 24 clock hours after any staff member becomes aware of the allegation. This is for the report to the survey agency. This is independent of the obligation to notify the attending physician and the family or sponsor, which should always be done as soon as possible.
  
  *Do the staff know who to report to?*
Self-Investigations

The "immediate" requirement means within 24 clock hours after any staff member becomes aware of the allegation. This is for the report to the survey agency. This is independent of the obligation to notify the attending physician and the family or sponsor, which should always be done as soon as possible.

Do all staff know what should be reported?

Self-Investigations

Any allegation of abuse is reportable. Allegations may come from residents themselves ("I was abused" or "I saw another resident being abused"), family members, other visitors, or staff. Once the allegation is made known to any staff member, the clock is ticking.

Self-Investigations

Failure of staff to respond appropriately to allegations of abuse or suspicious injuries of unknown origin can result in severe regulatory liability as well as civil liability. Any allegation of abuse and any suspicious injury or unknown origin requires the facility's abuse protocol to be immediately invoked. This includes removing any alleged or suspected perpetrators from resident contact, notifying the facility administrator, notifying the survey agency within 24 hours, and beginning a thorough investigation.
Self-Investigations

Failure of staff to respond appropriately to allegations of abuse or suspicious injuries of unknown origin can result in severe regulatory liability as well as civil liability. Failure to immediately invoke the abuse protocol and relieve any suspected or alleged perpetrators from resident care duties can be grounds for an immediate jeopardy citation. Reluctance—often caused by not wanting to believe that abuse has occurred—is fatal.

Documenting Self-Investigations

Circumstances under which the incident occurred.

When the incident occurred (date and time).

Where the incident occurred (for example, bathroom, bedroom, street, or lawn).

Immediate treatment rendered.

Documenting Self-Investigations

Names, telephone numbers, and addresses of witnesses.

Date and time relatives or sponsor were notified.

Documenting Self-Investigations

Symptoms of pain and injury discussed with the physician, and the date and time the physician was notified.

The extent of injury, if any, to the affected resident or residents.

Documenting Self-Investigations

Follow-up care and outcome resolution.

The action taken by the facility to prevent the occurrence of similar incidents in the future. *This is a systems question.*

Anything else specified in facility’s own P&Ps.

Documenting Self-Investigations

For interviews:

Provenance of the interview, including date/time, name of person conducting interview, name of person being interviewed, brief statement of reason for interview.