



# SELF-ASSESSMENT FOR AN ABUSE FREE ENVIRONMENT

For programs and facilities licensed or operated  
by the Office of Children and Family Services

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Office of Children  
and Family Services

This is a voluntary self-assessment tool to support your abuse prevention efforts. This self-assessment will not be audited by State Oversight Agencies or the NYS Justice Center for the Protection of People with Special Needs.



## Prevention of Abuse and Neglect Work Group

Justice Center for the Protection of People with Special Needs | Office for People With Developmental Disabilities | Office of Alcoholism and Substance Abuse Services | Office of Mental Health | Office of Children and Family Services | State Education Department

In 2014, the New York State Justice Center for the Protection of People with Special Needs' Steering Committee formed a cross-agency Prevention of Abuse and Neglect Work Group. The Work Group is comprised of the Office of Mental Health (OMH), Office for People With Developmental Disabilities (OPWDD), Office of Alcoholism and Substance Abuse Services (OASAS), Office of Children and Family Services (OCFS), State Education Department (SED), and the Justice Center. The Work Group supports the recommendations on preventing abuse and neglect identified in the report by Clarence J. Sundram, *The Measure of a Society*, April 2012.

### MISSION

The mission of the Prevention of Abuse and Neglect Work Group is to identify durable corrective and preventive actions that address the conditions which cause or contribute to the occurrence of incidents of abuse and neglect.

## **SELF-ASSESSMENT FOR AN ABUSE FREE ENVIRONMENT**

The *Self-Assessment for an Abuse Free Environment* was developed as an **optional tool** for programs and facilities under the jurisdiction of the New York State Justice Center for the Protection of People with Special Needs (Justice Center). This tool is intended to support your on-going initiatives to prevent abuse or neglect of youth in your program/facility and assist you in determining which area to focus on in your program/facility's performance improvement projects. OCFS and the Justice Center are available to assist in developing or providing resources that would assist your program/facility in abuse and neglect prevention. This assessment can be used on an Agency level, or can be specific to individual programs.

**This tool is for use within your program or facility and is not meant to be shared with the Justice Center, Office of Children and Family Services (OCFS), or other surveyors. However, this self-assessment tool may be subject to disclosure under applicable federal or state law, including the New York State Freedom of Information Law (FOIL).**

### **COMPLETING THE SELF ASSESSMENT**

In Column A, B or C, please check if the item is true, somewhat true, or not true, as it applies to your Agency or Agency's programs. Check each item based on observation or evidence verified by others if the risk factor described is present in your program or facility. Some of these risk factors are covered under OCFS regulations.

The following questions will assist you in determining your level of risk for the occurrence of abuse or neglect. These questions are meant to guide discussions about abuse and neglect prevention with administrators, quality assurance staff, direct service staff and individuals who receive services.

**I. PROGRAM/FACILITY RISK PREVENTION FACTORS**

A TRUE	B SOMEWHAT TRUE	C NOT TRUE	Risk Factor #1: Abuse/Neglect Prevention Policy
			The Agency has an abuse/neglect prevention policy.
			The Agency's policies underscore the dignity and worth of all residents.
			The Agency's definitions of abuse and neglect are consistent with OCFS regulations, and the <i>Protection of People with Special Needs Act</i> .
			Procedures are in place to protect the confidentiality of a mandated reporter's identity, subject to applicable federal and state laws.
			The Agency's procedures to follow in response to an abuse/neglect allegation or incident are clear.
			The Agency's abuse and neglect prevention policy includes specific time frames for responding to abuse and neglect allegations.
			The Agency's abuse and neglect prevention policy includes requirements for making reports to (1) Justice Center, (2) Statewide Central Register (If the alleged concerns identify with a familial case), and (4) others, consistent with federal and state law.
			The Agency has an incident management system that tracks incidents by time, location, client, staff, etc. Incidents are trended and data is used to reduce risk and prevent future incidents from occurring.
			The Agency's abuse/neglect prevention policy has been shared with the Agency's Board or Board Committee.

**Sources for completing risk factor #1:**

- Observations and impressions
- Program/Facility policies
- OCFS regulations
- Justice Center data
- Recipient and staff grievances
- Customer satisfaction survey

**Comments:**

**Totals from Risk Factor #1:**

A	B	C

A	B	C	Risk Factor #2: Staff Training
TRUE	SOMEWHAT TRUE	NOT TRUE	
			Orientation for new Agency staff includes information on how to recognize and report abuse and neglect.
			Appropriate staff is trained to handle stressful, crisis situations, including dealing with aggressive and combative behaviors of residents.
			The Agency provides training on cultural diversity, ethnic differences, and language barriers and is provided for all levels of Agency staff to help reduce the isolation of residents.
			Agency staff is trained to use creative problem solving and conflict resolution techniques to handle aggressive resident behaviors and other difficult caregiving situations.
			The Agency provides training to staff capacity to improve communication with residents and families.
			Agency supervisors are educated to help identify signs of staff stress and burnout.
			The Agency promotes and utilizes de-escalation strategies (ways to de-escalate resident behaviors prior to reaching crisis point).

**Sources for completing risk factor #2:**

- Agency Staff development and training
- Bureau of Education and Workforce Development NYS
- Governor’s Office of Employee Relations (GOER)
- Staff performance evaluations
- Employee Assistance Programs

**Comments:**

**Totals from Risk Factor #2:**

A	B	C

A	B	C	Risk Factor #3: Staff Screening
TRUE	SOMEWHAT TRUE	NOT TRUE	
			The Agency screens all prospective employees to determine their suitability to work with vulnerable people before they begin work (including checking criminal history background, the Statewide Central Register, and the JC Staff Exclusion List).
			The Agency has a monitoring/supervision plan for staff that has not yet been cleared through the Statewide Central Register (SCR).
			Before a job offer, where applicable, applicants may be screened for prior history of substance abuse, alcohol abuse or any indications of current substance abuse problems.

**Sources for completing risk factor #3:**

- Observation/impressions
- Program/Facility personnel records/staff performance reviews
- Criminal background checks/police reports
- Statewide Central Register of Child Abuse and Maltreatment (SCR) checks
- Staff Exclusion List (SEL) checks
- Complaint data/recipient grievance

**Comments:**

**Totals from Risk Factor #3:**

**A                      B                      C**

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A TRUE	B SOMEWHAT TRUE	C NOT TRUE	<b>Risk Factor #4: Staff Stresses/Burnout</b>
			The Agency offers access to support groups, mental health benefits and/or EAP services to staff.
			The Agency supports all Units/Programs to have a team approach and share responsibility for care of all the residents.
			Agency staff is given the opportunity to debrief following crises, stressful events or staffing shortages.
			The Agency hires sufficient staff to cover shifts in compliance with licensing requirements and contractual agreements with placement agencies (e.g., one-to-one).
			All Agency staff, including direct care staff, have the opportunity to contribute ideas and suggestions for improving care for residents.
			The Agency monitors the use of/need for overtime.
			The Agency adheres to appropriate limits for staff to be assigned overtime, in order to assure appropriate care for residents.
			The Agency tracks critical incidents by time, location, client, etc.
			The Agency studies how working with the survivors of trauma impacts staff.
			The Agency has protocols and support for staff experiencing trauma and/or secondary trauma.

**Sources for completing risk factor #4:**

- Direct supervision
- Program/Facility policies
- Program/Facility personnel records/staff performance reviews
- Complaint data/resident grievances
- Customer satisfaction surveys
- Time sheets and overtime records

**Comments:**

**Totals from Risk Factor #4:**

<b>A</b>	<b>B</b>	<b>C</b>

A TRUE	B SOMEWHAT TRUE	C NOT TRUE	Risk Factor #5: Staff Ratio/Turnover
			The Agency hires sufficient numbers of qualified staff to meet the care needs of each resident.
			The Agency is aware of their staff turnover rate.
			Agency staff turnover is low. There are currently few or no staff vacancies.
			The Agency staff to resident ratios meets OCFS regulations.
			The Agency seeks input from outside providers with low turnover rates to assist the program/facility in identifying and strategizing ways to address staff turnover.
			The Agency conducts job satisfaction surveys and identifies areas for improvement, involving staff in the process of making improvements.
			The Agency has a formal system for reviewing staff performances.
			The Agency has a recruitment/retention plan to attract new and retain qualified employees.

**Sources for completing risk factor #5:**

- Observation/impressions
- Program/Facility staffing records
- Job satisfaction surveys
- Licensing records
- Complaint data/resident grievances
- Staff Recruitment

**Comments:**

**Totals from Risk Factor #5**

**A                      B                      C**

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A  TRUE	B  SOMEWHAT TRUE	C  NOT TRUE	Risk Factor #6: History of Deficiencies/Complaints
			The corrective action noted in the most recent licensing inspection and other survey reports are responded to and addressed by the Agency.
			Corrective action plans are implemented, as soon as possible when programmatic or staffing issues are brought to the program's attention.
			Successful prosecutions of staff for abuse or neglect of residents are few or non-existent.
			The Agency's AWOL numbers and patterns are monitored and reviewed by the Agency's Incident Review Committee.
			Significant Incidents and restraints are monitored and reviewed by the Agency's Incident Review Committee,

**Sources for completing risk factor #6:**

- Program/Facility incident reports
- Program/Facility policy and OCFS regulations
- Licensing records
- Complaint data/resident grievances
- Program/Facility/Unit documents
- Customer satisfaction surveys
- Incident Review Committee
- Justice Center data

**Comments:**

**Totals from Risk Factor #6:**

**A                      B                      C**

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A	B	C	Risk Factor #7: Culture/Management
TRUE	SOMEWHAT TRUE	NOT TRUE	
			The staff and administration recognize that abuse and neglect can occur in programs/facilities operated by the Agency.
			The Agency has a philosophy of care and respect for all residents and family members.
			Residents feel they can report problems to the administration without fear of retaliation.
			The Agency's direct service staff believes they can advise supervisors about any concerns regarding the care of residents that they may have observed without fear of retaliation.
			The Agency's administration supports a Continuous Quality Improvement environment.
			Agency staff feels valued as employees by direct supervisors and administrators.
			Agency staff has the opportunity to speak with administrators about their concerns.
			Agency staff is evaluated on an annual basis.

**Sources for completing risk factor #7:**

- Observation/impressions
- Discussion with recipients
- Discussion with staff
- Policy and procedure manuals
- Licensing records
- Complaint data/resident grievances
- Customer satisfaction surveys

**Comments:**

**Totals from Risk Factor #7:**

A	B	C

A TRUE	B SOMEWHAT TRUE	C NOT TRUE	Risk Factor #8: Physical Environment
			All areas of the Agency's facilities are well lit, including bedrooms, common areas, bathrooms and outside of building.
			The Agency's facilities and units have good visibility with few blind spots.
			Residents' medication is secured in a double locked area. Residents do not have access to these spaces without supervision.
			The Agency's facility (ices) appearance (decorations, furnishings and accommodations) reflect the needs and interests of the residents.
			The Agency's facility (ices') maintenance closets housing potentially harmful substances and items are kept securely locked. Residents do not have access to these spaces without supervision.
			The Agency conducts regularly scheduled safety inspections and is in compliance with OCFS rules, regulations and applicable safety codes.
			The Agency's facility log books are kept up to date and the Agency monitors who enters and exits the buildings.

**Sources for completing risk factor #8:**

- Observation/impressions
- Discussion with recipients and staff
- Floor plans
- Material Safety Sheets
- Complaint data/Recipient grievances
- OCFS Regulations

**Comments:**

**Totals from Risk Factor #8:**

**A                      B                      C**

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**II. RELATIONSHIP RISK PREVENTION FACTORS**

A TRUE	B SOMEWHAT TRUE	C NOT TRUE	Risk Factor #9: Residents' Visitor Frequency
			Agency residents are not isolated (e.g., residents are encouraged to have visitors as appropriate and regular contact with staff and other recipients).
			Agency residents have access to advocates, such as OCFS Ombudsman, Legal Guardians, and DSS Caseworker, as appropriate.
			Agency staff does not label visitors or callers as complainers or troublemakers.
			Families and significant others of Agency residents have access to support groups.
			The Agency maintains visitor logs.
			The Agency maintains phone logs.
			The Agency has a policy on maintaining logs.
			The Agency has regular contact and is kept informed of any changes to resident's visiting plan developed with Local Districts (DSS and School).

**Sources for completing risk factor #9:**

- Observations/impressions
- Complaint data/resident grievances
- Customer satisfaction surveys
- Care plans and treatment records
- Visitor logs

**Comments:**

**Totals from Risk Factor #9:**

<b>A</b>	<b>B</b>	<b>C</b>
<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>

A	B	C	Risk Factor #10: Resident and Staff Interaction
TRUE	SOMEWHAT TRUE	NOT TRUE	
			Agency direct care staff work with the same group of residents consistently, providing continuity of care that allows staff to build appropriate personal relationships. Residents feel secure.
			The Agency reviews rules, rights and grievance procedures with the residents.
			If Agency residents curse or use racially offensive or insulting language toward staff it is not taken personally and any resulting discipline is appropriate.
			Agency residents are treated with respect, including during episodes of disruptive behavior or refusal of services.
			Agency management or administrative staff conducts regular unannounced site visits.
			Agency staff and residents are familiar with the New York State Bill of Rights for Children and Youth in Foster Care.
			Agency staff is aware and sensitive of residents' familial demographics and are sensitive and respectful when interacting with residents, i.e. interpersonal conversations.

**Sources for completing risk factor #10:**

- Complaint data/resident grievances
- Customer satisfaction surveys
- Program/Facility personnel records/staff performance reviews
- Program or log notes/recipients' records
- Medical reports
- Care plans
- Corrective action reports
- Staffing plans and policy
- Resident and family meeting minutes

**Comments:**

**Totals from Risk Factor #10:**

**A                      B                      C**

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**SCORING THE SELF ASSESSMENT**

Please compile the totals from the risk factors:

A	B	C

If there are a high number of responses in Column A, it may represent a **LOW** risk abuse/neglect environment.

If there are a high number of responses in Column B, it may represent a **MODERATE** risk abuse/neglect environment.

If there are a high number of responses in Column C, it may represent a **HIGH** risk abuse/neglect environment.

If areas of concern are identified, begin making changes to lessen the risk of possible abuse or neglect. For recommendations regarding strategies for abuse and neglect prevention, visit [www.justicecenter.ny.gov](http://www.justicecenter.ny.gov) for additional resources.