Abuse and neglect reporting: a 30-minute group training

A free outline for training leads, from Special Learning. Live, as a group, screen shared and recorded. Fill in the blank boxes before the session. Your agency's policy and your state's rule come first; this outline is not legal advice.

Before the session

☐ Live, as a group, screen shared and recorded. Staff training is group training. Keep the recording with the sign-off record.

☐ Before the session: your agency's reporting policy, its form, your state's numbers and rule, and the scenarios you will use.

☐ A trusted person to talk to after the session. Some people have lived through abuse themselves, so say before the scenarios that anyone can step out.

☐ Use only fictional people in the scenarios. Never use a real person's situation in a group.

Your agency's details (fill in, then put them on a slide)

First person to tell (name and number)	
Second person, if the first is involved	
State line for our setting (name and number)	
Emergency services	911
Where the incident form is	
Where the recording and sign-off record are kept	

The 30 minutes

Time	Min.	What to do	Notes
0:00	3	**Open.** Say why we are here: the people we support have rights, and we are the people who see their days. Say how the session works: live, screen shared and recorded, with questions welcome at any point. Share the NADSP Code of Ethics line: report any observed or suspected abuse, neglect or exploitation to the appropriate authorities.	
0:03	5	**Types of abuse, neglect and exploitation.** Show the types table. Ask the group for one example of each from the training materials, not from a real person.	
0:08	5	**Signs and the first hour.** Show the signs table and the six first-hour steps. Stress: safety first, report, do not investigate, keep what is there, write it down.	
0:13	5	**Who we tell.** Share your screen: your agency's process, your second route, your state's numbers and your form. Read each number aloud. Do not call a hotline as a test.	
0:18	8	**Scenario practice.** Run two scenarios from the set below as a group. Read it, then ask the four questions: what happened, what do we do in the first hour, who do we tell, what do we write.	
0:26	4	**Questions and sign-off.** Take questions, remind people where the numbers live, and have each person complete the sign-off record. Set the date of the next refresher.	

Total: 3 + 5 + 5 + 5 + 8 + 4 = 30 minutes. The timings are ours.

What DSPs need to know

Types of abuse, neglect and exploitation

Type	What it can be
Physical abuse	May include slapping, hitting, beating, bruising or causing someone physical pain, injury or suffering. It can also include confining an adult against their will, such as locking someone in a room.
Emotional (psychological) abuse	Creating emotional pain, distress or anguish through threats, intimidation or humiliation: insults, yelling, threats of harm or isolation, or actions such as throwing objects to project fear.
Sexual abuse	Physical force, threats or coercion to bring about non-consensual touching or other sexual activity. It is a particular risk for people who cannot give consent or understand what is happening.
Neglect	Failures to support the physical, emotional and social needs of adults who depend on others for their primary care: medical, hygiene, food, supervision, and showing up for scheduled support.
Exploitation, including financial	Misusing a person's property, money or assets, or using them without the person's consent, through deception, pressure or coercion. It includes theft, fraud and taking money, valuables or medication.
Other reportable events	The federal definition of critical incident also names misuse of restrictive interventions or seclusion, some medication errors and unexplained deaths. Your state and agency may list more.

Where this comes from: NAPSA, Abuse; NAPSA, Neglect and self-neglect; NAPSA, Financial exploitation; 42 CFR 441.302(a)(6). Definitions vary by state; check your state's.

Signs to look for

What you might see	May point to
Unexplained bruises or welts, fingerprints or handprints on the face, neck, arms or wrists; burns; cuts; sprains or fractures	**Physical abuse**
Torn, stained or bloody clothing; being kept from visitors, calls or mail; restricted movement	**Abuse or isolation**
Hungry or losing weight, no food, medication or care they need; caregiver does not arrive as scheduled or disappears	**Neglect**
New fear of a person, withdrawal, or a sudden change in mood around certain staff (our practice; NAPSA lists unusual fears and withdrawal as risk factors, so what the person tells you or shows you counts)	**Emotional abuse**
Purchases the person did not know about, missing money, checks or belongings, changed names on accounts	**Financial exploitation**

A sign is a reason to look closer and report, not proof. NAPSA says the presence of warning signs "doesn't necessarily mean that the adult is being abused," and also that the system is built so you can report a "feeling" you cannot verify: APS professionals are trained to assess each situation.

What to do in the first hour

1	**Safety first.** If someone is in danger or hurt, call 911 and get medical help. NAPSA says to dial 911 for a life-threatening situation. Our practice: keep the person with someone they trust, and away from anyone they may fear. Reporting may be delayed to keep people safe; New York's Justice Center says exactly that.
2	**Tell your supervisor or the person your agency names, now.** Follow your agency's policy on who to call first, and who to call if that person is the one you are worried about. If your agency has no second route, use the state line directly. This step is ours.
3	**Report to the state, by the deadline.** Mandated reporters in New York must report to the state hotline within 24 hours of discovery; other states differ. Use the number your agency and state give you, and report even if you are unsure: a mandated reporter who is not sure should still report.
4	**Do not investigate.** Do not question the person repeatedly, confront a coworker or family member, or search for proof. Trained investigators and APS workers do that, and a report from you can start it.
5	**Preserve what is there.** Do not clean, wash, delete or move things that may matter, such as clothing, messages, a damaged item or a record, unless safety or medical care requires it. Tell your supervisor what you left alone and why. Your agency and the state decide what happens next.
6	**Write it down the same day.** Facts only: who, what, where, when, what you saw and heard, the person's own words in quotes, what you did and who you told, with the time of each call. No guesses about why, no labels. Use your agency's incident form; our daily notes and incident report templates can help.

Steps 2, 5 and 6, the how-to in step 4 (if the person tells you something, listen, stay calm, thank them and tell them who you will tell), and the trusted-person sentence in step 1 are our practice, not a rule. Telling your supervisor does not replace a state report where your state requires you to make it. The agency's policy and the state's rule decide, and they come first. Staff who report in good faith should be free from retaliation. The joint report's Model Practices say providers and the State should ensure that staff, people receiving services and family members are free from retaliation "because they reported incidents or allegations of abuse, neglect, exploitation, or other staff misconduct or errors." Say so in the training, and show where your own policy says it.

Who to tell, and the state's rule

Who	When and why
911 or local emergency services	Anyone in immediate danger, a medical emergency, or a crime in progress.
Your agency	Your supervisor, on-call manager or incident line, per your policy. Name a second person for when the first is involved.
The state's line	Adult protective services (APS) or the state developmental disabilities (DD) or Medicaid incident line, as your state and setting require. NAPSA lists the APS number for each state; your state DD agency lists its own.
Family, guardian and the support coordinator	The agency tells them. The Model Practices suggest providers tell families or guardians and support coordinators as soon as possible and within 72 hours; your state sets its own timeline.

Texas (example only): Texas splits its lines by setting and urgency. The Texas Abuse Hotline site says to call 1-800-252-5400 when a situation is urgent, not to use the website for urgent or emergency situations, and that reports about clients in intermediate care facilities (ICF/IID) and state supported living centers go, since March 1, 2024, to HHS Complaint and Incident Intake (1-800-458-9858) instead.

New York (example only): New York's Justice Center runs one 24-hour hotline for the Vulnerable Persons Central Register at 1-855-373-2122. It says a direct care or support staff person at a facility or agency under its jurisdiction is a mandated reporter, that a mandated reporter must report within 24 hours of discovery, and that reporting may be delayed to keep people safe, including calling 9-1-1.

These two are examples of how different states are. Do not copy either state's numbers or timelines into your own training. Use your state's rule: the state finder lists each state's DSP training rule and agency. State finder: https://special-learning.com/for-organizations/behavioral-health/state-required-dsp-training-hours/

Scenario practice (fictional people)

Walter, Keisha, Alejandro and Nia are invented, and any resemblance to a real person is by chance. The notes under each scenario are ours, built on the sources named; your policy and your state's rule decide what you do.

Walter: Marks he does not explain

Walter, 58, is getting ready for the day. You see dark marks on his upper arm, shaped like fingers. He pulls his sleeve down and says, "It's nothing." Last night's notes say he was fine.

- ☐ Fingerprint-shaped marks are on NAPSA's list of signs, and the person not wanting to talk about it is common.
- ☐ Do not press Walter for an answer or confront anyone. Tell him, kindly, who you will tell.
- ☐ Write what you saw and his exact words, report as your agency and state require, and tell your supervisor now.

Keisha: A door that is locked from the outside

You hear shouting, then see a coworker turn a key in the lock of Keisha's bedroom door from the hallway. Keisha, 34, is inside and upset. The coworker says, "She can calm down in there for a couple of hours."

- ☐ NAPSA names confining an adult against their will, such as locking someone in a room, as physical abuse.
- ☐ Safety first: make sure Keisha can get out and is safe, and call 911 if anyone is at risk. Do not wait for a shift to end.
- ☐ If the person you would normally tell is the coworker, use the second route or the state line. Write down exactly what you saw and heard.

Alejandro: The card and the gas money

A coworker asks to borrow Alejandro's bank card "just for gas" and says they will put it back. Two days later, Alejandro, 41, shows you his phone: there are purchases he does not remember.

- ☐ NAPSA lists purchases made without the person's knowledge or consent among the signs of financial exploitation.
- ☐ The federal definition includes exploitation "including financial exploitation." Do not confront the coworker or ask for the card back yourself.
- ☐ Write down what Alejandro showed you and said, the dates, and report as your agency and state require.

Nia: No one came overnight

Nia, 29, is supposed to have overnight staff. Twice this week the overnight person did not arrive, and the on-call line did not answer. Each time Nia was alone from late evening until morning, and she missed an evening medication.

- ☐ NAPSA lists a caregiver failing to arrive as scheduled as a sign of neglect, and the federal rule covers incidents that occur because services were not delivered.
- ☐ Check on Nia, get medical advice if she missed medication, and tell your supervisor and report as required.
- ☐ Write the dates, times, who was scheduled and who you tried to reach.

Ask for each scenario: What happened? (Facts only.) · What do we do in the first hour? · Who do we tell, and by when? · What do we write down?

Training sign-off record

Fill in one record per session, keep it with the recording, and keep it in each person's training file. Whether this counts toward a state's required hours is that state's rule.

Date of session	
Trainer's name	
Format (live group, screen shared, recorded)	
Where the recording is kept	
Next refresher due	

I confirm that:

I can name the types of abuse, neglect and exploitation.	☐
I know what to do in the first hour: safety first, report, do not investigate, keep what is there, write it down.	☐
I know who to tell at our agency, and who to tell if that person is involved.	☐
I know our state's line and I know where its number is posted.	☐
I know where our policy says staff who report in good faith are protected from retaliation.	☐
I took part in the scenario practice and asked any questions I had.	☐

Who took part

Name	Role and site	Signature	Date

Refreshers, sources and one next step

We did not find a federal rule that sets how often DSPs must repeat abuse and neglect training; the sources we read leave frequency to States and contracts. Check your state's rule in the state finder and your funder's contract. Our suggestion, to start from:

When	What
At hire, before working alone	The full 30-minute session, plus a walk through your own form and your state's line.
Every year	The 30-minute session again, with new scenarios and the current state numbers. Put the date on each person's sign-off record.
After an incident review	The joint report lists "additional provider and staff training" among the corrective actions a review can lead to. Do a short session on what the review found.
When a rule, form or number changes	Most federal incident management requirements begin for States on July 9, 2027 (our arithmetic), so check each year that your session still matches.

Where each part comes from

Sources read November 10 to 16, 2026 (eCFR text current as of November 12). The outline, scenarios, first-hour steps beyond those cited, refresher rhythm and sign-off record are Special Learning's; the quoted lines are as published. None of these organizations has reviewed or endorsed this outline. Texas and New York are examples only.

42 CFR 441.302(a)(6). Electronic Code of Federal Regulations, Title 42, section 441.302, State assurances: (a)(6), the State incident management system and its definition of critical incident; text current as of November 12, 2026. https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-C/part-441/subpart-G/section-441.302

42 CFR 441.464(e). Electronic Code of Federal Regulations, Title 42, section 441.464, State assurances for self-directed personal assistance services: (d)(2)(xiv) and (e); text current as of November 12, 2026. https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-C/part-441/subpart-J/section-441.464

HHS OIG, ACL and OCR joint report on group homes (2018). U.S. Department of Health and Human Services, Office of Inspector General, with the Administration for Community Living and the Office for Civil Rights, Joint Report: Ensuring Beneficiary Health and Safety in Group Homes Through State Implementation of Comprehensive Compliance Oversight (January 2018), with Appendix A, Model Practices for State Incident Management and Investigation. https://oig.hhs.gov/reports-and-publications/featured-topics/group-homes/group-homes-joint-report.pdf

NAPSA, Abuse. National Adult Protective Services Association (NAPSA), "Abuse," definitions, types and signs of physical, emotional and sexual abuse, and a checklist for when to report. https://www.napsa-now.org/abuse/

NAPSA, Neglect and self-neglect. National Adult Protective Services Association (NAPSA), "Neglect & Self-Neglect," types, signs, and what happens after a report. https://www.napsa-now.org/neglect-and-self-neglect/

NAPSA, Financial exploitation. National Adult Protective Services Association (NAPSA), "Financial Exploitation," definition, categories and signs. https://www.napsa-now.org/financial-exploitation/

NAPSA, Adult Protective Services. National Adult Protective Services Association (NAPSA), "Adult Protective Services," what APS does and its state-by-state reporting numbers at napsa-now.org/help-in-your-area/. https://www.napsa-now.org/adult-protective-services/

NADSP Code of Ethics. National Alliance for Direct Support Professionals (NADSP), The NADSP Code of Ethics (revised 2026), the Advocacy and Physical and Emotional Well-Being tenets, as published on nadsp.org. https://nadsp.org/resources/the-nadsp-code-of-ethics/

Texas Abuse Hotline website (DFPS), example only. Texas Department of Family and Protective Services, Texas Abuse Hotline website, when to call the hotline and when to report to HHS Complaint and Incident Intake; one state's example only. https://www.txabusehotline.org/Login/Default.aspx

New York Justice Center, Reporting an Incident, example only. New York State Justice Center for the Protection of People with Special Needs, "Reporting an Incident," the Vulnerable Persons Central Register hotline and the mandated reporting timeline; one state's example only. https://www.justicecenter.ny.gov/reporting

New York Justice Center, Mandated Reporters, example only. New York State Justice Center for the Protection of People with Special Needs, "Mandated Reporters," who must report and what is reportable; one state's example only. https://www.justicecenter.ny.gov/mandated-reporters

One next step

If your staff support autistic people, the Level 1 ABA Online Training Course for groups introduces autism and behavior-support foundations. $99 per learner · One-time purchase · Each learner has 12 weeks of access from the day they activate their code · Free 7-day trial of the first 2 sessions.

Related free tools: Find your state's DSP training rule · DSP incident report template · DSP daily notes template · Staff training sign-in sheet · DSP training and HR toolkit · NADSP Code of Ethics onboarding guide