## **DEPARTMENT OF SOCIAL SERVICES**

744 P Street, Sacramento, California 95814



ALL-COUNTY LETTER NO: 00-44

TO: ALL COUNTY WELFARE DIRECTORS
ADULT PROTECTIVE SERVICES (APS)
PROGRAM MANAGERS
MANDATED REPORTING AGENCIES



REASON FOR THIS TRANSMITTAL
[X] State Law Change
[] Federal Law or Regulation
Change  [ ] Court Order or Settlement
Agreement
[ ] Clarification Requested
by One or More Counties
[X] Initiated by CDSS

SUBJECT: REVISED REPORT FORM FOR SUSPECTED DEPENDENT ADULT/ELDER ABUSE (SOC 341)

This All-County Letter informs counties and mandated reporters about the revised Report of Suspected Dependent Adult/Elder Abuse form, also referred to as the SOC 341. The attached camera-ready copy of the SOC 341, dated 6/00, with reporting instructions is a revision of the current SOC 341, dated 4/90. The California Department of Social Services has adopted this form in consultation with members of the County Welfare Directors Association, other State departments, various medical and nursing agencies, hospital associations, and law enforcement agencies.

The provisions of Senate Bill 2199 (Chapter 946, Statutes of 1998) necessitated the changes to the SOC 341. Also, several changes were made by the California Department of Social Services to accommodate the needs of County Welfare Departments, mandated reporters and other government agencies. The two significant revisions are due to the expanded definition of a mandated reporter and the definition of abuse.

- Mandated reporters are required to complete the SOC 341 for each report of a known or suspected instance of abuse involving an elder or dependent adult. The definition of a mandated reporter has been expanded to include:
  - Any person who has assumed full or intermittent responsibility for care or custody of an elder or dependent adult, whether or not that person receives compensation, including administrators, supervisors, and any licensed staff of a public or private facility that provides care or services for elder or dependent adults or any elder or dependent adult care custodian, health practitioner, or employee of a county adult protective services agency or a local law enforcement agency.
- 2) The definition of abuse has been expanded to include:

• Physical (including sexual) abuse, abandonment, isolation, abduction, financial abuse and neglect (including self-neglect).

In addition, the general instructions have been modified and include the following changes:

- The general instructions will no longer appear on the back of the form but will serve as the cover for the SOC 341.
- The headings for the general instructions have been renamed (e.g. WHAT TO REPORT, EXCEPTIONS TO REPORTING, DISTRIBUTION OF (SOC 341) FORM/COPIES) to aid the mandated reporter and receiving agency in completing this form.

The revised SOC 341, dated 6/00, will continue to be printed in triplicate so that one or more of the copies may be used for cross-reporting to other agencies when required. The form is expected to be available in quantity from the California Department of Social Services Warehouse in July 2000. County agencies may order this form by completing the County Form GEN 727B. The request must be mailed or faxed to the address or fax number shown below. For all other mandated reporting agencies (e.g. law enforcement, hospitals) requesting this form, please submit your written request, along with your return mailing address by facsimile or mail to:

California Department of Social Services Warehouse Post Office Box 980788 West Sacramento, CA 95798-0788 Telephone: (916) 371-1974

Fax: (916) 371-3518

Use of the current version of this form (4/90) should be discontinued upon receiving the revised forms. If you have any questions concerning the revised SOC 341, please contact the Adult Protective Services Bureau, at (916) 229-0323.

Sincerely,

Original Document Signed By Leonard L. Tozier For Donna L. Mandelstam On 7/10/00

DONNA L. MANDELSTAM
Deputy Director
Disability and Adult Programs Division

Attachments

Report of Suspected Dependent Adult/Elder/Abuse (SOC 341)