

[February 11, 2026](#)

[The Honorable Carol McEntee](#)
[Chair, House Committee on Judiciary](#)
[State House](#)
[82 Smith Street](#)
[Providence, RI 02903](#)

[RE: Opposition to H7488, February 11, 20226 House Judiciary Hearing](#)

[Dear Chairwoman McEntee:](#)

In an assisted living environment, abuse reporting encompasses not only staff-to-resident interactions, but also incidents involving resident-to-resident behavior. It is within this context that the concepts of “intent” and “willful conduct” are both essential and appropriate. Eliminating these terms would fundamentally undermine reasonable judgment and practical application of abuse reporting requirements.

With respect to intent, it is critical to recognize that many assisted living residents, particularly those living with dementia or other cognitive impairments, may lack the capacity to form intent. Before an incident is reported to law enforcement, the Rhode Island Department of Health, or the Long-Term Care Ombudsman, providers must be allowed to assess whether a resident had the cognitive ability to intentionally or willfully engage in abusive behavior. For example, routinely reporting allegations of “theft” or missing personal items involving residents with dementia, who may be unable to understand ownership or recall possession, would unnecessarily burden staff, police, and regulatory agencies without improving resident safety or outcomes.

The concept of willful conduct is equally critical when evaluating potential neglect. Removing the requirement of willfulness would effectively classify any staff error, omission, or inadvertent mistake, regardless of severity, context, or outcome, as a reportable offense. Such an approach is unreasonable and punitive, exposing well-intentioned caregivers to regulatory action that could jeopardize their professional licenses and livelihoods for isolated, non-malicious oversights. This standard fails to reflect the realities of healthcare delivery and does not promote meaningful accountability or quality improvement.

Eliminating the terms “willful” and “intent” would dramatically expand the scope of reportable incidents, potentially resulting in hundreds, or even thousands, of additional reports that lack merit, validation, or public safety value. This expansion would divert limited resources away from genuine cases of abuse or neglect, while placing additional strain on an already overburdened long-term care workforce.

Moreover, removing these terms creates a presumption of abuse before any meaningful assessment has occurred. This presumption is unfair to providers, demoralizing to staff, and counterproductive to fostering a culture of transparency and appropriate reporting. It risks encouraging defensive practices rather than thoughtful, resident-centered care.

Assisted living providers already work diligently to assess each resident’s individual needs and risks, ensuring both their safety and the safety of others, regardless of cognitive status. Existing statutory protections, regulatory oversight, and established industry policies and procedures provide substantial safeguards to prevent and address elder abuse and neglect. These systems function effectively when paired with reasonable standards that allow for professional judgment.

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For these reasons, the retention of the terms “willful” and “intent” is essential. Their removal would not enhance resident protections, but instead would erode fairness, overwhelm reporting systems, cause severe disruption in an already strained workforce, and place unnecessary burdens on providers and caregivers who are committed to delivering safe, compassionate, and responsible care.

Thank you,

A handwritten signature in black ink, appearing to read "M Mangasarian". The signature is fluid and cursive, with a prominent initial "M".

Michael Mangasarian
Executive Director