

Supporting People with IDD

Recognizing and Reporting Unusual Incidents
and Major Unusual Incidents

May 25, 2023

On behalf of the Department, we would like
to acknowledge your dedication and service.

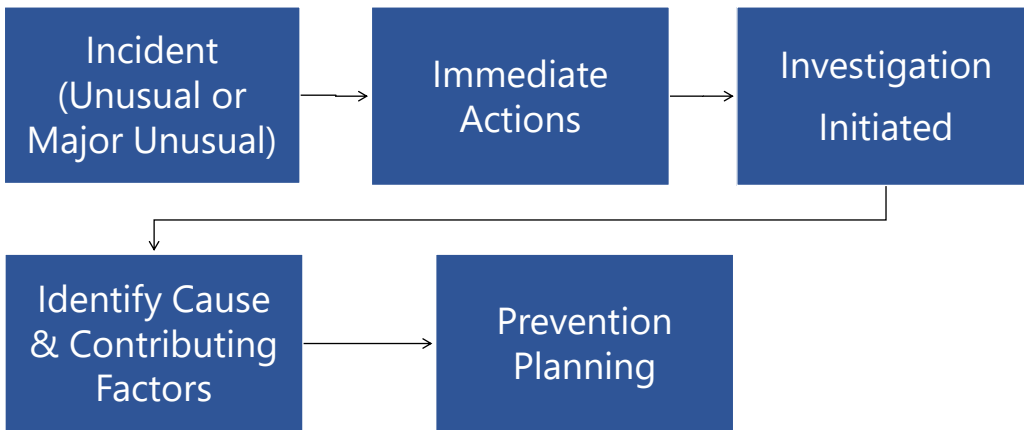
The Reality

- People with cognitive disabilities were four times more likely to be victims of violent crime than the general population.
- Nearly 1 in 5 violent crime victims with a disability believed that they became a victim because of their disability.
- One in three adults with an intellectual disability suffer sexual abuse in adulthood.
- Children with any kind of disability are more than twice as likely as nondisabled children to be physically abused and almost twice as likely to be sexually abused.

The Reality in Ohio

- Neglect allegations increased by 12% (148) during the calendar year 2022.
- Money continues to be the most misappropriated item accounting for 42% of all Misappropriation MUIs in 2022. There was a noted trend in the theft of food assistance benefits during the past year.
- People are being exploited more online through Romance scams, Blackmail, and theft of funds by unknown perpetrators. Often the person is out hundreds to thousands of dollars.

Quality Improvement Process



What is an Unusual Incidents (UI)?

"Unusual incident" means an event or occurrence involving an individual that is not consistent with routine operations, policies and procedures, or the individual's care or service plan, but is not a major unusual incident. Unusual Incident includes but is not limited to;

- Dental injuries;
- Falls;
- Injury that is not a significant injury;
- Medication errors without a likely risk to health and welfare;
- Overnight relocation due to fire.

What is an Unusual Incident (UI)?

- Natural Disaster
- Mechanical Failure
- Incident involving two individuals served that is not a Peer-to-Peer act that
- is not a major unusual incident;
- Rights code violations
- Unapproved behavioral support without a likely risk to health and welfare.
- Emergency room or urgent care treatment
- Program implementation incidents



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Role of the Provider in UI Process

Independent Provider:

- Immediate Actions.
- Write an incident report.
- Notifications-guardian and send incident report to SSA (designee) the first working day following the day the incident was discovered. Other providers when necessary.
- Identify causes and contributing factors.
- Collaborate on the development of prevention plan and implement.
- Complete UI log monthly and review for patterns and trends-corrective actions for trends.
- Send UI logs to county board upon request (random sampling).
- Work with team to ensure that risks associated with UIs are addressed in the plan.

Agency Provider:

- Immediate Actions.
- Write an incident report.
- Notifications-guardian and others per plan. Notify other providers when necessary.
- Identify causes and contributing factors.
- Investigate (send CB upon request).
- Collaborate on the development of prevention plan and implement.
- Complete UI log monthly and review for patterns and trends-corrective actions for trends.
- Send UI logs to county board upon request (random sampling).
- Work with team to ensure that risks associated with UIs are addressed in the plan.



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What is a Major Unusual Incident (MUI)?

- MUI means the alleged, suspected, or actual occurrence of an incident when there is reason to believe the incident has occurred.
- There are 19 categories.
- These are administrative investigations.

Immediate Actions Come First (UI and MUIs)

Check for Injuries and document	Call 911	Initiate First Aid and CPR	Contact the Doctor, Psychiatrist, Neurologist, Wound Clinic	Secure Money, Meds and Property
Make sure the person has food, meds, etc.	Contact Police and CSB	Fix Adaptive Equipment	Call Poison Control	Request an assessment (Nursing, Swallowing, Med, PT, OT, Speech)
Request emergency approval for protective/restrictive measures through HRC, if warranted	Emergency Removal of person	Retrain staff	Repair locks and alarms	Removal of staff for allegations of physical and sexual abuse

MUI Categories by protocols

Appendix A: Accidental or Suspicious Death, Exploitation, Failure To Report, Misappropriation, Neglect, Physical Abuse, Prohibited Sexual Relations, Rights Code, Sexual Abuse and Verbal Abuse

Appendix B: Attempted Suicide, Death other than an accidental or suspicious, Medical Emergency, Missing Individual, Peer to Peer Act, and Significant Injury.

Appendix C: Law Enforcement, Unanticipated Hospitalizations, and Unapproved Behavioral Supports.

Incident Reporting

- After the person(s) are safe, notifications are made...complete your incident report.
- This is one of the most important documents in incident prevention.
- Take your time, be detailed (include descriptions and measurements if possible) and be clear about what happened before, during and after the incident.
- Submit written Incident Report by 3:00 p.m. the Next Working Day
- Notify Law Enforcement of Criminal Act
- Notify Children's Services for abuse and neglect under the age of 21

Reporting Requirements for MUIs

Contact the county board immediately or within 4 Hour for these types of MUIs

Accidental/Suspicious Death	Exploitation	Misappropriation	Neglect	Media Inquires about a MUI
Peer to Peer Act	Physical Abuse	Prohibited Sexual Relations	Sexual Abuse	Verbal Abuse

For these and all other MUI types, you must complete an incident report and submit it to the county board by 3 p.m. on the first working day following the day the provider becomes aware of a potential or determined major unusual incident.

Purpose of MUI investigations

1. Focus on outcomes
2. Identify root cause and other contributing factors to aid in the development of a prevention plan.
3. Prevention plan that addresses:
 - How can we decrease the chances of this incident occurring again?
 - How can we prevent injury for all involved?
 - Improve outcomes for individuals served



Investigations

- IAs are trained and certified, in accordance with the requirements listed in ORC §5126.221 and have expertise and knowledge regarding the service system and working with individuals with disabilities.
- IAs conduct interviews, photograph the scene of the incident, review documentation, and identify causes and contributing factors relevant to the allegation.
- Investigation protocols for each type of MUI is outlined in Appendix A-C

Role of the DSP and Providers in MUIs

- Listen, observe and advocate. You know the people you support best!
- Always address medical concerns timely.
- Report.
- Immediate Actions, including removal of employee for alleged sexual and physical abuse.
- Cooperating with investigation. Provide needed information for the investigation in a timely manner.
- Work with the Team on prevention plan.
- Address risks in ISP.
- Annual Review of MUIs.

Reasons why people haven't reported

1. There were no other witnesses.
2. I don't want that person to get in trouble.
3. The individual doesn't tell the truth.
4. Everyone knows that's how that staff "acts".
5. I am afraid for my safety.
6. Everyone will hate me.
7. The family will be mad.
8. What's the point, management never does anything about it.
9. I didn't witness it, so I don't want to report it.
10. The individual said something that I don't think could have happened.
11. I know that staff person and they would never do anything like that.
12. I am not a nurse...



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"In order to empathize with someone's experience, you must be willing to believe them as they see it, and not how you imagine their experience to be".

Brené Brown



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Listen to Cassandra Benning-Lewis, Senior DSP, Toward Independence, OADSP DSP council member discuss the importance of reporting

<https://www.youtube.com/watch?v=BBjXBgAl9I>



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MUI Cases Examples

- An individual had a seizure disorder and is placed in a warm bath and is left alone while DSP goes out to take a call. The person's plan says they should be supervised while in the tub.
- The person's sister gets a cell phone with the individual's identification and then runs up the bill with personal calls, without their knowledge.
- A person reported that their bus driver kisses her on the mouth and touches her breasts. She has asked him not to and does it anyway.
- Staff throws cold water on an individual when they refuse to get out of bed for work.



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MUI Cases Examples

- A person has documented wounds (bed sores) and is under the care of a physician. A nurse is scheduled to monitor and treat the wounds daily. The assigned nurse does not check the person's wounds for over a week and person ends up being hospitalized due to severe infection.
- An individual goes to use their EBT card, and it says there are no funds available. They should have \$214 available for use.
- A DSP is witnessed dragging someone by their ankles 5 feet down the carpeted hall. The person is then shoved into their room and heard crying.

What Abuse and Neglect Looks Like-Caution

Cellphone video captures disabled man beaten as he cowers against wall

<https://www.tennessean.com/story/news/2014/02/26/cellphone-video-captures-disabled-man-beaten-as-he-cowers-against-wall-/5827293/>

3 people charged with abuse, neglect of disabled woman from New Mexico

<https://www.ktsm.com/news/3-people-charged-with-abuse-neglect-of-disabled-woman-from-new-mexico/>

NPR Series: Abused and Betrayed

<https://www.npr.org/series/575502633/abused-and-betrayed>

Know the signs of abuse

- Ongoing unexplained health problems like stomach aches and headaches
- Withdrawal from previously enjoyable activities, places, or persons, suddenly avoiding places or people
- Changes in sleep patterns such as nightmares, trouble sleeping, sudden bedwetting, and other sleep problems
- Dressing in layers of clothing
- Changes in appetite, loss of appetite, weight gain or loss
- Bruising
- Bleeding, soreness, redness, irritation, itching, and unusual discharges
- Torn or stained underwear or linens

Know the signs of abuse

- Sexually transmitted diseases
- New sexual knowledge or sexual behavior
- Sudden difficulty walking or sitting
- Suddenly frightened or certain people or situations

Know the signs of neglect

- Unaddressed weight loss
- Untreated wounds
- Medications not given
- Not taken to doctor

Things to consider

- Start by believing the person.
- Your job is to make sure people are safe and report.
- If you are afraid, just think how the person feels.
- You don't have to believe or witness something to report it.
- You may be the only person who advocates for that person.
- Chances are the person that you are supporting has been abused at least once in their lifetime, if not more.
- All of us have survived trauma and how we support a person, can make all the difference.
- You don't have to be a medical professional to notice a change in condition and get help.

Things to consider

- You don't have to be a medical professional to notice a change in condition and get help.
- Use your 5 senses to support and monitor someone's mental and physical wellbeing.



TASTE



HEARING



SMELL



TOUCH



VISION

Using your senses to support and monitor

Seeing

- Your initial contact when you walk into the individual's home
- Location of the Individual – Living Room/Bedroom/Basement
- Environment Cleanliness
- Natural Support Available and Interactive
- Supplies/Adaptive Equipment/Home Modifications – Need, Need Repair, Need Replacement, Have/Using properly
- Individual – Cleanliness of the individual, dressed appropriately, skin color (flushed/pale/jaundiced), Breathing – regular or with increased effort, Signs of dehydration, Nutritional status, Unusual bruising or skin discolorations, broken skin.

Using your senses to support and monitor

Seeing

- Height and weight
- Posture in bed or chair/wheelchair. If ambulatory – observe if individual is steady or unsteady
- Hygiene – hair/body/oral
- Dress – appropriate for age, weather, culture and socioeconomic status
- Attitude of the individual and/or family
- Ask about what you see
- Pay close attention to the little details and make notes (mental or physical)

Using your senses to support and monitor

Touching

- When touch is experienced as being caring and supportive, it can help to break down barriers to communication.
- What can be discovered by just touching someone's hand/arm.
- Is the skin cool, hot, clammy, dry, rough? Is the skin-like tissue paper? Skin texture? Do you feel tremors? Are the fingernails normal?
- While providing support, you can take note of the temperature, texture, irregularities in color, presence of edema, or the presence of lesions.

Using your senses to support and monitor

Smelling

- Most wounds have some type of an odor; caregivers should note how far away they are when they smell the odor and under what conditions; for example, an arm's length away, after positioning the patient, or when the old dressing is removed.
- Wound smells can be compared to
 - a rusty smell like blood;
 - a smell almost like a dead animal, which indicates dying flesh; or
 - a musty smell, which indicates the presence of bacteria in the wound.
 The rusty smell is the best smell when it comes to wounds

Using your senses to support and monitor

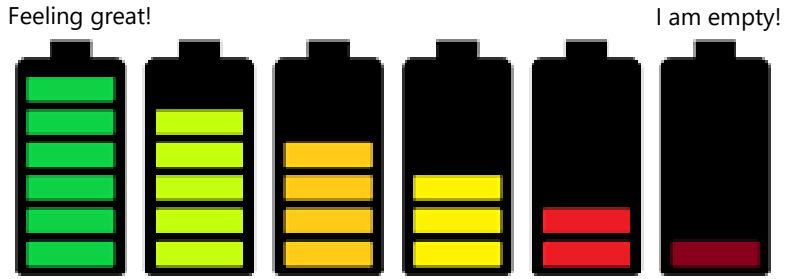
Listening

- Talk with the individual/family about what is working, any unmet needs
- Talk with provider(s) to get updated information related to diagnoses, physician updates and participation
- There are times in which you might be the only potential of hope for the individual and his/her living situation.

What can you do?

- Get the individual help right away (medical, emotional, financial).
- Help the person feel safe, set judgements aside.
- Remember to NOT imply blame on the victim.
- Ask questions like "were you able to?" Instead of "why didn't you?" when talking to the individual.
- Emotionally support the victim.
- Remember to refer the individual for counseling and victim's assistance as appropriate.
- Provide Trauma Informed Care (TIC)
- Take care of yourself!

Check your self-care battery

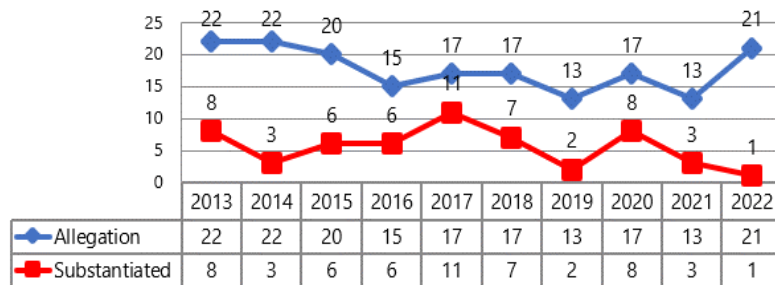


Where do you think most abuse, neglect and power struggles generally occur?

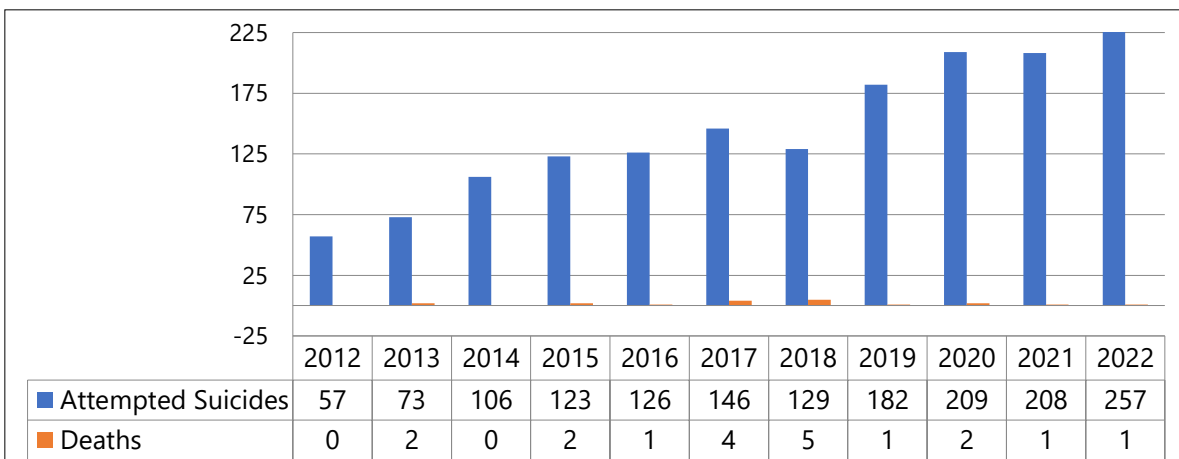


Prohibited Sexual Relations

- Developmental Disabilities employee
- Consensual sexual conduct or contact
- With an individual who is not their spouse
- Employed or under contract to provide care to the individual at the time of the incident
- Anyone in the Developmental Disabilities employee’s supervisory chain of command



Suicide Prevention



Mental Health and Wellness

- The mental wellness of the people that you support is so important and so is yours!
- Always take every threat and attempt seriously.
- Get help for yourself or others.
- Suicide Prevention 1-800-273-TALK



5 Action Steps for Helping Someone in Emotional Pain



ASK

“Are you thinking about killing yourself?”



KEEP THEM SAFE

Reduce access to lethal items or places.



BE THERE

Listen carefully and acknowledge their feelings.



HELP THEM CONNECT

Call or text the 988 Suicide & Crisis Lifeline number (988).



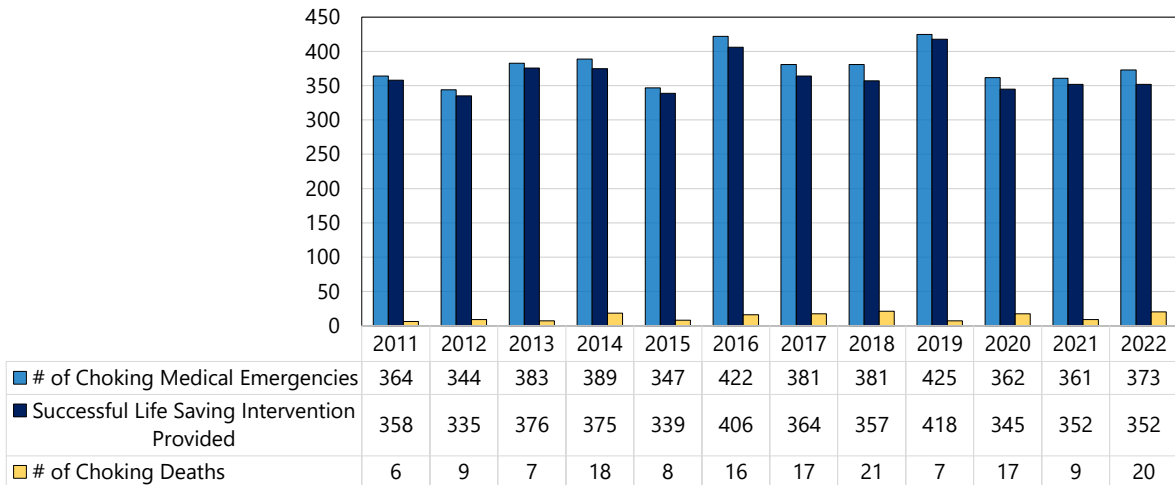
STAY CONNECTED

Follow up and stay in touch after a crisis.



nimh.nih.gov/suicideprevention

Choking Incidents 2011-2022



Your Role in Choking Prevention

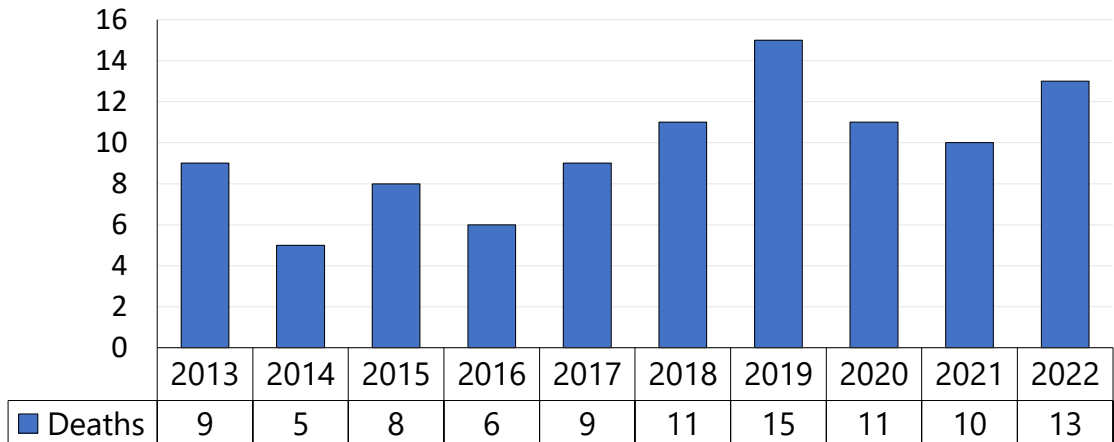
- Know the person you are supporting. Be an expert!
- Identify risks and assess
- Speak in in ISP meetings and make sure plans address assessed needs for choking
- Communicate to all team members any concerns
- Provide needed supports (supervision, diet texture, prompting)
- Be an advocate
- No one is perfect, even doctors. If you have concerns, voice them.
- Ask questions and get information.

Fall Related Significant Injuries

Year	Falls Reported as Significant Injuries	Total Significant Injuries Reported	% Fall Related Injuries
2013	764	1755	44%
2014	771	1691	46%
2015	734	1619	45%
2016	730	1553	47%
2017	691	1505	46%
2018	721	1474	49%
2019	887	1803	49%
2020	737	1418	52%
2021	774	1516	50%
2022	903	1834	49%

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Fall Related Deaths



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Fall Prevention

- OT/PT Assessments
- Medication Review
- Vision Check
- Environmental Checks
- Alerts
- Social Media
- Online Health and Welfare Alert Training Module.
- Strength Training
- Footwear and clothing checks
- Adaptive Equipment
- Training on Individual Service Plan Supports.
- Partnered with the Ohio Department of Aging-Steady U.
- Changed Investigation Protocols to include Fall related requirements.

Resources

County Board Contacts, including after hours reporting lines

<https://dodd.ohio.gov/your-family/all-family-resources/4-find-your-county-board>

Health and Welfare Toolkit

<https://dodd.ohio.gov/health-and-welfare/welcome>

Health and Welfare Alerts

<https://dodd.ohio.gov/health-and-welfare/health-and-welfare-alerts>

Ohio Incident Tracking and Monitoring System (OITMS)

<https://dodd.ohio.gov/about-us/dodd-apps/incident-tracking-system>

Coming Soon –Training for providers on using OITMS and Reports

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Abuse and Neglect
Hotline (800)617-6733
Option 1

DODD MUI Office
614-995-3810

www.dodd.ohio.gov