






HOW MANY OF YOU ARE...

- Direct support staff
- Individual receiving services
- Management
- Family member

How many of you have...

- Witnessed an abuse incident (ANI)?
- Reported an abuse incident (ANI)?
- Been interviewed by DHI/IMB?

Common feelings and reactions to trauma



Vicarious Trauma

- "Compassion fatigue"
- Personal experience with abuse, PTSD
 - Triggers
- NOT the same as burnout
- How can we protect ourselves?

COURSE AGENDA: What you will learn

- What competency in ANI means
 - What would it mean to be "competent" in this subject?
- Prevalence of ANI in individuals with I/DD
- Current rule and requirements for reporting
- ANI Definitions

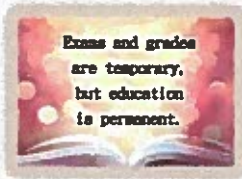
COURSE AGENDA, cont'd

- How to recognize the "warning signs" (indicators)
- How to keep people safe when ANI is suspected
- Immediate Action and Safety Plans
- How to report via the DHH/IMB hotline and fill out the ANI Report Form

Course Agenda, cont'd

- Who you are required to notify
- What New Mexico Administrative Code (NMAC) requires for providers
- How the Incident Management Bureau (IMB) conducts investigations, including the provider's role

You'll know all that by the time you take the post-test!



What is a competency-based course?

- Pre-test
 - * Does not count against your final score
- Post-test (same content)
- 90% or above

Don't panic!



All material will be covered.

PRE-TEST

- 15 minutes
- What you know **now**
- It helps you understand the areas that you will be tested in at the end of the course
 - Same content as the post test



When You Say
"RETARD"
Some-one
HURTS.

PREVALENCE OF ANE AGAINST PEOPLE WITH INTELLECTUAL/DEVELOPMENTAL DISABILITIES

- WHO IS AT RISK FOR ANE?
- Why?
 - Compliant behavior is taught
 - Limited communication skills
 - Fear
 - Other reasons?

2012 National Survey on Abuse Against People with Disabilities Findings

Spectrum Institute National Disability and Abuse Project

(The term 'Abuse' here refers to ANE)

- 2/3 of all people with intellectual/developmental disabilities have been victims of abuse, neglect and/or exploitation
- 8 out of 10 of these people were verbally/emotionally abused
- More than half were physically abused
- Over a third were sexually abused more than once
- 9 out of 10 who were abused were abused multiple times in multiple ways
- **Only one third reported it**

NEW MEXICO SFY '15 IMB DATA

TOTAL DE-WAIVER AND MIXED USE DIRECT/DWAVEY R POPULATION	8,950
TOTAL REPORTS RECEIVED BY IMB	2,060
TOTAL REPORTS ASSIGNED FOR INVESTIGATION	1,452
NUMBER OF ALLEGATIONS SUBSTANTIATED	592
NUMBER OF CONSUMERS REPORTED TO BE VICTIMS OF ANE	642
NUMBER OF CONSUMERS DETERMINED TO HAVE BEEN ABUSED	434
NUMBER OF CONSUMERS WHO WERE RE-ABUSED IN A YEAR	97
SFY 15 STATE-WIDE ABUSE RATE	11.9%
RE-ABUSE RATE	16.3%

Something to consider...

- Abuse reporting in New Mexico and across the nation is under reported
 - *And by how much!*
- What does that mean for us as service providers?

Reasons for not reporting*

- 58% believed that nothing would happen
- 38% had been threatened or were afraid
- 33% did not know how or where to report
- *Nearly half did not even recognize they were experiencing abuse because it was such a common occurrence in their lives*

*Source: 2012 National Survey on Abuse Against People with Disabilities

SOME ADDITIONAL READING

- 2013 Department of Justice, Bureau of Justice Statistics. "Crimes Against Persons with Disabilities" (2009-2013)
- Incident Management Bureau's annual report
 - <http://www.health.org/publications/news/0907/> (SFY 15)

Let's Bring it Closer to Home



REPORTING REQUIREMENTS

- Definitions were revised in 2014
- Abuse includes both verbal and sexual abuse
- Neglect includes action that caused harm or is likely to cause harm
- Immediate reporting to DHH/IMB's hotline

Current reporting requirements, cont'd

- Required to document the actions to keep people safe (and share with IMB)
- You do **NOT** need to report **every** use of law enforcement or emergency services to IMB
- IMB investigates allegations involving Mi Via participants
- Roles and responsibilities of provider agencies – what you are responsible for
- IMB investigates people in trust relationships with the individuals

Who is protected by NMAC 7.1.14?

- Individuals within the Developmental Disabilities Waiver program (DDW)
- Individuals within the Medically Fragile Waiver
- Individuals within Mi Via Self-Directed Waiver
- Licensed facilities (ICF/IID)
 - *Follow class members only*

10 minute break



NMAC 7.1.14

IMPORTANT

7-10-15
NMAC 7.1.14
The purpose of this rule is to ensure that all individuals who are eligible for the DDW program are provided with the opportunity to participate in the program. This rule applies to all individuals who are eligible for the DDW program, regardless of their age or the type of waiver they are receiving. The rule requires that all eligible individuals be provided with the opportunity to participate in the program, and that the program be designed to meet the needs of all eligible individuals. The rule also requires that the program be designed to provide the maximum benefit to all eligible individuals, and that the program be designed to be cost-effective. The rule is intended to ensure that all eligible individuals are provided with the opportunity to participate in the program, and that the program be designed to meet the needs of all eligible individuals. The rule also requires that the program be designed to provide the maximum benefit to all eligible individuals, and that the program be designed to be cost-effective.

ABUSE

- 1. "Knowingly, intentionally and without justifiable cause inflicting physical pain, injury, or mental anguish,"
- And/Or...

Abuse

- 2. "The intentional deprivation by a caretaker or other person of services necessary to maintain the mental and physical health of a person;"
- Or...

Abuse

- 3. "Sexual abuse, including criminal sexual contact, incest, and criminal sexual penetration;"


A scenario to consider – Family Living Provider



Sexual Abuse

- "...inappropriate touching of a recipient of care or services for sexual purpose or in a sexual manner and includes:
 - Kissing
 - Touching the genitals, buttocks or breasts
 - Causing the recipient of care or services to touch another for sexual purpose.
 - Or promoting or observing for sexual purpose any activity or performance involving play, photography, filming, or depiction of acts considered pornographic."

A scenario to consider – Supported Living...



Sexual abuse, cont'd

- "Sexual conduct engaged in by an employee with a person for whom they are providing care or services is sexual abuse per se."

Verbal abuse

- "Profane, threatening, derogatory, or demeaning language spoken or conveyed with the intent to cause mental anguish."



A scenario to consider...



Neglect

- "Failure of the caretaker to provide basic needs of a person, such as clothing, food, shelter, supervision, and care for the physical or mental health of that person."
- Neglect causes, or is likely to cause, harm to a person.

A scenario to consider...



Exploitation

- "Unjust or improper use of a person's money or property for another person's profit or advantage, financial or otherwise."


A scenario to consider...




SUSPICIOUS INJURIES

Examples:

1. Any injury that is not consistent with the explanation given for it.
2. Recurring injuries happening to an individual regardless of care plan
3. Frequency, severity, location of injuries raise concerns.



Could these be suspicious injuries?



ENVIRONMENTAL HAZARDS

- "A condition in the physical environment which creates an immediate threat to health or safety of the individual."



Activity

- Teams and Rules!



DEATHS


- **All deaths must be reported to DHI/IMB**
- IMB intake screens the report, may assign for investigation
- What might IMB investigate?



Possible key warning signs of ANE...

- Change in behavior, sleep, eating patterns – out of the normal routine
- Self-harming, self-injurious behavior (increase)
- Nightmares, bed-wetting, crying
- ... what else might you notice?

Group Activity: Identifying ANE



A game for teams to test their knowledge!

REQUIRED IMMEDIATE REPORTING

- Who is responsible for reporting ANE?
- What does "immediate" mean?
- What does the law say?

PERSON OF TRUST

- DHH/EMB investigates people in "trust relationships" with the individual
- Who is a person of trust?
 - Some things to consider ...



Reports to IMB: SFY '15

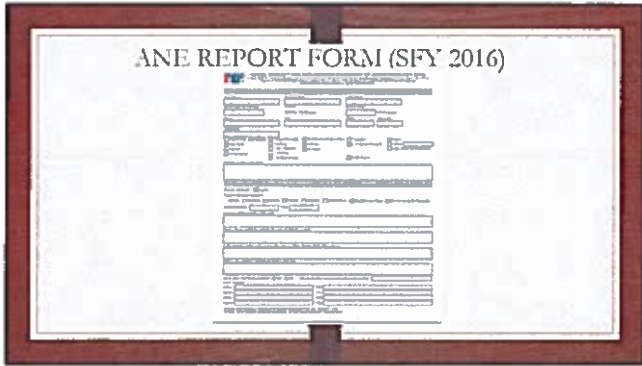
Region	Number of Consumers supported	Child abuse allegations	Neglect allegations	Exploitation allegations	Total allegations reported to IMB	Reports received per the IMB	Reports Assigned for Investigation
Metro	2356	362	655	110	908	257	651
Northeast	501	30	107	17	143	30	93
Northwest	364	43	126	19	185	44	141
Southeast	560	74	298	56	406	119	287
Southwest	859	91	321	40	418	138	280
Totals	4681	600	1507	232	2040	608	1432

Reporting ANE

- **First, call DHI/IMB's hotline: 1-800-445-6242**
 - Review: Who calls, and when?
- **Be prepared to describe what happened**
 - What?
 - What?
 - Where, when?
 - Is someone identified as responsible?
 - What did you do? What do you plan to do to help (people side)?

ANE REPORT FORM (SFY 2016)

- <https://ane.health.state.nm.us>
- Fax: 1-800-584-6057
- The most common questions people ask are:
 - Who completes this form?
 - Can you skip sections?
 - How long do you have to submit this form?







Safety intervention activity

- **"If _____ (ANE) is true, what should I do?"**
- **Identify:**
 - * 1 Who is at risk?
 - * 2 Who else might be at risk?
 - * 3 What actions will you take to ensure immediate safety?

IMMEDIATE ACTION AND SAFETY PLAN

- What is it?
- What do you need to include?



Immediate Action and Safety Plan


Department of Public Health
Community Assessment and Planning Office

1. Identify the hazard or potential hazard.
 2. Determine the location of the hazard.
 3. Determine the potential consequences of the hazard.
 4. Determine the potential exposure to the hazard.
 5. Determine the potential vulnerability of the population.
 6. Determine the potential for secondary hazards.
 7. Determine the potential for cumulative impacts.
 8. Determine the potential for synergistic effects.
 9. Determine the potential for chronic effects.
 10. Determine the potential for acute effects.

Hazard	Location	Potential Consequences

WHO DO YOU NOTIFY?

- Who are we required to notify?
- How much time do we have?
 - Never assume or hope that someone else will report!



- What if you're not the responsible provider at the time of the incident?


What are the reporting requirements for a report?

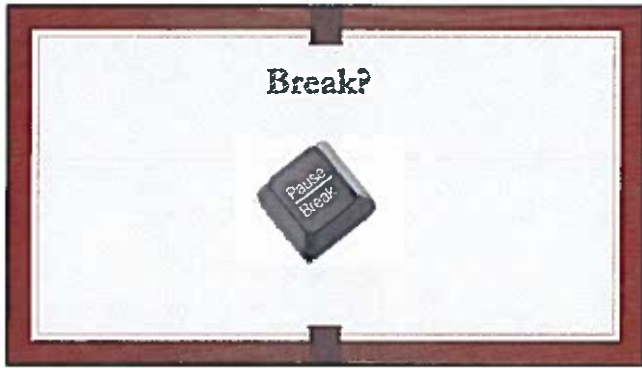


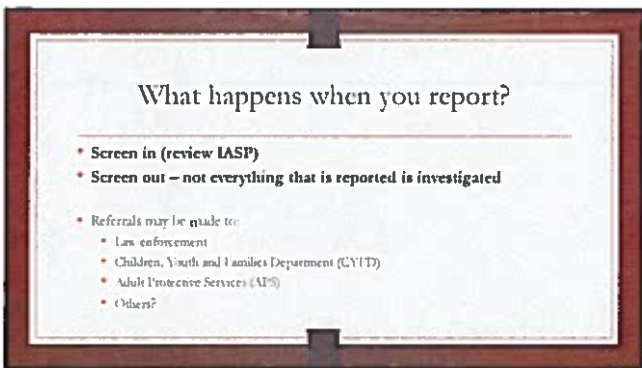
CONSEQUENCES FOR FAILING TO REPORT

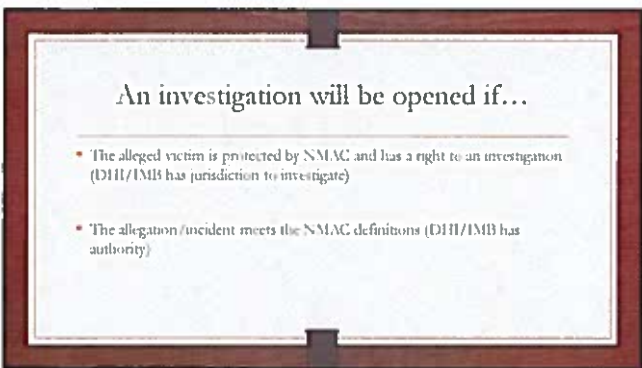
FAILURE TO FOLLOW NMIC PROVIDER REQUIREMENTS

- NMIC 7.1.14.11
- When is the agency likely to be held responsible?
- When is the employee likely to be held responsible?
- Reporting is **REQUIRED**
 - Sanctions may occur for failing to report!










What to expect from an investigation

When an investigator is assigned, they will review the IASP

- Interviews will occur
- Site visits, photos
- Relevant documents collected and reviewed
- 45 days to findings (determination)
 - Note: there may be extensions in certain circumstances




What to expect from an investigation, cont'd

- The evidence will be weighed, the preponderance standard
- A finding will be made: substantiated or unsubstantiated

Standards of Proof

- Preponderance of evidence (this is what DHH/IMB use)
- Beyond a reasonable doubt (criminal cases)



What about "Internal Investigations"?

- What are internal investigations?
 - NMAC 71148

NO INTERNAL INVESTIGATIONS

- ...beyond what is necessary to make an accurate report to DHH and keep people safe!
- DO...
 - Find out as much as possible to keep individuals safe
 - Take any required action for medical care or making sure the environment is safe
 - Preserve evidence (pictures if needed); set aside what may be needed for DHH
 - Obtain clarity from a reporter on circumstances, or for more detail to identify the actual person

Don't...

- Talk to everyone involved
- Talk to the consumer about details
- Remove or move (alter) evidence
 - Progress notes
 - Medication bottles, MARs

FOLLOWING THE INVESTIGATION: Notification of Investigation Results

DHI will notify in writing:

- The provider
- The guardian
- Alleged victim
- Case manager or consultant
- DDSD Regional Office
- The accused person



Informal Reconsideration of Findings (IRFs)

- You have the right to request reconsideration
- Must be made in writing **within 10 days of the date of the letter of substantiation**
- All requests addressed to IMB Bureau Chief
 - Department of Health, Division of Health Improvement, 5701 Central Ave NE (suite 400), Albuquerque 87108
 - Written decision will be issued within 30 days of the review
 - Decision is non-appealable except as provided for by law

What questions do you have?



What State Law Requires




- Three (3) state regulations that cover Incident Management
 - One is the basis of this training! (NMAC 7.1.14)
- The other two are:
 - CCHS (Caregivers Criminal History Screening)
 - EAR (Employee Abuse Registry)

CCHS (Caregivers Criminal History Screening)

- Requires ALL applicants, caregivers (including hospital caregivers) to consent to a nationwide and statewide screening
- No later than 20 calendar days from the 1st day of employment
- Disqualifying felony convictions – **cannot** be employed or contracted as a caregiver

EAR (Employee Abuse Registry)

- What is it?
- When do employers need to check the EAR?
- What happens if you are referred to this registry?



Important reminders

- Immediate reporting
- Limited provider investigation
- IASP (Immediate Action and Safety Plan)
- Preserve evidence
- Notifying guardian, case manager, consultant – 24 hours
- If you are not the responsible provider; notify them
- NO RETALIATION!

RETALIATION

- What is it?
- Zero tolerance for retaliation when reporting without false intent

Examples of retaliation

- Termination of contract or employment
- Discrimination or disciplined
 - Shift change
 - Pay cuts, reduced hours
 - ... what else?

CONFIDENTIALITY

- WHAT IS IT?
 - 7.1.1.1.1
- The incident, the alleged victim's name, the reporting witness, and documents related to the incident will remain confidential
 - Caveat: legal cases and subpoenas can affect this
- Anonymity vs. confidentiality

Who is ready for the competency exam?!



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POST-TEST

- Any last questions or clarification?
- Review your notes and highlighted sections of the rule we talked about