



OPWDD Incident Reporting

MFP Transition Specialist Training

Incident Reporting

- MFP Participants may inform you of incidents that have occurred.
- Family members/advocates/staff may inform you of incidents.
- Transition Specialists may observe incidents.
- QoL Survey asks questions which may prompt reporting.

Quality of Life Survey Questions

- You said that you have people who help you. Do the people who help you treat you the way you want them to?
- Do the people who help you listen carefully to what you ask them to do?
- Have you ever been physically hurt by any of the people who help you now?
 - What happened when the people who help you now physically hurt you?

QoL Survey Questions continued

- Are any of the people who help you now mean to you or do they yell at you?
- Have any of the people who help you now ever taken your money or things without asking first?

OPWDD vs. NHTD/TBI Waiver

- Similar definitions of what needs to be reported
- When in doubt report
- Will also do NHTD/TBI abuse training

OPWDD Regulations

- OPWDD Part 624 regulations outline process for reporting incidents.
- When meeting with individuals served by OPWDD, you must report incidents.
- QoL surveys ask questions about abuse/neglect the person experienced.

What to do if...

- If an individual reports abuse/neglect to you:
 - Report this to a manager at the agency.
 - Call the OPWDD Incident Management Unit (IMU) if you need further assistance.

Part 624 Reporting Requirements During Business Hours Notifications to OPWDD

- OPWDD provider agencies must report an incident during business hours, by contacting the OPWDD IMU Incident Compliance Officer, ICO, (found on the OPWDD website) assigned to that agency.
- If the provider agency cannot reach their assigned ICO, they can call the main Incident Management Unit at 518-473-7032 and someone will assist them.
- This is what the provider agency will do after you report the incident to them.

During Non-Business Hours - Telephone Notification

- During off hours, incidents must be reported by the provider agency via a toll free number that is posted on the OPWDD website- 1-888-479-6763.
- When technical assistance is needed with an incident during off hours, provider agencies may reach IMU by using the off hours number - 518-473-7032.

Justice Center Hotline

- The Justice Center operates a centralized, statewide, toll-free hotline and incident reporting system that receives and tracks allegations of abuse and neglect 24 hours a day, 7 days a week.
- Reports are made by service providers and other “mandated reporters” as well as by any individual who witnesses or suspects the abuse or neglect of a person with special needs.
- The Justice Center’s Vulnerable Persons Central Register (VPCR) number is 1-855-373-2122.
- Again, the provider agency will make this call as they are the “mandated reporters”.

Transition Specialist should:

- Recognize and stop all forms of abuse and neglect immediately.
- Protect the individual from further danger and harm, and seek medical attention if necessary.
- Report incidents to the provider agency as they occur or are discovered.
- Be available if an Investigator needs documentation from you.

TYPES OF ABUSE/NEGLECT

Physical Abuse

Conduct by a caregiver intentionally or recklessly causing, by physical contact, physical injury or serious or protracted impairment of the physical, mental or emotional condition of the individual receiving services, or causing the likelihood of such injury or impairment. Such conduct may include but shall not be limited to: slapping, hitting, kicking, biting, choking, smothering, shoving, dragging, throwing, punching, shaking, burning, cutting or the use of corporal punishment. Physical abuse shall not include reasonable emergency interventions necessary to protect the safety of any person.

Sexual Abuse

Any conduct by a caregiver that subjects a person receiving services to any offense defined in article 130 or section 255.25, 255.26 or 255.27 of the penal law, or any conduct or communication by such caregiver that allows, permits, uses or encourages a service recipient to engage in any act described in articles 230 or 263 of the penal law

Sexual Abuse

Any sexual contact between an individual receiving services and a caregiver of the program or facility which provides services to that individual whether or not the sexual contact would constitute a crime (see especially section 130.05(i) of the penal law). However, if the individual receiving services is married to the caregiver the sexual contact shall not be considered sexual abuse. Further, for purposes of this subparagraph only, a person with a developmental disability who is or was receiving services and is also an employee or volunteer of an agency shall not be considered a caregiver if he or she has sexual contact with another individual receiving services who is a consenting adult who has consented to such contact.

Psychological Abuse

Any verbal or nonverbal conduct that may cause significant emotional distress to an individual receiving services. Examples include, but are not limited to, taunts, derogatory comments or ridicule, intimidation, threats, or the display of a weapon or other object that could reasonably be perceived by an individual receiving services as a means for infliction of pain or injury, in a manner that constitutes a threat of physical pain or injury.

Deliberate Inappropriate Use of Restraints

The use of a restraint when the technique that is used, the amount of force that is used, or the situation in which the restraint is used is deliberately inconsistent with an individual's plan of services (e.g. individualized service plan (ISP) or a habilitation plan), or behavior support plan, generally accepted treatment practices and/or applicable federal or state laws, regulations or policies, except when the restraint is used as a reasonable emergency intervention to prevent imminent risk of harm to a person receiving services or to any other party. For purposes of this paragraph, a restraint shall include the use of any manual, pharmacological or mechanical measure or device to immobilize or limit the ability of a person receiving services to freely move his or her arms, legs or body.

Use of Aversive Conditioning

The application of a physical stimulus that is intended to induce pain or discomfort in order to modify or change the behavior of a person receiving services. Aversive conditioning may include, but is not limited to, the use of physical stimuli such as noxious odors, noxious tastes, blindfolds, the withholding of meals and the provision of substitute foods in an unpalatable form. The use of aversive conditioning is prohibited by OPWDD.

Obstruction of reports of reportable incidents

Conduct by a caregiver that impedes the discovery, reporting or investigation of the treatment of a service recipient by falsifying records related to the safety, treatment or supervision of an individual receiving services; actively persuading a caregiver or other mandated reporter from making a report of a reportable incident to the statewide vulnerable persons' central register (VPCR) or OPWDD with the intent to suppress the reporting of the investigation of such incident; intentionally making a false statement or intentionally withholding material information during an investigation into such a report; intentional failure of a supervisor or manager to act upon such a report in accordance with OPWDD regulations, policies or procedures; or, for a caregiver failing to report a reportable incident upon discovery.

Unlawful use or administration of a controlled substance

Any administration by a caregiver to a service recipient of: a controlled substance as defined by article thirty-three of the public health law, without a prescription; or other medication not approved for any use by the federal food and drug administration. It also shall include a caregiver unlawfully using or distributing a controlled substance as defined by article 33 of the public health law, at the workplace or while on duty.

Neglect

- any action, inaction or lack of attention that breaches a caregiver's duty and that results in or is likely to result in physical injury or serious or protracted impairment of the physical, mental or emotional condition of a service recipient. Neglect shall include, but is not limited to:

Neglect

- failure to provide proper supervision, including a lack of proper supervision that results in conduct between persons receiving services that would constitute abuse as described in paragraphs (1) through (7) of this subdivision if committed by a caregiver
- failure to provide adequate food, clothing, shelter, medical, dental, optometric or surgical care, consistent with Parts 633, 635, and 686 of this Title (and 42 CFR Part 483, applicable to Intermediate Care Facilities), and provided that the agency has reasonable access to the provision of such services and that necessary consents to any such medical, dental, optometric or surgical treatment have been sought and obtained from the appropriate parties

Neglect

- failure to provide access to educational instruction, by a caregiver with a duty to ensure that an individual receives access to such instruction in accordance with the provisions of part one of article 65 of the education law and/or the individual's individualized education program.

SUMMARY: When in Doubt Report

- First make sure person is safe.
- Report to Residence Manager or person in charge of facility where you are.
- If this individual is the subject of allegation of abuse/neglect or if unsure to whom to report contact agency administration or NYAIL for guidance.
- Be available if an Investigator needs documentation from you.

More Information

- Full 624 Regulations can be found at

<http://www.opwdd.ny.gov/node/780>

Any Questions?