



Department of Quality Assurance/Corporate Compliance:

INCIDENT/ABUSE IDENTIFICATION, REPORTING, AND PROCESSING

NYS 14NYCRR PART 624 /PART 625 REGULATIONS

NYS SOCIAL SERVICES LAW Article 11 (PROTECTION OF PEOPLE WITH SPECIAL NEEDS)

2019

PROMOTING POSITIVE RELATIONSHIPS

ISS adopts OPWDD's guiding principle of “**putting people with developmental disabilities first**”, which focuses on positive relationships and interactions, and an organizational culture where abuse is not tolerated.

*When ISS staff provide care to a person, they are in the position of creating, developing, and sustaining genuine **caring relationships**. These relationships have an impact on how needed services are delivered and on the quality of the lives of the people we serve.*

*ISS believes in “**person first language**” which is used to identify the person as a person, a human being in every way. When we focus on the diagnosis, disability or on a characteristic of a person, the human being is moved into the background and becomes somewhat dehumanized. We focus on promoting each person's individuality, desires, and goal of leading an independent life.*

Part 624 is a regulation designed to protect people receiving OPWDD services. It is the intent of Part 624 to require an incident management system, including the reporting, investigation, review, correction, and monitoring of certain events or situations, in order to protect people receiving services (to the extent possible) from harm; ensure that program participants are free from abuse and neglect; and to enhance the quality of their services and care. It is the responsibility of all ISS employees to (1) Recognize and stop all forms of abuse immediately, (2) Protect the person from further danger or harm, seeking medical attention if necessary, and (3) Report incidents as soon as they occur or are discovered. This training has been developed to help ISS employees to understand their responsibilities in protecting the people we serve from harm and to complete required reporting procedures.

As a result of these regulations, ISS must do the following:

- *Ensure that staff **report** incidents to ISS, OPWDD, the Justice Center (as applicable), etc.;*
- *Give **immediate care and protection** and protect the dignity of people with developmental disabilities involved in an incident;*
- ***Investigate** why incidents occur and take steps to prevent a similar incident from happening again;*
- ***Establish an Incident Review Committee** to review specific incidents and examine trends; and*
- *Develop procedures and **provide staff training to prevent** similar incidents in the future.*

Part 624 applies to all services in the OPWDD system and therefore applies to ISS. Although Part 624 applies only to incidents that occur “under the auspices of the agency” meaning they happen during the provision of Self-Directed services to a Program Participant involving the Self-Direction support staff.

Part 625 applies to incidents that occur that are “not under the auspices of the agency” such as incidents that may occur while the person is in a hospital setting, a school, a day program, etc.

Since Self-Direction Services provided by ISS are voluntary, non-certified services, ***ISS does not report incidents to the Justice Center, we report to OPWDD IMU.***

It is the responsibility of direct support staff to ensure the safety and welfare of the people they are supporting. By accepting a direct support position with ISS, you have pledged to prevent abuse, neglect, or harm toward any person with special needs.

- If you learn of, or witness, any incident of abuse, neglect or harm toward any person with special needs, you will first **offer immediate assistance** and then **notify emergency personnel**, including 9-1-1 where appropriate.
- You must then **inform QA/CC Dept., Jennifer Klang Norbury (Assistant Director of Compliance & QA) of the situation. You must call 631-864-2536, extension 423 or email qualityassurance@issny.org** to report the situation immediately after you have addressed the needs of the person involved in the incident.

DEFINITIONS OF REPORTABLE INCIDENTS

The following list of definitions serves as a guide to you to determine if the situation you witnessed or in which you were involved is actually an incident which requires reporting.

- ▶ If you are **unsure** if a situation is actually an incident, **call the Assistant Director of Compliance & QA at (631) 864-2536, ext. 423** for direction right away.
- ▶ As a **mandated reporter**, it is your responsibility to make sure the person you work with is safe and that you call to report the incident immediately.

14 NYCRR PART 624: DEFINITIONS - REPORTABLE INCIDENT:

ABUSE/NEGLECT

1. Physical Abuse: Conduct by a custodian that is intentionally or reckless causing physical injury or serious or protracted impairment of the physical, mental or emotional condition of a service recipient or causing the likelihood of 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. Exception: **Physical abuse does not include** reasonable emergency interventions necessary to protect the safety of any person.”

2. Sexual Abuse: Conduct by a custodian that subjects a person receiving services to certain crimes under the New York Penal Law, or any conduct or communication by such custodian that allows, permits, uses, or encourages a person receiving services to engage in a criminal act described in New York Penal Law. Such conduct may include rape (forcible compulsion or physical helplessness or incapable of consent), forcible inappropriate touching, indecent exposure, sexual assault, prostitution offenses such as promoting, permitting or compelling prostitution), and “sexual performance offenses” (such as inducing a service recipient to engage in sexual conduct in any play, motion picture, photograph or any other visual representation in front of an audience). It should be noted however, if the individual receiving services is married to the custodian the sexual contact shall not be considered sexual abuse. Furthermore, 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 custodian if he or she has sexual contact with another individual receiving services who is a consenting adult who has consented to such contact.

3. **Psychological Abuse:** Any verbal or nonverbal conduct by a custodian that is intentional or reckless that adversely effects and results in or is likely to cause a substantial diminution of an individual's emotional, social or behavioral condition. 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 a person receiving services as a means for infliction of pain or injury, in a manner that constitutes a threat of physical pain or injury.
4. **Deliberate Inappropriate Use of Restraint:** 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 a person's plan of services (e.g. ISP or Hab 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 person. A "**restraint**" includes 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.
5. **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, and movement limitations used as punishment including, but not limited to helmets and mechanical restraining devices. **Adverse conditioning is prohibited by OPWDD.**

6. **Obstruction of Reports of Reportable Incidents:** Conduct by a custodian 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 a service recipient, actively persuading a mandated reporter from making a report of a reportable incident to 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 custodian failing to report a reportable incident upon discovery.
7. **Unlawful Use or Administration of a Controlled Substance:** Any administration by a custodian to a service recipient of: a controlled substance without a prescription; or other medication not approved for any use by the federal food and drug administration. It also includes a custodian unlawfully using or distributing a controlled substance at the workplace or while on duty.
8. **Neglect:** Any **action, inaction or lack of attention** that breaches a custodian'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:
 - Failure to provide proper supervision, resulting in conduct between persons receiving services that would constitute abuse as defined above if committed by a custodian;
 - Failure to provide adequate food, clothing, shelter, medical, dental, optometric or surgical care, as required and provided that the agency has reasonable access to the provision of such services and that necessary consents to any such treatment have been obtained from the appropriate parties; or
 - Failure to provide access to educational instruction, as required or per the person's IEP.

14 NYCRR PART 624: DEFINITIONS - REPORTABLE INCIDENT:

SIGNIFICANT INCIDENTS:

An incident, other than an incident of abuse or neglect, that because of its severity or the sensitivity of the situation may result in, or has the reasonably foreseeable potential to result in, harm to the health, safety or welfare of a person receiving services and include but shall not be limited to:

1. **Conduct between persons receiving services** that would constitute abuse as described above if committed by a custodian except sexual activity involving adults who are capable of consenting and consent to the activity; or
2. **Conduct on the part of a custodian**, which is inconsistent with a person's plan of service, generally accepted treatment practices and/or applicable laws, regulations or policies and which impairs or creates a **reasonably foreseeable potential to impair** the health, safety or welfare of a person receiving services, including but not limited to:
 - a. **Seclusion:** Placement of a person receiving services in a room or area from which he or she cannot, or perceives that he or she cannot, leave at will" OPWDD prohibits the use of Seclusion.
 - b. **Unauthorized Use of Time-Out:** When a person receiving services is removed from regular programming and isolated in a room or area for the convenience of a custodian, or as a substitute for programming, but **does not include the use of time-out as an emergency intervention** to protect the health or safety of the person receiving services or other persons.

DEFINITIONS - REPORTABLE INCIDENT: SIGNIFICANT INCIDENTS: (Con't.)

- c. **Administration of a Prescribed or Over-the-Counter Medication:** Administration of a prescribed or over-the-counter medication that is inconsistent the prescription or medical order issued for a service recipient by a licensed, qualified health care practitioner, and which has an adverse effect on a service recipient. **Adverse effect is an unanticipated and undesirable side effect** which unfavorably affects the well-being of a person receiving services.
- d. **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 inconsistent with an individual's plan of service (including a behavior support plan), generally accepted treatment practices and/or applicable laws, regulations or policies. A "restraint" includes 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. The following uses of a restraint constitute an incident:
- Used with excessive force
 - Used in circumstances other than an imminent, serious risk of physical harm to self/others
 - Its use was ordered by a person lacking the authority to do so
 - Used by inadequately trained staff
 - Use of a prohibited technique
 - Use of mechanical restraint longer than necessary, or failure to monitor a person in mechanical, pharmacological, and manual restraints.

**DEFINITIONS - REPORTABLE INCIDENT: SIGNIFICANT INCIDENTS:
(Con't.)**

e. Mistreatment: Other conduct on the part of a custodian, inconsistent with the person's plan of services, generally accepted treatment practices or applicable federal and state laws, regulations or policies that impairs or creates a reasonably foreseeable potential to impair the health, safety, or welfare of a person receiving services.

f. Missing Person at Risk of Injury: The unexpected absence of a person receiving services that based on the person's history and current condition exposes him or her to risk of injury.

g. Unauthorized Absence: The unexpected or unauthorized absence of a person after formal search procedures have been initiated by ISS. Formal search procedures need to be initiated immediately if the person's whose absence constitutes a recognizable potential danger to the wellbeing of the person or others.

h. Choking, With Known Risk: The partial or complete blockage of the upper airway by an inhaled or swallowed foreign body, including food, that leads to a partial or complete inability to breathe, involving a person with a known risk for choking and a written directive addressing that risk.

i. Choking, With No Known Risk: The partial or complete blockage of the upper airway by an inhaled or swallowed foreign body, including food, that leads to a partial or complete inability to breathe. An incident involving choking with no known risk involves a person with no known risk for choking and does not have a written directive for the potential of choking.

**DEFINITIONS - REPORTABLE INCIDENT: SIGNIFICANT INCIDENTS:
(Con't.)**

j. Self-abusive Behavior, with Injury: Self- inflicted injury to a person receiving services that requires medical care beyond first aid.

k. Injury with Hospital Admission: An injury that results in the admission of a program participant to a hospital for treatment or observation (other than as a result of self-injury).

l. Theft and financial exploitation: Any suspected theft of a participant's personal property (including personal funds or belongings) or financial exploitation, involving a value of more than \$100.00; theft involving a participant's credit, debit, or public benefit card (regardless of the amount involved); or a pattern of theft or financial exploitation involving the property of one or more program participants.

m. Other significant incident: An incident that occurs under the auspices of ISS, but that does not involve conduct on the part of a custodian, and does not meet the definition of any other incident described above, but that because of its severity or the sensitivity of the situation may result in, or has the reasonably foreseeable potential to result in, harm to the health, safety, or welfare of a program participant.

14 NYCRR PART 624: DEFINITIONS – SERIOUS NOTABLE OCCURRENCES:

a. Death: The death of any program participant, regardless of the cause of death. This includes all deaths of people who live in residential facilities operated or certified by OPWDD and all deaths of program participants that occur under the auspices of ISS.

b. Sensitive Situations: Those situations involving a program participant that do not meet the definitions of other incidents described above, but that may be of a delicate nature to ISS, and are reported to ensure awareness of the circumstances. Sensitive situations may include, but not be limited to, possible criminal acts committed by a program participant.

14 NYCRR PART 624: DEFINITIONS – MINOR NOTABLE OCCURRENCES:

- a. Theft or financial exploitation:** Any suspected theft of a program participant's personal property (including personal funds or belongings) or financial exploitation, involving values of more than \$15.00 and less than or equal to \$100.00, that does not involve a credit, debit, or public benefit card, and that is an isolated event.

- b. Injury:** Any suspected or confirmed harm, hurt, or damage to a program participant, caused by an act of that person or another, whether or not by accident, and whether or not the cause can be identified, that results in a program participant requiring medical or dental treatment by a physician, dentist, physician's assistant, or nurse practitioner, and such treatment is more than first aid.

IMMEDIATE PROTECTIONS

A person's **safety** must always be your primary concern.

You must ensure the safety of the person before completing any other tasks including reporting of the incident.

You are required to take necessary and reasonable steps to **ensure** that a person receiving services who has been harmed receives **any necessary treatment or care** and, to the extent possible, take reasonable and prudent measures to immediately protect people receiving services from harm and abuse (i.e. calling 911 where appropriate).

When appropriate, the alleged abuser will be removed from direct contact with, or responsibility for that person and any other persons receiving services from ISS.

INDEPENDENT SUPPORT SERVICES: REQUIRED REPORTING

All ISS employees, interns, volunteers, consultants, and contractors are required to report any event or situation that meets the criteria of a reportable incident or notable occurrence **IMMEDIATELY** to Independent Support Services by calling **the Assistant Director of Compliance & QA at 631-864-2536, ext.423.**

1. Upon the occurrence or discovery of an incident, the ISS staff will first ensure that the person is safe. Staff will **assist the person and remain with the person** until further assistance is obtained, if necessary. If the person requires medical treatment, staff will assist the person to **obtain that medical treatment**. If necessary, staff should **call 9-1-1** to obtain the medical assistance required. Similarly, if the person's safety is in question, staff can call 9-1-1 to seek the assistance of the police, especially in the case of a potential criminal act.
2. Next, ISS staff will **notify the family/circle of support** to ensure the person's parents and/or guardians are aware of the current situation and can potentially assist or arrive at the scene and/or provide needed consent for treatment, etc. if applicable.
3. Once the person is safe; necessary emergency services have been obtained; the family/guardian has been notified; the ISS staff will then **contact Independent Support Services by calling the Assistant Director of QA/CC**. Staff will provide ISS with as many of the details known regarding the incident and what has been done to date. ISS may request further information from the staff once the situation has settled down and will provide the staff with further direction.
4. The Assistant Director of QA/CC will immediately **initiate or assign an investigator to investigate** into the incident/occurrence reported by staff.

ISS'S OBLIGATION TO REPORT

OTHER PROGRAMS: The obligation of ISS staff to report incidents to ISS is not limited to reportable incidents occurring as part of the work responsibilities at ISS. If you become aware that a person receiving services has been subjected to a reportable incident at a different facility or program certified or operated by the OPWDD, the mandated reporter is also required to report the incident to ISS Quality Assurance department. Facilities and programs may include day programs, specified residential schools, and summer camps for children with developmental disabilities.

DEATHS: The death of any person receiving services through ISS needs to be immediately reported to the **Asst. Director of Compliance & QA** as described above for reportable incidents/notable occurrences. This reporting is required regardless of whether the death did or did not occur while the ISS staff was providing services to the person.

JUSTICE CENTER: ISS is not a “certified” program under the OPWDD, and is not a state operated program, therefore ISS is not required to report to the Vulnerable Persons’ Central Register (VPCR).

OTHER NOTIFICATIONS: All incidents will be reported by the QA Supervisor to the Executive Director of ISS, OPWDD, and other required parties as established by regulation (to include the DDRO, Service Coordinator (MSC)/Case Manager, Willowbrook Consumer Advisory Board (CAB), Willowbrook Litigation Support, Mental Hygiene Legal Service (MHLS), ISS Board of Directors, Justice Center (where applicable), Coroner/Medical Examiner, Law Enforcement, Family/Guardian/Advocate) immediately upon notification of an incident.

IMPORTANT TO NOTE: Staff must avoid breaching confidentiality by **refraining from discussing the incident** with co-workers, friends or people outside of work. Even a casual mention in a text message, in the parking lot, or on Facebook or other social media, must be avoided.

Jonathan’s Law was put into place to **govern the way in which information and reports of investigations are shared**, and with whom. You may be asked for information by family members or advocates about the investigation progress or your involvement. You should refer the person requesting information to the ISS Director of Quality Assurance so that only the appropriate people share information.

REQUIRED INVESTIGATIONS

Investigations conducted by ISS will incorporate the following:

- ▶ If a person is physically injured, an appropriate **medical examination** will be obtained. The name of the examiner will be recorded and the results of the exam will be retained in ISS files in the Long Island, N.Y office.
- ▶ **Witnesses** to the incident or occurrence will be **identified and interviewed**. Staff may be asked to provide written statements, diagrams, photographs, etc. as necessary. Requested items must be submitted to ISS immediately.
- ▶ **Interviews will be conducted separately by qualified, objective parties**. Interviews of program participants will be conducted by parties with an understanding of the participant's unique needs and/or capabilities, preferably by someone with whom he/she is familiar.
- ▶ **Pertinent information will be reviewed** (e.g., records, photos, observations of incident scene, expert assessments).
- ▶ **Physical evidence**, if any, will be identified and appropriate steps shall be taken to safeguard and preserve physical evidence.
- ▶ An incident or occurrence **may be reclassified** based on additional information obtained during the course of the investigation.
- ▶ ISS will **document the investigation**, inclusive of an investigative report (on OPWDD's Form 149) and will be entered into IRMA.
- ▶ The investigation **will continue through completion** regardless of whether an employee or other custodian who is directly involved leaves employment before the investigation is complete.
- ▶ Investigations of all incidents and notable occurrences **will be completed no later than 30 days after the incident or notable occurrence is reported** to OPWDD. An investigation is considered complete upon completion of the investigative report.
- ▶ An incident or occurrence will be **considered closed** when the Incident Review Committee has ascertained that no further investigation is necessary.

FINDINGS OF ALLEGATIONS OF ABUSE/NEGLECT

For every allegation of abuse or neglect, ISS will make a finding. A finding will be **based on a preponderance of evidence** and will indicate whether the alleged abuse or neglect is:

- ▶ **Substantiated** because it is determined that the incident occurred and the subject of the report was responsible or, if no subject can be identified and an incident occurred, and ISS was responsible; or . . .
- ▶ **Unsubstantiated** because it is determined not to have occurred or the subject of the report was not responsible, or because it cannot be determined that the incident occurred or that the subject of the report was responsible.
- ▶ In conjunction with the possible findings identified above, a **concurrent finding** may be made that a systemic problem caused or contributed to the occurrence of the incident.
- ▶ Within 10 days of the completion of the investigation, **if the allegation of abuse or neglect has been substantiated, ISS will develop and implement a plan of prevention and remediation** to assure the continued health, safety, and welfare of persons receiving services and to provide for the prevention of future acts of reportable incidents.

THE ISS INCIDENT REVIEW COMMITTEE

The ISS Incident Review Committee will:

- ▶ **Meets at every four to six weeks** and always within one month of the report of a reportable incident or serious notable occurrence, or sooner should the circumstances so warrant.
- ▶ **Reviews and monitors all minor notable occurrences** that are reported, and maintains a record of the review, recommendations, and/or actions taken in order to track and trend incidents.
- ▶ **Reviews and monitors all reportable, significant incidents and/or serious notable occurrences** that are reported.
- ▶ **Reviews and monitors investigatory procedures** of reportable, significant incidents or notable occurrences.
- ▶ **Makes written recommendations** to eliminate or minimize similar reportable incidents and/or notable occurrences in the future; and/or to improve investigatory or other procedures.
- ▶ **Makes written recommendations to the Executive Director on changes in ISS policy or procedures** and to improve conditions contributing to the reportable incidents and/or notable occurrences reviewed.
- ▶ **Monitors actions taken on any and all recommendations made.**
- ▶ **Monitors trends of other events or situations** attributable to a person receiving services which may be potentially harmful, but do not meet the definition of being a reportable, significant incident or notable occurrence.
- ▶ **Reports at least annually**, to the Executive Director, Program Directors, the governing body, and OPWDD concerning the committee's general monitoring functions.
- ▶ **Interacts with the Board of Directors as needed** to the review and monitoring of all reportable, significant incidents and notable occurrences.

PART 625: EVENTS AND SITUATIONS (NOT UNDER THE AUSPICES OF ISS)

Events or situations that are NOT UNDER THE AUSPICES of ISS include:

1. Any event or situation that directly involves or may have involved ISS staff during the time he or she was acting under the supervision of a State agency other than OPWDD (for example, an ISS employee has a second job at a hospital and an incident occurred while he or she was providing care to a person receiving services during the person's hospitalization).
2. Any event or situation that exclusively involves the family, friends, employers, or co-workers of a person receiving services, whether or not in the presence of ISS personnel.
3. Any event or situation that occurs in the context of the provision of services that are subject to the oversight of a State agency other than OPWDD (for example, special education, article 28 clinic, hospital, physician's office), whether or not in the presence of ISS personnel.
4. Any report of neglect that is based on conditions in a private home.
5. The death of a person who received OPWDD operated, certified, or funded services, except deaths that occurred under the auspices of an agency.

14 NYCRR PART 625: DEFINITIONS – EVENTS AND SITUATIONS:

1. **Physical abuse:** The non-accidental use of force that results in bodily injury, pain or impairment, including but not limited to, being slapped, burned, cut, bruised or improperly physically restrained.
2. **Sexual abuse:** Non-consensual sexual contact of any kind, including but not limited to, forcing sexual contact or forcing sex with a third party.
3. **Emotional abuse:** The willful infliction of mental or emotional anguish by threat, humiliation, intimidation, or other abusive conduct, including but not limited to, frightening or isolating an adult.
4. **Active neglect:** The willful failure by the caregiver to fulfill the care-taking functions and responsibilities assumed by the caregiver, including but not limited to, abandonment, willful deprivation of food, water, heat, clean clothing and bedding, eyeglasses or dentures, or health related services.
5. **Passive neglect:** The non-willful failure of a caregiver to fulfill care-taking functions and responsibilities assumed by the caregiver, including but not limited to, abandonment or denial of food or health related services because of inadequate caregiver knowledge, infirmity, or disputing the value of prescribed services.
6. **Self-neglect:** An adult's inability, due to physical and/or mental impairments, to perform tasks essential to caring for oneself, including but not limited to, providing essential food, clothing, shelter, and medical care; obtaining goods and services necessary to maintain physical health, mental health, emotional well-being, and general safety; or managing financial affairs.
7. **Financial exploitation:** The use of an adult's funds, property, or resources by another individual, including but not limited to, fraud, false pretenses, embezzlement, conspiracy, forgery, falsifying records, coerced property transfers, or denial of access to assets.
8. **Death:** The end of life, expected or unexpected, regardless of cause.

ISS Involvement in Events or Situations that are NOT Under the Auspices of ISS

If ISS becomes aware of an event or situation involving a person receiving services from ISS in which the event or situation is not under the auspices of ISS, ISS will respond to the event or situation as follows:

If the event or situation meets one of the definitions in Part 624 (reportable incidents and notable occurrences) and occurred under the auspices of another agency subject to the requirements of Part 624:

- ▶ ISS will **document the event** or situation and **report the situation to the agency under whose auspices the event or situation occurred.**
- ▶ The **mandated reporters at the discovering agency must report to the VPCR** upon discovery of an allegation of a reportable incident that occurred in another program or facility which is certified or operated by OWPDD.
- ▶ If the event or situation meets one of the definitions in Part 624 and occurred in a facility or service setting subject to the regulatory oversight of another State Agency (for example in a school, hospital), ISS will document the event or situation and report the situation to the management of the facility or service setting.
- ▶ ISS will intervene if it has reason to believe (for example a report or complaint is made to ISS, etc.) that the event or situation meets the definition of physical, sexual, or emotional abuse; active, passive, or self-neglect; or financial exploitation.

REPORTING OF DEATHS

If you become aware of the passing of a person to whom you provide Self-Directed services, **you must immediately call the Assistant Director of Compliance & QA at ISS at 631-864-2536 ext. 423 to report the information.**

ISS will determine if the death occurred under their auspices, or the auspices of another agency.

QA at ISS will report all deaths immediately upon discovery to OPWDD by telephone.

ISS will submit an initial report about the death in IRMA within twenty-four hours of discovery of the death, or by close of the next working day.

OPWDD has the right to investigate or review, or to request ISS to investigate, the death of any person, even if the death did not occur under the auspices of ISS. ISS will provide OPWDD reviewers or investigators with all relevant records, reports, and other information pertaining to the event or situation. Persons receiving services, ISS staff, and any other relevant parties may be interviewed in pursuit of any such review or investigation.

A SAFE AND POSITIVE ENVIRONMENT

YOU can ASSIST in creating a safe and positive environment by:

1. Building **respectful relationships** from the start with people served, co-workers, supervisors and others.
2. **Accepting your responsibility to immediately report** suspected abuse, you may be one of the few allies a program participant has in a given situation.
3. **Staying aware of your environment** so you can head off possible conflicts before they occur or escalate.
4. **Stopping conflicts when they do occur**, by using techniques indicated in the participant's support plan
5. **Asking for clarifications** needed about any aspect of promoting and maintaining positive relationships and reporting abuse/neglect.
6. **Asking for and offering help** to co-workers , family members when a situation appears to be deteriorating.
7. Being mindful that ISS is committed to supporting employees who act to maintain a safe and positive environment in which program participants can enjoy a rich and rewarding lifestyle.

If something makes you uncomfortable, bring the situation to the attention of ISS!

IF YOU HAVE ANY QUESTIONS, NEED
CLARIFICATION or are REPORTING AN INCIDENT:

Jennifer Klang Norbury

Assistant Director of Compliance & QA

(631) 864-2536, ext. 423

OR

Confidential Hotline: 833-477-7287

QA/CC Email: qualityassurance@issny.org

INDEPENDENT SUPPORT SERVICES ATTESTATION TO TRAINING

PLEASE SIGN , DATE, AND RETURN THIS FORM TO ISS

- ▶ I have read the attached 14 NYCRR Part 624/625 - INCIDENT/ABUSE IDENTIFICATION, REPORTING AND PROCESSING Training and I understand the definitions of REPORTABLE INCIDENTS: ABUSE/NEGLECT; REPORTABLE INCIDENTS: SIGNIFICANT INCIDENT; and NOTABLE OCCURRENCES: MINOR and SERIOUS NOTABLE OCCURRENCES under Part 624; and EVENTS AND SITUATIONS under Part 625.
- ▶ I understand my obligations as a Direct Support Professional to notify the Assistant Director of Compliance & QA at 631-864-2536 ext. 423 of any incidents immediately, but no later than 24 hours after its occurrence. I understand that I must fully cooperate during all incident investigations and provide requested statements and interviews in the form and manner and within the timelines given to me.
- ▶ I understand that a participant's safety must always be my primary concern. I must ensure the safety of the person before completing any other tasks including reporting of the incident. I am required to take necessary and reasonable steps to ensure that a program participant who has been harmed receives any necessary treatment or care. I must, to the extent possible, take reasonable and prudent measures to immediately protect program participants from harm and abuse. This would include calling 911 for emergency medical and/or police assistance, if necessary.
- ▶ I also understand my obligation to notify the family immediately of an incident as defined throughout the attached training to include, but not limited to any injuries, medical emergencies, allegations of abuse, lost person, possible criminal acts, thefts, etc.
- ▶ Failure to notify ISS and the family of Incidents can result in termination and further action as deemed appropriate.
- ▶ My signature on this document verifies that I have completely read and understand 14 NYCRR Part 624/Part 625: Incident/Abuse Identification, Reporting, and Processing Requirements inclusive of the laws that govern such practices. I also understand that if I have any questions on the material provided or require clarification of a situation, I will contact Assistant Director of Compliance & QA at Independent Support Services, Inc. at 631-864-2536 ext. 423 immediately for direction.

Signature

Date

Printed Name