

# PROTECTION FROM HARM POLICY

Individuals served by Core Services will be free of abuse, neglect, exploitation and mistreatment. Core Services is committed to a comprehensive approach to protection from harm focused on understanding and preventing future occurrences of reportable and nonreportable events, as well as identifying applicable system policies, rules, guidance or other system processes and procedures that contribute to Reportable Events and resulting substantiations.

A reportable event for the purposes of this policy refers to events that fall under the reporting guidelines of laws and/or funding entities.

A nonreportable event for the purposes of this policy refers to events that are not required to be reported per state guidelines.

The definitions of abuse, neglect and exploitation include, but are not limited to, the following:

* Abuse: the knowing infliction of injury, unreasonable confinement, intimidation or punishment with resulting physical harm, pain or mental anguish;
  + Physical Abuse: actions including, but not limited to, any physical motion or action by which physical harm, pain or mental anguish is inflicted or caused. The use of any unauthorized restrictive or intrusive procedure to control behavior or punish. Corporal punishment, takedowns, prone and supine restraints are prohibited and considered abuse.
  + Sexual Abuse: any type of sexual activity or contact with sexual intent or motivation between a person supported and anyone affiliated with DIDD as a staff person, employee or a contracted provider or volunteer. This includes but is not limited to actions by which a person is coerced into sexual activity (forced, tricked, induced or threatened) or exposed to sexually explicit material or language. Sexual battery by an authority figure as defined in T.C.A. § 39-13-527 is also considered sexual abuse. Sexual abuse occurs whether or not a person is able to give consent to such activities.
  + Emotional/Psychological Abuse: actions including but not limited to humiliation, harassment, threats of punishment or deprivation, intimidation or demeaning or derogatory communication (vocal, written, gestures) directed to or within eyesight or audible range of the person supported.
* Neglect: Failure to provide goods or services necessary to avoid physical harm, mental anguish or mental illness, which results in injury or probable risk of serious harm;
* Exploitation: the deliberate misplacement, misappropriation or wrongful, temporary or permanent use of belongings or money with or without the individual’s consent. This can include inappropriate use of a person’s resources, i.e. gift card, season pass, clothes, food, electronic equipment, doing personal laundry, unpaid or underpaid labor.

Other Reportable Events include:

* Death of a person
* Serious Injury: requiring assessment and treatment (beyond basic first aid that could be administered by a lay person) in a hospital, in a hospital emergency room, in an urgent care center or from a physician, nurse practitioner or physician’s assistant;
* Suspicious Injury: whether minor or serious to a person possibly involving or resulting from abuse or neglect;
* Reportable Medical Incidents: any medical event (illness, accident, etc.) which results in Emergency medical intervention (CPR, abdominal thrust or x-ray to rule out fracture), Assessment or treatment by EMT or paramedics, hospital emergency room, Urgent Care, or Medical hospital admission.
* Reportable Behavioral Incidents: any behavioral event (aggression, SIB, PICA) resulting in the following:
  + Serious injury to a person or others as a victim of aggression,
  + Use of mechanical or manual restraint or use of takedown or horizontal restraint of any duration,
  + Administration of psychotropic medication as a response to the event,
  + Assessment or treatment by EMT or paramedics or hospital emergency room
  + Destruction of property valued at $100 or more,
  + Presence of law enforcement officials at the scene of the event or Mental Health Mobile Crisis Team,
  + Psychiatric hospital admission.
* Person missing for longer than fifteen (15) minutes, unless the Individual Support Plan (ISP) specifies that unsupervised periods of time longer than 15 minutes does not present a risk of harm to the person or others;
* Administration of a psychotropic drug without proper consent.

Nonreportable Events per agency policy include but are not limited to:

* Seizures
* Falls not resulting in injuries
* Medical events not rising to the level of a reportable medical event
* Behavior events
* Reportable Staff Misconduct: Actions or inactions, such as mistreatment defined below, which do not conform to acceptable standards of conduct and/or training related to the provision of services and/or the safeguarding of persons’ health, safety, general welfare and/or individual rights. Staff misconduct does not rise to the level of abuse, neglect or exploitation (see Abuse, Neglect, Exploitation).
* Mistreatment or treating a person badly or unfairly. Mistreatment can include actions that are not considered legally abusive or that meet the reporting guidelines issued by the state but are considered by the agency as unacceptable. Examples of mistreatment could include; isolation- restricting people from visiting friends or family, showing overt favoritism toward others in the home, denying people choices or imposing unapproved rights restrictions, not following person centered practices or a person’s plan of care.

Staff Misconduct and Mistreatment incidents that do not rise to the level of a reportable incident (as identified by the state) will be investigated by the Executive Director, in consultation with the Core Services Reportable Event Management Coordinator and Program Director. The NADSP Core of Ethics and CMS Competencies will be used as the litmus test for acceptable standards of conduct. The investigation and subsequent action will be determined within 5 days of the alleged incident.

**Core Services is committed to following the TN DIDD/TennCare Reportable Event Management system. As defined by the state:**

The Core Services Reportable Event Management Coordinator will serve as the agency Certified Provider Investigator (CPI) and will stay up-to-date on all training required by the state.

**Tier 1 Reportable Events:** are the more egregious allegations. This includes alleged wrongful conduct by a service provider that resulted in harm to the person supported and required medical treatment or intervention (intervention definition as outlined in the REM definitions), all sexual abuse allegations, exploitation exceeding $1,000, and unexpected or unexplained deaths.

**Reporting requirements for Tier 1 Reportable Events:** Report to the DIDD Abuse Hotline as soon as possible or not later than (4) four hours after the occurrence or the discovery thereof.

Core Services is committed to immediately removing an employee or volunteer alleged to have acted in a manner consistent with sexual or physical abuse from direct care duties. Employees or volunteers found substantiated for Class 1 events will be terminated.

**Tier 2 Reportable Events:** are less egregious allegations. This includes alleged wrongful conduct by a service provider that did not result in harm to the person or a minor injury to the person supported, the person is not at continued risk of harm, exploitation valued at $250 to $1,000, or exploitation of the person. Tier 2 allegations are those events that **do not require medical treatment or intervention other than that of a lay person**.

**Reporting requirements for Tier 2 Events:** A Reportable Event Form (REF) will be submitted by the close of the next business day after the occurrence/discovery of occurrence per the DIDD REM Information System. The DIDD Investigation Specialist will notify the agency of the correct classification.

A Core Services Certified Provider Investigator (CPI) will conduct investigations of Tier 2 events. The CPI will complete the provider investigation report within 25 calendar days and submit supporting documentation via the DIDD REM Information System. The Executive Director will consult the alleged victim and/or that of the legal representative and decide whether to remove the named employee or volunteer from any or all direct support until the investigation. If the allegation is substantiated as a Class 2 offense the employee or volunteer may be terminated or removed until completion of any action plan deemed appropriate by the Executive Director

**There are two classifications of Substantiated Events, Class 1 and Class 2.**

**Class 1**

The wrongful conduct affecting the person constituted abuse, neglect, exploitation or misappropriation of money or property, AND resulted in one or more of the following consequences:

1. Death
2. Serious Injury
3. Physical Harm
4. Physical Abuse
5. Sexual Abuse
6. Significant pain
7. Intimidation or mental anguish
8. Probable risk of serious harm
9. Loss of funds or property greater than $1000 in value
10. Prescription controlled medications regardless of value
11. When supervision neglect of the person occurs AND;
    1. A community citizen is harmed
    2. A criminal act occurs with resulting arrest and confinement

**Class 2**

The wrongful conduct affecting the person constituted abuse, neglect, exploitation or misappropriation of money or property, BUT resulted in:

1. Minimal or no physical harm or injury
2. Minimal or no pain or mental anguish
3. A minimal risk of harm
4. Loss of funds or property between $250 and $1000 in value
5. Violation of plans of care with minimal or no adverse consequences

Core Services’ event management system will provide for appropriate, accurate and timely reporting of events and/or internal investigations as well as effective and timely corrective response to these events. Any suspicion of abuse, neglect or exploitation must be reported to a supervisor within one hour. The supervisor will notify the Event Management Coordinator immediately who will coordinate reporting per state entity requirements and timelines. All Reportable Events forms will be completed and submitted electronically by the Event Management Coordinator or designee.

Core Services will follow or exceed DIDD policy regarding target staff working with individuals during an on-going investigation. Core Services Executive Director, or designee, will determine on an individual basis the work status of each case. A safety plan will be developed and kept with the investigation report if it is determined that the staff will be allowed to work with individuals during the investigation process. Any employee accused of physical or sexual abuse will be placed on administrative leave until the investigation is concluded.

Core Services will cooperate with any State investigation but may also make an independent determination regarding staff disciplinary action and employment status when the treatment of individuals does not meet standard of care.

Core Services may choose to conduct investigations on events that do not rise to the level or “reportable” per state guidelines but clearly violate Core expectations regarding person centered values.

Core Services will practice a zero tolerance for any attempts of intimidation or retaliation against any person who makes a report. It is the responsibility of Core Services employees to immediately notify management of any observed or suspected actions. Any person subject to this policy who retaliates against another person for his or her involvement as a reporter, witness, or in any capacity related to event management and/or investigations of abuse, neglect or exploitation will be subject to disciplinary action, including possible termination. Such actions may also result in legal or other administrative measures as appropriate.

All Core Services employees are required to give their full cooperation during an investigation. Consequences for falsification of event reports, providing false or misleading information or withholding information will be grounds for disciplinary action including termination. Core Services management and staff will not interfere or compromise the investigative process and all matters under investigation shall not be discussed except with the DIDD investigator and law enforcement.

Reportable events and Non-Reportable Events (falls, seizures, nurses’ notes, complaints and other) will be analyzed at bi-weekly Provider Reportable Event Response Team meetings (sometimes referred to as IRC) The Executive Director and Event Management Coordinator on a quarterly basis will conduct trend studies of reportable events and submit reports, analyses and recommendations to the PRERT Team. Results of this analysis will be reviewed at PRERT meeting.

The Executive Director in consultation with the PRERT Meeting will be responsible for completion of an annual written analysis of trends and patterns related to reported events and nonreportable events. The annual written analysis will be completed at the end of each calendar year.

The trend report will include the following information:

* An assessment of increasing or decreasing rates of specific types of reported events including abuse, neglect, exploitation and serious injuries.
* An assessment of persons served who have a higher than average number of reported events.
* An assessment of programs and/or homes with a higher than average number of reported events or substantiated investigations.
* An assessment of direct support staff or supervisors who have been involved in a higher than average number of reported events or substantiated allegations.

Program Supervisors/Case Manager are responsible for conducting a risk assessment annually with input from appropriate stakeholders. The Event Management Coordinator, Management staff, COS or Event Review Committee will make recommendations for review of the risk assessment when indicated by reportable events or substantiated investigations.

PROCEDURES

1. When witnessing or discovering an event that involves abuse, neglect, exploitation, or mistreatment staff must immediately intervene and stop the inappropriate behavior, obtain medical attention, and/or correct hazards that contributed to the event.
2. Any suspicion of abuse, neglect, exploitation, or mistreatment should be reported immediately but must be reported to a supervisor within one hour. Supervisor will immediately attend to staff conduct that may have contributed to the event.
3. The supervisor will notify the Event Management Coordinator immediately who will coordinate reporting per state entity requirements and timelines. Core Services will be responsible for notifying the DIDD Investigation Hotline within four hours, if applicable. Notifications will include:

* person’s support coordinator/case manager of the event, including the need to obtain approval for additional services or services;
* consultation with the support coordinator/case manager regarding initiating planning to arrange for any counseling or psychiatric care that may be needed by the person;
* Notify the person’s legal conservator within the required timeframes;
* APS/Law Enforcement if applicable

1. Staff are asked to follow reporting protocol outlined above however, if staff report directly to the DIDD Investigation Hotline they will not suffer any adverse consequence.
2. All written Reportable Events as required by state guidelines will be completed and submitted electronically by the Event Management Coordinator or designee.
3. All events investigated by the agency Provider Investigator will be documented electronically, reviewed at the PRERT bi-monthly meeting and acted upon in a timely manner.
4. Adjustments in provision of services will be made, if indicated, to address improvements in the services and care of persons.
5. For all substantiated allegations of abuse, neglect or exploitation management will notify the person and the conservator of the results of the investigation within 5 business days.
6. Prevention and identification strategies of abuse, neglect and exploitation are an integral part of staff training. All new staff will be trained on Abuse, Neglect, Exploitation and Mistreatment, including RELIAS training and review of this policy. All other staff will complete an annual refresher.
7. The ANE Policy will be posted publicly on the agency website as well on the agency electronic case management system.
8. People supported will be trained a minimum of annually on what is ANE and mistreatment. This will occur during the annual rights assessment and POM interview, as well as during monthly focus groups. A variety of formats will be used to help people understand concepts and identification.

Core Services is committed to tracking nonreportable events for the purpose of improving health and safety. Incidents that do not meet the criteria of reportable will be trended at PRERT meetings and in the annual trend survey.

The following procedures will be followed by all staff to ensure immediate response to the safety and/or health risks associated with every event:

1. Obtain needed medical attention for persons, staff or others who are injured or harmed
2. Immediately correct any physical hazard that may have contributed to the event;
3. Event reports must document electronically by the end of the shift on any event which results in potential for harm.
4. Event Management Reviews will be held every two weeks or more as needed to

review trends and develop preventive or corrective actions on both reportable and nonreportable events.

All Reportable Event documentation will be stored electronically on a secure drive and protected for confidentiality.

Core Services is committed to the education of people supported, stakeholders and staff on what constitutes acceptable and unacceptable standards of conduct.

* People supported will receive ongoing education on what is and how to identify abuse, neglect, exploitation and mistreatment. This will occur not only during the annual planning process and rights assessment but also through monthly focus groups
* Employees will receive training such as two-day PCT and four-day POM training to be familiar with acceptable standards of conduct. Employees will also complete annual refresher courses on RELIAS on ANE. Monthly House Meetings will be used to educate employees on acceptable standards of conduct and prevention of ANE
* Company policies on prevention strategies will be posted publicly on the agency website as well as agency wide access on the electronic case management system.
* Social media posts will be used to promote examples of appropriate staff conduct that contribute to the prevention of harm.