

Risk Management Report for FY 2020

In-Pact as an agency works diligently to ensure that issues of risk to the agency are monitored, reviewed and recommendations are made as they occur. In-Pact works closely with State agencies, such as the Bureau of Developmental Disabilities, Bureau of Quality Improvement Services, Indiana State Department of Health, Case Management, our workman's compensation insurance carrier to ensure and monitor that we are working to mitigate risks as an agency as well as within each department. Internally, In-Pact works toward risk mitigation by the work done by the Safety Committee, the Quality Actualization Work Group, and by following the recommendations of the Human Rights Committee. In-Pact also utilizes within the Supported Services Department the waiver service known as Wellness Coordination to ensure that we are mitigating health care risks for 40 of the individuals who live in waiver service 24-hour sites.

In-Pact also undergoes several inspections annually and internally we utilize a Program Status Report process to ensure the health and safety measures used in each of the three programs. These Program Status Reports (PSR) are done at least each quarter, and review safety, cleanliness, completeness of documentation, and that all systems are in working order at each location. In-Pact sites that require fire detection systems that are hard wired to the phone system that send automatic alarms to local fire departments are inspected several times per year. In Group Homes there are fire inspections done by the Fire Marshall's Department, to make sure there are no hazards and that all alarms are in working order, and that there are fire extinguishers. In 24-hour, waiver services, a local company, Simplex Grinnell, comes and checks the smoke detectors and alarms to make sure they are in working condition and that the buildings with fire suppression systems are also in working order. There are currently three buildings in Supported Services that have fire suppression systems. Case Managers as well as the Social Services Coordinator who does the PSR report, ensure that there are smoke detectors and carbon monoxide detectors in working order at all 24-hour sites.

In-Pact's Safety Committee meets every three weeks. During this meeting we address any workman's comp injuries that might have occurred. There is a report given on the date, time and how the injury occurred. Then there is discussion about what the employee could have done differently and then the team discusses recommendations. From July 2019 to June 2020 there were 25 cases of worker injuries reported to our workman's compensation carrier. These incidents range from slip and falls, auto accidents, and injury from individuals who were aggressive toward the employee. There were seven incidents of injury caused by employees tripping over an object, slipping on snow or ice, or simply stumbling while at work. During the year there were 14 staff who were injured due to the individuals we serve becoming aggressive toward staff, or toward a housemate and staff intervened to protect the other individuals. The remaining 4 cases were simple incidents of employees getting injured while doing their jobs. These may be situations of just carrying something that is too heavy, or simply stepping the wrong way on uneven ground. We work to then make sure that recommendations are made, and plans are carried out to ensure whatever issue caused the injury is addressed to keep the situation from occurring again.

One of the main functions of the Safety Committee is to report on, discuss and analyze the root causes of State Incident Reports. At the end of the 2015 Fiscal Year In-Pact as an agency had recorded 344 incident reports. By the end of the current Fiscal Year, In-Pact had 186 incident reports as an agency.

There were 74 in Supported Services, 68 in Group Home Services and 44 in Community Services. At 186 incident reports for this past year we have seen a slight increase in reports of 18 more reports. This is just under a 10% increase over the past Fiscal Year, but still a large decrease from the 2015 Fiscal year numbers. In Supported Services, there were 7 incident reports made for individuals being positive for COVID 19 and subsequently there were 6 incident reports made for ER visits and hospitalizations pertaining to the 7 positive cases. This alone explains 13 of the 18 more cases for this Fiscal Year. One area we always try to improve on is in the area of Medication Errors. Supported Services had 10 medication errors in a 12-month period. In the same period last year, there were 23 medication errors for the department. In Group Homes there were 11 medication errors, which is also down significantly over the previous year. Community Services had 3 medications errors in a 12-month period. As an agency we give between 50,000 and 70,000 doses of medications annually. In-Pact's medication error rate is less than 1%. Nationally, all hospitals have an error rate of 3 to 5 percent. We feel very proud of our efforts to mitigate the number and rate of medications errors over the past 5 years.

One area of concern is in aggression toward staff or others, such as a housemate or peer. We have seen a large increase in the number of incidents of physical aggression by our individuals. In Group Homes there were 30 incidents pertaining to physical aggression. Many of these can be attributed to three individuals at two different locations. These same individuals are also responsible for many workers compensation injuries. There were also 34 separate incidents of aggression toward staff or peer at the clubhouse. This in In-Pact's day program operated in the Community Resources Department. In-Pact has long had the reputation of working with some of the more difficult and aggressive individuals that other agencies will not provide services for. Over the past few years, the agency has made a strong effort to reduce the use of physical restraints across all three departments. The only allow able restraints are a one-person arm wrap, or seated arm wrap, or a two-person standing restraint. As such there were only two physical restraints used during the year 1 in Supported Services and 1 in the Group Home Department. With this concentration on minimizing restraints of any kind, it has become apparent that more physical aggression was the outcome. However, the State of Indiana is really pushing to limit the use of physical restraint across all service programs.

In-Pact has multiple systems in place to ensure that we are working toward mitigating the risks that are inherent in providing the services we provide. We work closely with state agencies to not only report all incidents, but to also report any incidents of abuse and neglect as well. We have greatly reduced the number of these types of incidents with the use of video surveillance in almost every home. This is one such system that we have for mitigating risks. Our staff are aware that these cameras are recording their interactions and as such, if abuse were to happen, we have a clear evidential documentation of the incident. Often, there is very little investigation needed, the staff is suspended and terminated in most cases. In several cases we have been able to turn the video over to police and have been able to prosecute the employee, and it has led to actual jail time. It is hoped that by doing this we can keep these people from working in this field again. We are not always able to screen out for this behavior when someone is hired, but this system helps us to keep it from happening repeatedly. Our goal is to mitigate the amount of risk involved in providing services to our individuals.

In conclusion, In-Pact utilizes many systems to ensure that our risk in providing services, doing business, and providing for the health and safety is of the utmost importance. We meet weekly to discuss the health of 40 individuals in Supported Services. Every individual has a High-Risk Plan, which helps staff to know and understand any health and safety risks the individual might have. These Risk Plans were

developed specifically for each individual. They are not a cookie cutter risk plan; they are specific to the health needs of each person we serve. They are based on Physician recommendations, pharmacy recommendations, and the recommendations of the individual's Inter-Disciplinary Team. It is truly an individualized plan developed to mitigate individual risks for that person. We take great pride in our approach to risk mitigation for our individuals, staff, and agency. The quality services it allows us to provide is among the best in the area.