

All Quality Management (QM) clinical staff that may investigate alleged incidents in Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IIDs), Skilled Nursing Facilities (SNF), Assisted Living Facilities (ALF), and Group Homes (GH) shall complete training on how to conduct investigations considering the specific special needs of individuals with intellectual and developmental disabilities.

The following is guidance which is not all inclusive of the content requirements for investigative training involving Individuals with Intellectual and Developmental Disabilities (IID/DD).

1. Individuals with I/DD
 - a. Specific and special needs of this population, and
 - b. How to interact with I/DD-diagnosed individuals that may be non-verbal, etc.
2. What is abuse and how to recognize it in the I/DD Population:
 - a. Abuse, neglect, exploitation,
 - i. Verbal jokes, harassment, failure to provide services, change in behaviors.
3. Why the I/DD population is most at risk:
 - a. Increased dependency on caregivers,
 - b. Increased experience with discrimination due to disability,
 - c. Perpetrators think there is less risk with this population and that the person may not be believed,
 - d. Fear, non-belief, retaliation or loss of services,
 - e. Assertiveness skills,
 - f. More isolated,
 - g. Physical vulnerabilities,
 - h. Ability to protect themselves,
 - i. Do not always know what abuse or neglect are or how to describe it; ability to self-report abuse and neglect, and/or
 - j. More at risk due to disability healthcare services and their health care service relationship with Direct Service Providers (DSP's).
4. Investigations should be tailored to the special needs of the I/DD population and should include, however not be limited to:
 - a. Information gathering:
 - i. Record reviews,
 - ii. Interviews:
 - 1) Witnesses, individual, family/advocate, and direct care staff, etc. as appropriate,
 - 2) Interviews based on observations,
 - 3) Interviews avoid interference with substantiation and/or prosecution, and
 - 4) Trauma-informed interviewing and limited re-traumatization.
 - iii. Observations:
 - 1) General – such as living conditions, etc., and
 - 2) Specific – such as activities and interactions with involved member and staff, member appearance, etc.
 - b. Synthesis and analysis of the investigative information and need to determine next steps,

- c. Documentation:
 - i. Information gathering (e.g. record reviews, interviews, observations),
 - ii. Synthesis and analysis of the investigative information, and
 - iii. Other pertinent information related to the investigation, such as referrals to regulatory agencies, immediate actions taken to safeguard health and safety, etc.
- d. All investigations are confidential and protected.

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