

RISK MANAGEMENT REPORT:

**INDIVIDUALS WHO HAVE
TRANSITIONED FROM
DEVELOPMENTAL CENTERS TO
THE COMMUNITY (MOVERS)**

DATA THROUGH JUNE 2018



Developmental Center Mover Report

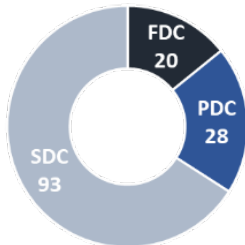
Summary of Key Findings

January-June 2018

This report summarizes indicators tracked by the risk management contractor regarding individuals who transitioned from a California Developmental Center (DC) to the community (Movers). This report summarizes findings for the period January to June 2018. For more details, please see the Technical Appendix.

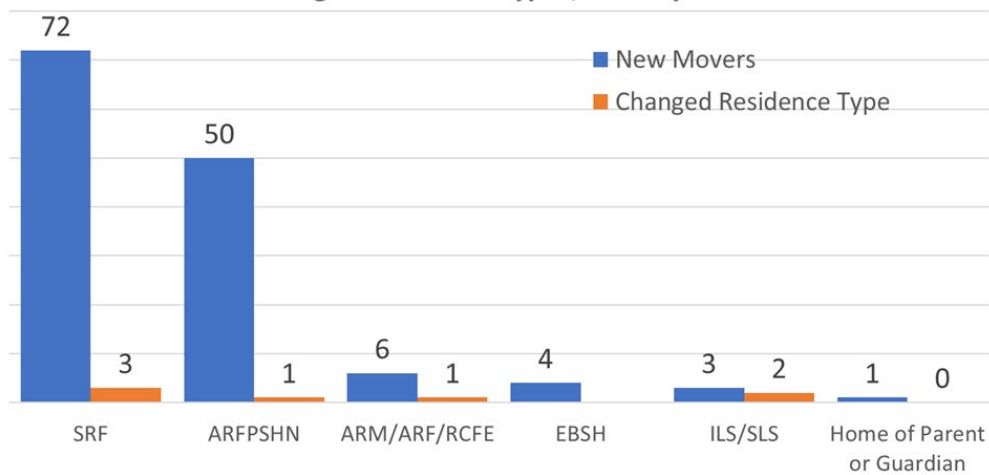
Transitions and Residential Settings

This report tracks the 849 individuals who moved from a California DC between July 2013 and June 2018. By June 2018, 751 Movers remained in the community, 83 were deceased, 10 were inactive, moved to Canyon Springs (CS), or moved out of state, and 5 returned to a DC. Of the 751 Movers in the community, most (449) lived in Specialized Residential Facilities (SRFs).



Between January and June 2018, 141 individuals moved from DCs into the community. This includes 93 Movers from Sonoma (SDC), 28 from Porterville (PDC), and 20 from Fairview (FDC). Of the 141 new Movers, two died during the period and one moved to CS. These three individuals are not shown in the graph.

New and Changed Residence Types, January to June 2018



- Residence in June 2018 -

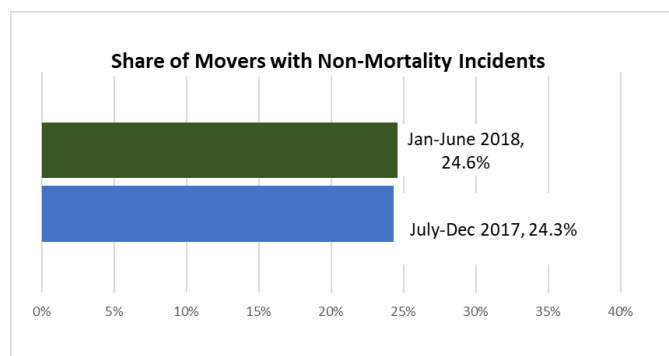
Residence Type and Address Changes



Between January and June 2018, 16 individuals changed address, including 12 who changed residence type. Half of these individuals experienced their first change since placement. However, five of those who moved had at least two previous moves. Temporary moves to acute hospitals and subacute facilities may be included in these counts.

Reported Special Incidents

In the January-June 2018 period, there were 304 non-mortality special incident reports (SIRs) among 192 individuals and 22 deaths. The highest incident rate occurred for unplanned medical hospitalizations and medication errors. The overall rate of non-mortality incidents was similar to the previous period. The mortality rate has been trending upwards but was lower this period compared to recent periods.



Client Development Evaluation Report (CDER) Changes

There were 773 DC Movers in the community during the January to June 2018 period. 631 of them had a CDER evaluation before moving and an additional evaluation by June 2018. Among the 390 individuals needing significant health support, there were statistically significant changes in 15 evaluation elements, including three changes that were statistically significant this period that were not last period:

- Skills: Walking **Declined (28 improved, 51 declined)**
- Behaviors: Running or Wandering Around **Improved (37 improved, 20 declined)**
- Personal Health: Dental Care **Declined (4 improved, 13 declined)**

For the 241 individuals needing significant behavioral support, there were no newly statistically significant changes. The three largest statistically significant changes were:

- Personal Outcomes: Community Outings **Improved (128 improved, 9 declined)**
- Behaviors: Running or Wandering Around **Improved (64 improved, 32 declined)**
- Pers. Outcomes: Work/Day Program Access **Declined (12 improved, 46 declined)**

Technical Appendix

This section provides details supporting the Summary of Key Findings and more information related to the DC Movers.

Background

As one element of risk management and quality assurance, the California Department of Developmental Services (DDS) and California's network of regional centers monitor risks and track the occurrence of adverse events for individuals served by regional centers residing in the community. Working under a risk management contract with DDS, Mission Analytics Group (Mission) provides analytical support and regular reports on adverse events to DDS and the regional centers.

This report summarizes findings from July 2013 to June 2018. The analysis includes the following findings:

1. **Changes in residential settings.** Instability in residence may indicate potential care issues. Changes in the type of residential setting may also indicate changes in an individual's needs or level of care. Therefore, this report uses information on residential settings from the Client Master File (CMF) and Purchase of Service (POS) data to identify changes of residence type.
2. **Changes in skills of daily living, challenging behaviors, and personal outcomes.** The report also monitors elements tracked on the Client Development Evaluation Report (CDER) for potential deterioration or improvement of these measures. The CDER is completed at the time of transition to the community from a DC and at least annually for all individuals who receive residential services in the community.
3. **Number and rate of reportable incidents among the individuals who have transitioned to the community.** As required by Title 17, Section 54327 of the California Code of Regulations, vendors and long-term health care facilities report occurrences of suspected abuse, suspected neglect, injury requiring medical attention, unplanned hospitalization, and missing persons, if they occur when an individual is receiving services funded by a regional center (under vendor care). In addition, any occurrence of mortality or an individual being the victim of a crime must be reported, whether or not it occurred while the individual was under vendor care. These data are available through Special Incident Reports (SIRs).

In most cases, due to the small number of individuals analyzed, the differences in these indicators are not statistically significant.

Section 1: Residence Type Placement and Movements

Table 1: Number of Movers by DC and Date, as of June 2018

Date Moved from Developmental Center	FDC	LDC	PDC ¹	SDC	TOTAL
Jul - Dec 2013	13	58	15	9	95
Jan - Jun 2014	10	56	11	17	94
Jul - Dec 2014	15	44	9	15	83
Jan - Jun 2015	23	0	26	21	70
Jul - Dec 2015	15	0	15	14	44
Jan - Jun 2016	28	0	20	19	67
Jul - Dec 2016	22	0	15	25	62
Jan - Jun 2017	22	0	11	51	84
Jul - Dec 2017	12	0	25	72	109
Jan – Jun 2018	20	0	28	93	141
Total Movers Tracked	180	158	175	336	849

¹These counts include individuals placed out of the general treatment area (GTA) at PDC. These numbers may change over time as data on the secure-treatment unit is updated.

Findings and Data Notes:

- There were 93 Movers from Sonoma (SDC) this period, the largest number during the last five years.
- There were fewer Fairview (FDC) Movers this period, but more Porterville (PDC) General Treatment Area (GTA) Movers, compared with last period.
- For the purpose of this report, the list of individuals defined as Movers was supplied to Mission by DDS.

Table 2: Number of Movers by Status, as of June 2018

Developmental Center	Total Movers Tracked	As of June 2018, Movers:			
		In Community Setting	Deceased	Inactive or Moved Out of State	Returned to Developmental Center
FDC	180	158	16	3	3
LDC	158	130	28	0	0
PDC GTA	175	156	12	5	2
SDC	336	307	27	2	0
Total	849	751	83	10	5

Findings and Data Notes:

- SDC Movers (307) continue to represent the largest share of those movers active in the community, followed by FDC Movers (158).
- Of the 83 Movers deceased by the end of June 2018, 22 passed away this period.
- 751 Movers were active in the community in June 2018. Including the 22 Movers who passed away this period, 773 were active in the community at some point between January and June 2018.

Table 3: Number of Movers by Regional Center, as of June 2018

Current Regional Center	All Movers Jul 2013 – Jun 2018	New Movers Jul – Jun 2018
Alta California	74	20
Central Valley	75	9
East Bay	97	30
Eastern Los Angeles	30	0
Far Northern	14	5
Golden Gate	95	24
Harbor	38	2
Inland	18	2
Kern	33	2
Lanterman	27	1
North Bay	65	24
North Los Angeles	46	0
Orange County	32	5
Redwood Coast	4	0
San Andreas	19	1
San Diego	51	6
San Gabriel/Pomona	47	0
South Central LA	33	4
Tri-Counties	15	2
Valley Mountain	12	3
Westside	24	1
All Developmental Center Movers	849	141

Findings and Data Notes:

- This table shows regional centers currently serving individuals after transition to the community. The “All Movers” column includes every mover since July 2013 still served in the community, while “New Movers” shows only individuals who were placed during the current reporting period.
- Overall, Golden Gate Regional Center (95) and Regional Center of the East Bay (97) serve the most Movers.
- East Bay Regional Center experienced the largest increase in Movers this period (30).
- Redwood Coast (4), Valley Mountain (12), and Far Northern (14) regional centers serve the fewest Movers.

Table 4: Number of Movers that Changed Initial Setting after Transition, as of June 2018

Initial Residential Setting	Number of Movers by Initial Setting	Distribution of Movers by Initial Setting	Changed Residence Type	Current Residential Setting
ARFPSHN	145	19%	2	ARM/ARF/RCFE (1), SRF (1)
ARM/ARF/RCFE	37	5%	19	ARFPSHN (8), ILS/SLS (3), SRF (8)
EBSH	13	2%	0	
FHA	4	1%	0	
Home of Parent/Guardian	9	1%	2	ILS/SLS (1), SRF (1)
ICF	36	5%	3	ARM/ARF/RCFE (1), SRF (1), Other (1)
ILS/SLS	44	6%	8	SRF (5), Other (3)
Other	13	2%	2	ARFPSHN (2)
SRF	450	60%	17	ARFPSHN (5), ARM/ARF/RCFE (1), Family/Parent Home (3), ICF (1), ILS/SLS (6), Other (1)
TOTAL	751		53	

Findings and Data Notes:

- Residence types abbreviations are:
 - ARFPSHN: Adult Residential Facility for Persons with Specialized Healthcare Needs
 - ARM/ARF/RCFE: Alternative Residential Model / Adult Residential Facility / Residential Care Facility for the Elderly
 - EBSH: Enhanced Behavior Support Home
 - FHA: Adult Family Home
 - ICF: Intermediate Care Facility, including ICF/Developmentally Disabled (ICF/DD), ICF/Developmentally Disabled-Habilitation (ICF/DD-H), and ICF/Developmentally Disabled-Nursing (ICF/DD-N)
 - ILS/SLS: Independent Living Skills or Supported Living Services
 - SRF: Specialized Residential Facility
- SRFs are the most common residential placement.
- Initial residence for Movers is reported by DDS. Subsequent residence information is recorded in the CMF, combined with vendor payment information from the POS data.

Table 5: Number of Movers in the Community Changing Residence Type or Address after Transition, as of June 2018

	All Changes Since July 2014*	Changes this Period
Movers in the Community as of June 30, 2018	751	
Changed Residence Type or Address		
Changed Residence Type but Not Address	3	1
Changed Address and Residence Type	25	4
Changed Address, Same Residence Type	43	12
Among Individuals Who Changed Addresses, Those With	68	16
1 Change Since July 2014	37	8
2 Changes Since July 2014	19	5
>2 Changes Since July 2014	12	3

*Changes prior to July 2014 are not included in this table.

Findings and Data Notes:

- During this period, 16 individuals changed addresses, including 4 who changed both address and residence type. One person was temporarily placed in a sub-acute setting. Because there was no change in the address reported in the CMF, this person is shown as “Changed Residence Type but Not Address.”
- 68 individuals living in the community have changed addresses at least once as of June 2018. Of those, 19 changed addresses twice and 12 changed more than twice.
- This table displays changes in address and residence type both historically and during the current period. A change in residence type may indicate that an individual’s placement did not meet his or her care needs or that care needs changed. Other changes in address may reflect placement problems, such as issues with staff or other residents. Changes in residence are associated with an elevated risk of special incidents for 6 to 12 months after the change.
- Address and residence type changes in the CMF and POS data may not match the actual move dates; therefore, Table 5 may not capture a move in this time period if the change was not recorded in the CMF or POS data until later. In addition, if a residential vendor changes type (for example, becomes a specialized facility), a residence type change would be recorded even if the individual did not change physical residences.
- Mission began receiving CMF address data starting July 2014. As a result, the table above only tracks address changes that took place on or after July 1, 2014.

Section 2: Changes in Average CDER Evaluations

Table 6: Number of Movers with CDER Evaluations Before and After Transition, as of June 2018

CDER Evaluations	Number of Individuals	Avg. Days from Previous CDER
Any CDER prior to move	772	-
Any CDER since move	631	342
2 CDERs since move	509	296

Findings and Data Notes:

- The CDER instrument collects diagnostic and evaluation information for individuals served by DDS. It is completed by regional centers and developmental centers at least annually for individuals with an institutional level of care needs and is updated whenever there is a Community Placement Plan or Individual Program Plan. In addition to information on the nature and severity of developmental disabilities and other health care needs, the CDER evaluation elements record the client’s skills of daily living, challenging behaviors, and personal outcomes.
- There is professional judgment involved in the scoring of the CDER, so there is some natural variation in scoring over time and across service coordinators.
- Table 6 displays the data available for analysis of CDER changes. Approximately 82% of DC Movers with a CDER prior to transition had CDER evaluations both before and after transitioning to the community, and two-thirds had a second CDER evaluation after the transition. These CDER results are displayed in Tables 7 – 9.
- We have separated CDER scores based on the Preferred Program indicator, which is available on CDERs completed at the DCs. The two subgroups are:
 - **Significant Health Support:** continuing medical care, physical development, or physical and social development.
 - **Significant Behavioral Support:** Autism, sensory development, dual diagnosed, behavior support, habilitation, or social development.
- Out of the 631 individuals who had CDER evaluations before and after transition to the community, we categorized 390 as needing significant health support and 241 as needing significant behavioral support. Of these, 296 in the Significant Health Support subgroup and 213 in the Significant Behavioral Support subgroup have had two CDER evaluations since the transition.

Table 7: Average CDER Values by Evaluation Element Before and After Transition, as of June 2018

CDER Element	Significant Health Support			Significant Behavioral Support		
	Average Scores, Last Evaluation at Developmental Center	Percent of Individuals with Improvements	Percent of Individuals with Declines	Average Scores, Last Evaluation at Developmental Center	Percent of Individuals with Improvements	Percent of Individuals with Declines
Evaluation Elements (low = 1, high = 5)		Out of 390 Total	Out of 390 Total		Out of 241 Total	Out of 241 Total
Skills in Daily Living						
Walking	2.4	7%	13%	4.6	2%	15%
Eating	2.9	7%	8%	4.3	10%	10%
Using Hands	3.2	15%	12%	4.8	9%	4%
Toileting	2.0	11%	9%	3.9	11%	15%
Bladder and Bowel Control	1.9	10%	7%	3.7	18%	14%
Focusing on Tasks/Activities	1.7	30%	5%	2.7	26%	10%
Safety Awareness	1.6	8%	19%	2.1	18%	22%
Social Interaction	2.1	23%	14%	2.9	20%	15%
Taking Prescription Medication	1.1	3%	3%	1.5	12%	13%
Personal Care	1.6	18%	5%	2.9	25%	12%
Dressing	1.9	12%	11%	3.5	12%	15%
Verbal Communication	1.7	9%	5%	2.8	14%	6%
Non-Verbal Communication	2.0	18%	8%	2.8	16%	5%
Challenging Behaviors						
Disruptive Social Behavior	3.3	18%	11%	2.3	24%	15%
Emotional Outbursts	3.5	14%	14%	2.4	22%	17%
Aggressive Social Behavior	4.1	12%	9%	3.0	24%	15%
Self-Injurious Behavior	4.3	14%	11%	3.7	24%	10%
Running or Wandering Around	4.5	9%	5%	3.6	27%	13%
Destruction of Property	4.3	14%	4%	3.5	22%	11%

Bold indicates statistically significant changes.

Table 7 (cont'd): Average CDER Values by Evaluation Element Before and After Transition, as of June 2018

CDER Element	Significant Health Support			Significant Behavioral Support		
	Average Scores, Last Evaluation at Developmental Center	Percent of Individuals with Improvements	Percent of Individuals with Declines	Average Scores, Last Evaluation at Developmental Center	Percent of Individuals with Improvements	Percent of Individuals with Declines
Personal Outcomes Element (low = 1, high = 4)		Out of 390 Total	Out of 390 Total		Out of 241 Total	Out of 241 Total
Physical & Social Environment						
Work or Day Program	1.2	1%	10%	1.4	5%	19%
Community Outings	1.6	50%	4%	2.2	53%	4%
Number of Friends	2.0	24%	11%	2.2	22%	14%
Number of People with Disabilities in Household	1.2	61%	1%	1.3	56%	2%
Number of Moves in the last 2 Years	3.3	8%	46%	3.2	10%	40%
Health & Safety						
Medical Care in the past 12 months	4.0	1%	2%	4.0	0%	2%
Dental Care in the past 12 months	4.0	1%	3%	3.9	2%	6%
Appropriate Medical and/or Dental Care Provided	4.0	2%	3%	4.0	0%	6%

Bold indicates statistically significant changes.

Findings and Data Notes:

- Table 7 compares the last CDER evaluation at the DC to the first evaluation after placement.
- We monitor CDER evaluation elements because declines may be evidence of systematic issues arising from problems with care. Improvements in CDER evaluations may reflect improvements in functioning after placement and improved access to activities, such as community outings.
- Some changes in CDER scores simply reflect the fact of community placement, such as improvements in the score for the number of people with disabilities in the household or declines in the score for number of moves in the last month.
- Among individuals needing significant health support, there were improvements in 10 out of 27 areas and declines in five areas.
- For individuals needing significant behavioral support, there were improvements in 11 areas and declines in four areas.
- The table does not report the share whose CDER scores were unchanged on each element. It can be calculated as the difference between 100% and the reported changes.

Table 8: Consumer Survey Responses in First CDER Evaluation After Transition

CDER Element	Significant Health Support			Significant Behavioral Support		
	Positive Response	Ambivalent or Mixed Response	Negative Response	Positive Response	Ambivalent or Mixed Response	Negative Response
	Out of 390 Total			Out of 241 Total		
Likes Living at Current Residence	97%	3%	0%	90%	10%	0%
Likes People Who Help Him/Her	95%	5%	0%	91%	8%	1%
Wants to Keep Living at Current Residence	95%	5%	0%	87%	13%	1%
Has Person to Talk With	57%	20%	24%	62%	22%	16%
Feels Safe or Afraid	85%	15%	0%	89%	11%	0%
Feels Happy or Sad	84%	16%	0%	87%	13%	0%
Has People to Tell What He/She Wants	82%	18%	0%	89%	11%	0%

Findings and Data Notes:

- Most individuals in both groups who responded to the survey questions indicated positive responses to all questions.
- Percentages are of the individuals who responded to the question.
- Responses may produce a sum of more than 100% due to rounding.

Table 9: Average CDER Values by Evaluation Element Before Transition and Second Evaluation, as of June 2018

CDER Element Positive changes reflect movement toward higher functioning.	Significant Health Support			Significant Behavioral Support		
	Average Scores, Last Evaluation at Developmental Center	Percent of Individuals with Improvements	Percent of Individuals with Declines	Average Scores, Last Evaluation at Developmental Center	Percent of Individuals with Improvements	Percent of Individuals with Declines
Evaluation Elements (low = 1, high = 5)	Out of 296 Total			Out of 213 Total		
Skills in Daily Living						
Walking	2.4	8%	12%	4.7	2%	15%
Eating	2.8	8%	8%	4.3	11%	11%
Using Hands	3.2	15%	12%	4.8	9%	5%
Toileting	2.0	11%	10%	3.9	13%	15%
Bladder and Bowel Control	1.9	11%	8%	3.7	21%	15%
Focusing on Tasks/Activities	1.7	30%	7%	2.7	27%	11%
Safety Awareness	1.6	7%	16%	2.1	19%	26%
Social Interaction	2.1	24%	15%	2.8	22%	15%
Taking Prescription Medication	1.1	3%	4%	1.5	12%	15%
Personal Care	1.6	18%	6%	2.9	27%	14%
Dressing	1.9	13%	11%	3.5	14%	17%
Verbal Communication	1.7	9%	6%	2.8	16%	7%
Non-Verbal Communication	2.0	18%	7%	2.8	16%	5%
Challenging Behaviors						
Disruptive Social Behavior	3.3	19%	13%	2.2	27%	16%
Emotional Outbursts	3.6	18%	13%	2.3	26%	18%
Aggressive Social Behavior	4.1	14%	10%	2.9	27%	17%
Self-Injurious Behavior	4.3	15%	10%	3.7	24%	9%
Running or Wandering Around	4.5	10%	6%	3.5	31%	14%
Destruction of Property	4.3	16%	4%	3.5	26%	11%
Personal Outcomes Element						
Physical & Social Environment (low = 1, high = 4)						
Work or Day Program	1.2	1%	9%	1.4	2%	21%
Community Outings	1.7	54%	5%	2.2	55%	4%
Number of Friends	2.0	28%	13%	2.2	25%	14%
Number of People with Disabilities in Household	1.2	59%	2%	1.3	58%	4%
Number of Moves in the last 2 Years	3.4	9%	49%	3.2	12%	39%
Health & Safety (low = 1, high = 4)						
Medical Care in the past 12 months	4.0	1%	2%	4.0	0%	2%
Dental Care in the past 12 months	4.0	1%	5%	3.9	2%	7%
Appropriate Medical and/or Dental Care Provided	3.9	3%	3%	4.0	0%	6%

Bold indicates statistically significant changes.

Findings and Data Notes:

- Changes from the second evaluation are mostly consistent with the first evaluation after leaving developmental centers (Table 7). Therefore, Table 9 compares the last CDER evaluation at the developmental center to the second evaluation after placement. This provides a longer period for observation of changes in the CDER.
- Bold numbers in percent columns indicate that the change was statistically significant.
- Positive changes in the CDER reflect movement toward higher functioning and positive outcomes; for example, a decline in a challenging behavior is reflected in movement from a lower to higher score.
- There is some judgment involved in the scoring of the CDER. So, there is some natural variation in scoring over time from evaluator to evaluator.

Section 3: Special Incident Reports

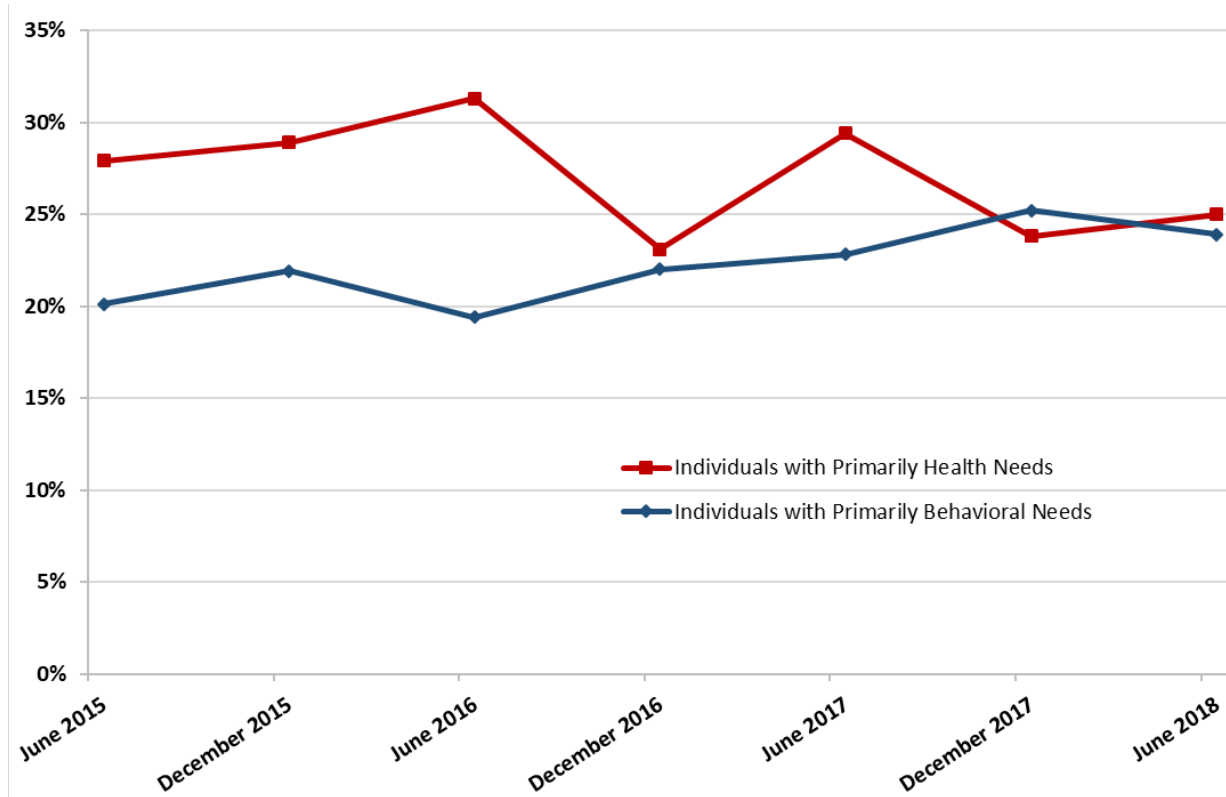
Table 10: Share of Movers with SIRs, January to June 2018

	All Movers	All Movers	Movers with Primary Health Support Needs	Movers with Primary Health Support Needs	Movers with Primary Behavioral Support Needs	Movers with Primary Behavioral Support Needs
Special Incident Type	Previous Period	Current Period	Previous Period	Current Period	Previous Period	Current Period
Number of individuals	647	773	398	488	249	285
Any non-mortality incident	24.3%	24.6%	24.1%	25.0%	24.5%	23.9%
Unplanned medical hosp.	10.5%	11.3%	14.1%	14.1%	4.8%	6.3%
Unplanned psychiatric hosp.	2.0%	1.2%	0.8%	0.8%	4.0%	1.8%
Medication error	6.3%	7.5%	6.3%	6.8%	6.4%	8.8%
Injury	5.9%	4.9%	4.5%	3.3%	8.0%	7.7%
Suspected abuse	2.3%	3.1%	2.0%	2.7%	2.8%	3.9%
Suspected neglect	2.0%	0.6%	1.3%	0.4%	3.2%	1.1%
Missing person	0.8%	0.4%	0.3%	0.4%	1.6%	0.4%
Victim of crime	0.2%	0.0%	0.0%	0.0%	0.4%	0.0%
Mortality	5.3%	2.8%	6.8%	3.5%	2.8%	1.8%

Findings and Data Notes:

- Overall, the share of Movers with non-mortality special incidents this period was about the same as last period, though there was a small increase among Movers with primary health support needs and a small decrease among those with primary behavioral support needs.
- There was an increase in the rate of suspected abuse incidents from 2.3% last period to 3.1% this period.
- Rates are calculated as the number of individuals with incidents in the period, divided by the number of individuals in the period. This rate can be interpreted as the likelihood that an individual will have at least one incident (of a given type) during the period.
- Individuals with multiple types of incidents in the period are counted in each type of incident, but only once under “any non-mortality incidents.” Therefore, the non-mortality incident rate will typically be lower than the sum of the rates by type.
- The rates reported include all incidents of suspected abuse and suspected neglect. These encompass substantiated and unsubstantiated incidents.
- The overall mortality rate was the same this period compared to last period.

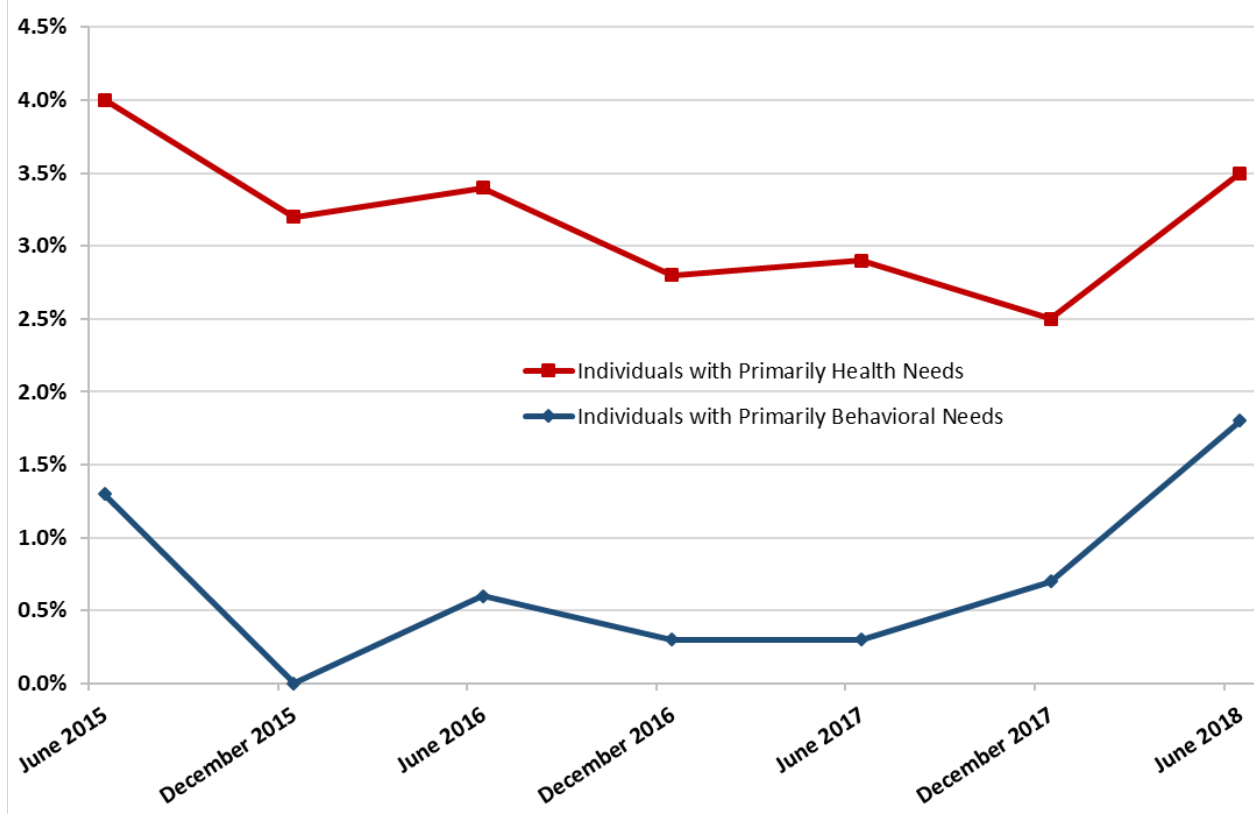
Figure 1: Non-Mortality Incident Rates, as of June 2018



Findings and Data Notes:

- Each point on the graph shows the non-mortality incident rate for the six-month period ending in the month indicated. This corresponds to the non-mortality incident rates reported in Table 10 this current period, ending June 2018, and in past reports.
- The non-mortality incident rate has declined a little for individuals with primarily health needs. Individuals with primarily behavioral needs have had a small increase in this rate over the same period.

Figure 2: Mortality Incident Rates, as of June 2018



Findings and Data Notes:

- Each point on the graph shows the mortality incident rate for the six-month period ending in the month indicated. This corresponds to the mortality incident rates reported in Table 10 this current period, ending June 2018, and in past reports
- The mortality incident rate has been consistently higher for individuals with primarily health needs than for individuals with primarily behavioral needs. There has been an increase in the mortality rate for both populations over the last year.

Table 11: Non-Mortality Incidents for Movers, January - June 2018

Incident Type and Sub-Type	Incidents	Individuals	Incident Type and Sub-Type	Incidents	Individuals
Unplanned Hospitalization ¹			Injury		
Cardiac-related	3	3	Bite	2	2
Diabetes	3	3	Burns	1	1
Internal infection	54	45	Dislocation	1	1
Nutrition deficiency	3	3	Fracture	12	11
Involuntary psychiatric admission	15	10	Internal bleeding	7	7
Respiratory Illness	61	48	Lacerations/sutures/staples	19	17
Seizure	8	8	Medication error	90	58
Wound/skin care	2	2	Medication reactions	1	1
Total	135	95	Puncture wounds	2	2
			Total	134	89
Suspected Abuse ²			Suspected Neglect ²		
Alleged emotional/mental abuse	7	6	Fail to provide care-elder/adult	1	1
Alleged financial abuse	1	1	Fail to prevent dehydration	0	0
Alleged physical abuse	18	17	Fail to provide food/clothing/shelter	2	1
Alleged physical/chemical restraint	4	3	Fail to protect from health/safety hazards	5	5
Alleged sexual abuse	2	2	Fail to prevent malnutrition	0	0
Total	27	24	Fail to provide medical care	1	1
			Fail to assist with personal hygiene	1	1
Victim of Crime			Total	6	5
Aggravated assault	0	0	Missing person	8	3
Burglary	0	0	Total	8	3
Forcible rape or attempted rape	1	1			
Personal robbery	0	0	TOTAL ALL NON-MORTALITY	192	304
Theft	0	0			
Total	1	1			

¹Incident reports had multiple incident types and individuals had multiple incidents, therefore totals cannot be calculated by adding the incident and individual subtypes.

²Reported suspected abuse and neglect incidents include both substantiated and unsubstantiated reports.

Section 4: Mortality

Table 12: Mortality Incidents for Movers, January – June 2018

Incident Type and Sub-Type	Number
Mortality	
Disease-related	12
Non-disease related	3
Unknown	7
Total	22

Findings and Data Notes:

- In the current SIR system, causes of death are not categorized other than by sub-types of disease-related, non-disease related (including accidents, overdoses, and violent deaths), and unknown. Cause of death is commonly updated from unknown after the completion of the mortality review and the receipt of the death certificate.
- DDS is launching a system update that will allow regional centers to provide additional, more structured information on causes and circumstances of deaths that will enhance the breadth of mortality analysis.
- There were twelve disease-related deaths during the period: five for respiratory issues, four for cancer, one for end stage renal failure, one for gastro-intestinal hemorrhage, and one for Alzheimer’s dementia.
- There were three deaths listed as non-disease related: one for cardio-pulmonary arrest, one for respiratory issues, and one with medical issues not yet specified in the SIR.
- There were seven deaths for which the cause (disease or non-disease) was still not specified. Four individuals had respiratory issues. One person died while recovering from abdominal surgery. One person had a pulmonary embolism. The cause of death is unclear for one case, though the SIR specifies that the individual was admitted to the hospital with high glucose levels.
- In cases where the cause of death is unclear, we expect SIRs to be updated once death certificates become available.
- Deaths among developmental center residents are reported in a separate data system and are not included in this table.