

California Department of  
Developmental Services

# **Special Incident Trends**

Semiannual Report July-December 2022

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# Summary of Trends

## Special Incident Report (SIR) Trends

### July-December 2022



**394,630**  
**Individuals**

were served by DDS in the July-December 2022 period, up from 383,955 individuals served January-June 2022 period.



**14,226 positive**  
**COVID-19 cases**

were reported via special incident reports (SIRs) this period. DDS required regional centers to submit SIRs when individuals test positive for COVID-19.



**135,223 individuals**  
**were vaccinated**

with at least one vaccine dose against COVID-19 by the end of December 2022, as reported to DDS. This count only includes vaccination information voluntarily provided to regional centers.



**25 more deaths**  
**occurred**

in the July-December 2022 period compared to the same period in 2021. There was a decline in the number of reported deaths of individuals who tested positive for COVID-19.



**11,674**  
**Title 17 SIRs**

were submitted this period, including 1,297 death SIRs and 10,377 non-mortality SIRs. This count excludes SIRs for COVID-19 that are not reportable under Title 17.



**Non-mortality**  
**incidents**  
**increased 13%**

in July-December 2022 compared to the same period in 2021. During this period, 10,377 non-mortality incidents were reported, compared to 9,172 incidents reported in July-December 2021.

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## About This Report

As one element of risk management, the California Department of Developmental Services (DDS) and California’s network of regional centers monitor the occurrence of adverse events, captured through Special Incident Reports (SIRs), to identify trends and develop strategies to prevent and mitigate risks. 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 vendored care). In addition, any occurrence of mortality or an individual being the victim of crime must be reported whether or not it occurred while they were under vendored care. Except for victim of crime and mortality incidents, incidents are only reportable for individuals in vendored care or residing in long-term health care facilities. As a result, the vast majority of non-mortality incidents are reported for individuals who live outside the home of a parent or guardian, who make up about 20% of all individuals served.

In March 2020, DDS required vendors and regional centers to also report when they learned that an individual tested positive for the novel coronavirus disease 2019 (COVID-19) or received medical attention in a hospital, emergency room, or urgent care clinic due to COVID-19 symptoms. DDS’ independent risk management contractor conducts aggregate analyses of these SIR and COVID-19 data.

This report provides a semiannual analysis of the number and rate of SIRs for individuals served by DDS in community settings between July and December 2022. It also highlights the impact of COVID-19, which can cause symptoms ranging from mild to very severe, potentially leading to death in some instances. Activities conducted by DDS and its independent risk management contractor to understand the impact of COVID-19 on individuals also are described. Results reflect data as of March 2023, for July-December 2022.

# Key Trends – July-December 2022

## COVID-19: Hospitalizations and Deaths Remained Low

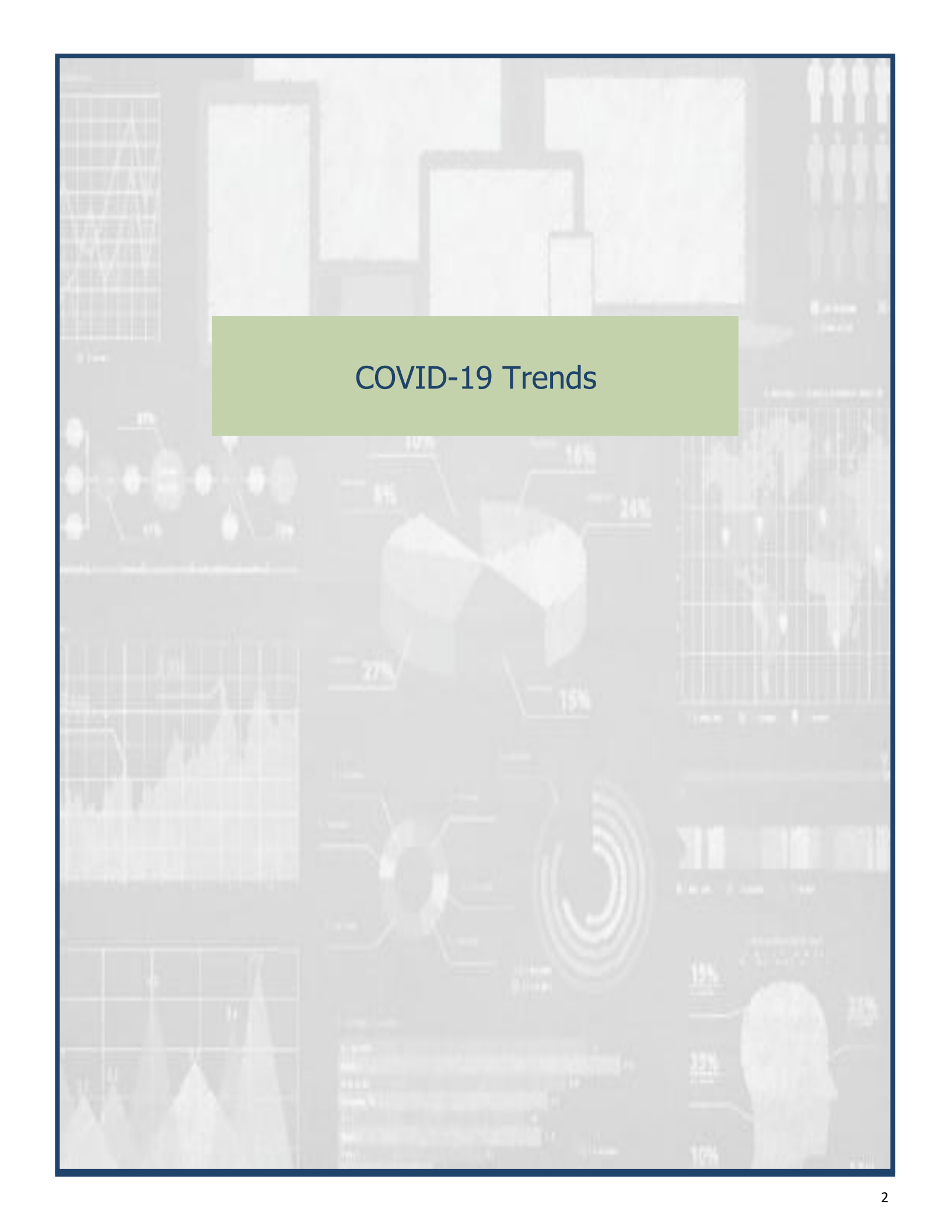
COVID-19 cases and hospitalizations of individuals who tested positive fluctuated this period, with peaks in July and December 2022 consistent with statewide trends. Deaths of individuals who recently tested positive for COVID-19 decreased from last period and remained consistently low throughout the period. Only about 3% of all reported deaths during this period were for individuals who tested positive for COVID-19.

## Reported Non-Mortality Incidents Increased

Non-mortality Title 17 reportable incidents increased to a rate higher than in any period since the COVID-19 pandemic began in March 2020. This increase was observed among almost all types of incidents, incident locations, and residence types. Incidents occurring in day programs or schools and in short-term health facilities contributed most to the overall increase.

## Reported Mortality Incidents Decreased Slightly

The rate of reported deaths per 1,000 individuals decreased slightly compared to previous periods. Reports of deaths unrelated to COVID-19 increased.



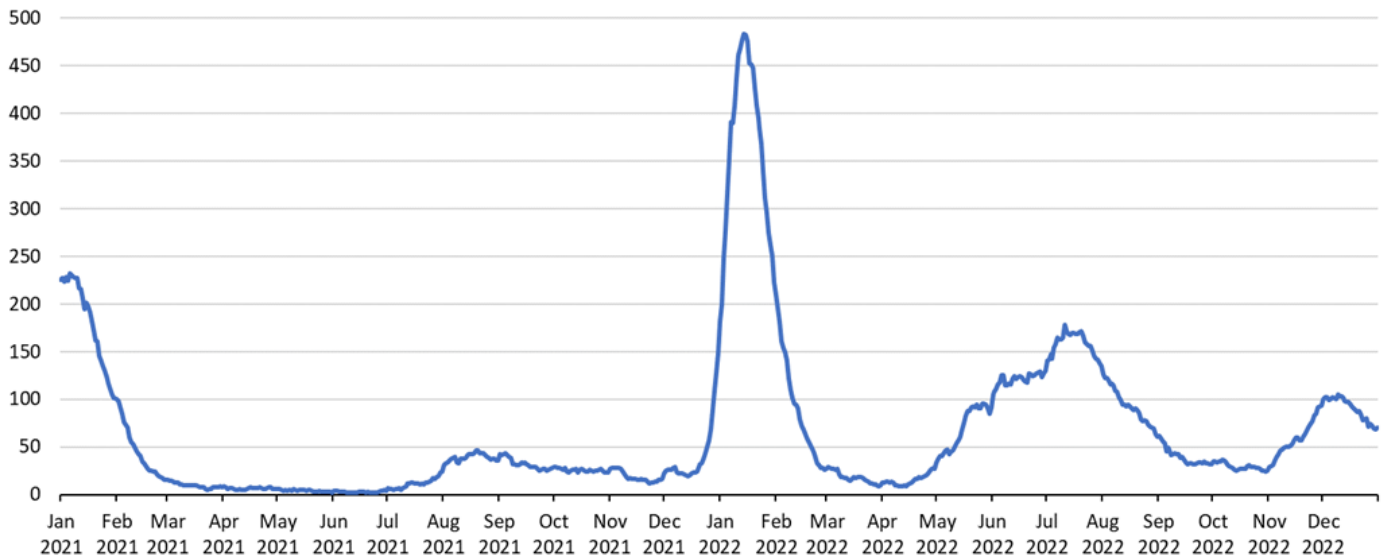
# COVID-19 Trends

# Special Incident Reports for COVID-19

## COVID-19 case numbers increased in July and December.

In the July-December 2022 period, 14,226 COVID-19 cases were reported among individuals served by DDS. This represents a 31% decrease compared to last period. Cases reported in July (4,787) made up a third of all cases reported this period.

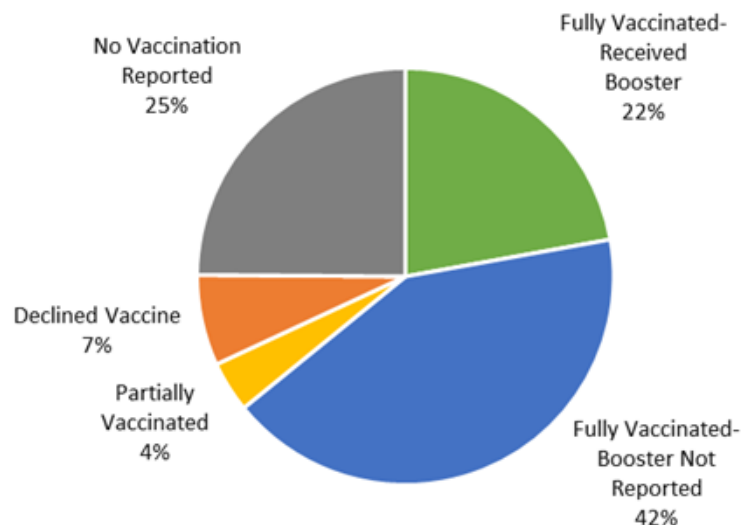
**7-Day Moving Average of New Daily COVID-19 Cases,  
January 2021 - December 2022**



## Most individuals living outside the home of parent or guardian have reportedly received at least one vaccination dose against COVID-19.

Based on information voluntarily reported to regional centers, by the end of December 2022, 135,223 individuals had received at least one vaccine dose against COVID-19. Among these individuals, 121,805 were reported to be fully vaccinated and 36,100 individuals were reported to have also received a booster shot.

**Individuals Residing Outside the Home of a Parent or Guardian**



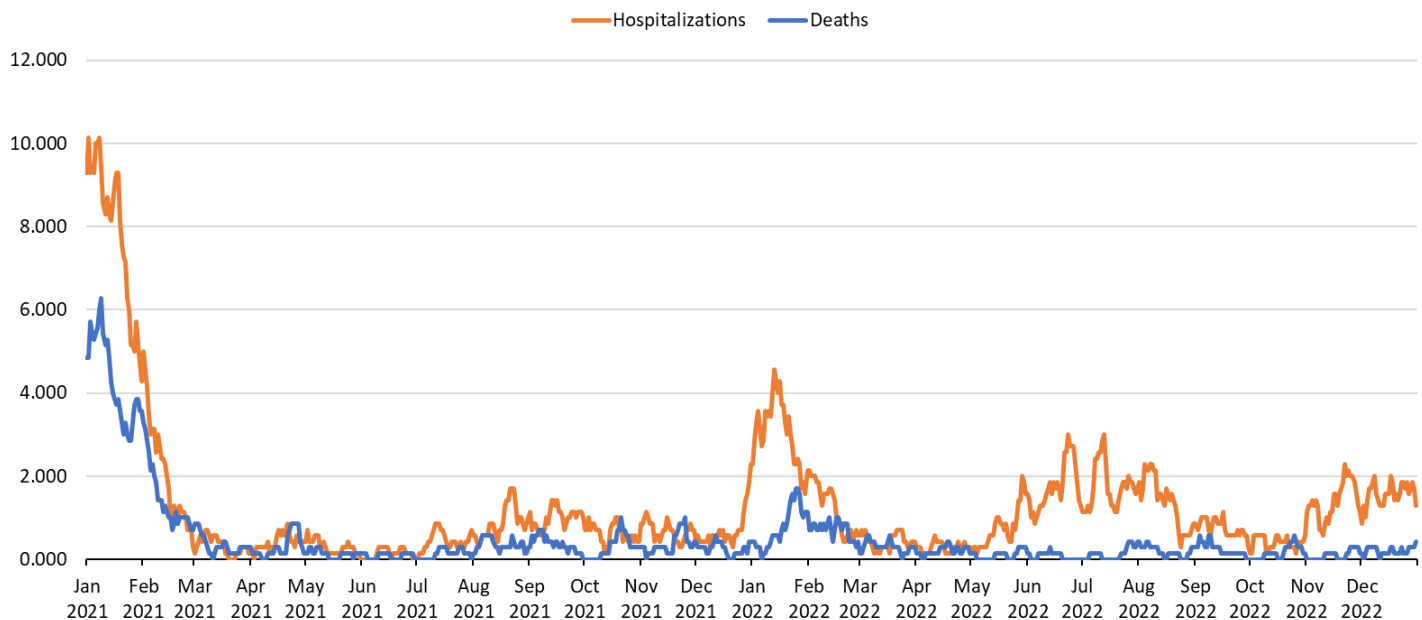
# Special Incident Reports for COVID-19

## Unplanned hospitalizations of individuals who tested positive for COVID-19 fluctuated. Deaths of individuals who tested positive remained low.

In the July-December 2022 period, 223 unplanned hospitalizations were reported for individuals who tested positive for COVID-19, including unplanned hospitalizations for other causes. The count of unplanned hospitalizations of individuals who tested positive this period was almost identical to last period's reported count (221). The number of daily unplanned hospitalizations reported increased with the number of cases, peaking in July 2022 and December 2022.

During this period, 33 deaths were reported for individuals who tested positive for COVID-19. Deaths of individuals who tested positive remained consistently low. The count was approximately half of that in the previous period, when 64 such deaths were reported.

**7-Day Moving Average of Reported Deaths and Daily Hospitalizations of Individuals who Tested Positive for COVID-19, January 2021 - December 2022**



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# Title 17 SIR Trends



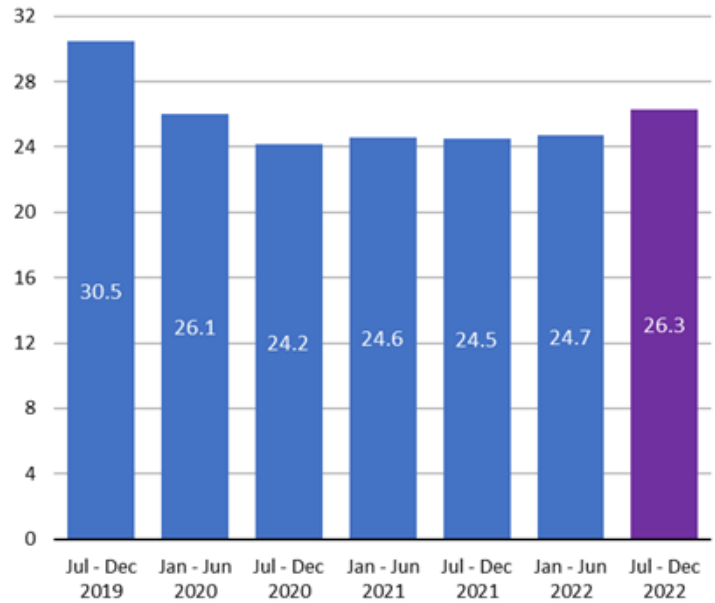
# Trend in Non-Mortality Title 17 Incidents

**There was a 13% increase in non-mortality incidents compared to the same period in 2021.**

There were 10,377 non-mortality incidents, compared to 9,172 in July-December 2021. The rate of non-mortality SIRs per 1,000 individuals increased 9% from last period. This period's rate of non-mortality incidents remains lower than those in 2019, before the COVID-19 pandemic.

These rates reflect only non-mortality incidents that are reportable under Title 17. SIRs for COVID-19 that are not otherwise reportable under Title 17 are not included. The rates shown here for previous periods reflect the most recent data available and may be higher than in previously published reports.

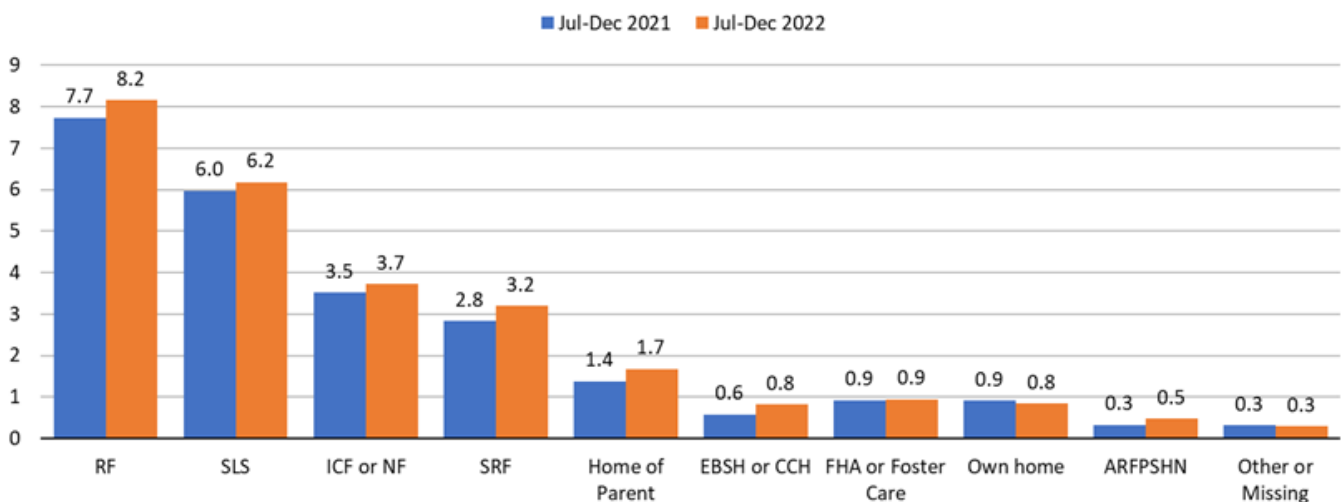
**Rate of Non-Mortality Title 17 SIRs per 1,000 Individuals Served by DDS**



**The rate of non-mortality incidents reported per 1,000 individuals increased across most residence types.**

Based on regulatory requirements, most non-mortality incidents are reported for individuals who live outside the home of a parent or guardian, representing about 20% of all individuals served. Individuals who reside in residential facilities (RFs) and individuals receiving supported living services (SLS) had the most reported incidents. The rates of reported non-mortality incidents rose in all residence types except those in foster care and living independently in their own home compared to the same period in 2021. See the Glossary on page 14 for the meaning of the abbreviations.

**Rate of Non-Mortality Incidents per 1,000 Individuals, by Residence Type**

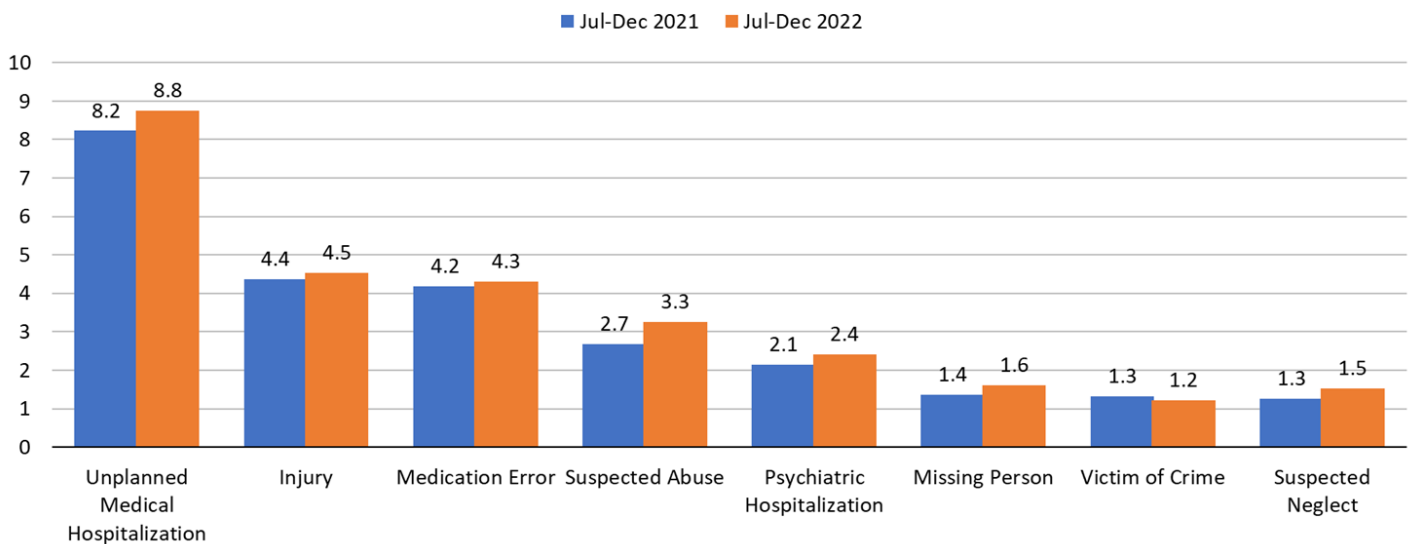


# Trend in Non-Mortality Title 17 Incidents by Incident Type

The rate of non-mortality incidents reported per 1,000 individuals increased in all but one incident type.

The rates of incidents per 1,000 individuals rose in all incident types except victim of crime, as compared to the same reporting period in 2021. Suspected abuse, psychiatric hospitalization, missing person, and suspected neglect incidents had the greatest increase. Unplanned medical hospitalizations, injuries, and medication errors—the most common incident types—also increased compared to July-December 2021. The number of victim of crime incidents reported decreased slightly.

**Rate of Non-Mortality SIRs per 1,000 Individuals in July-December 2021 and July-December 2022, by Incident Type**

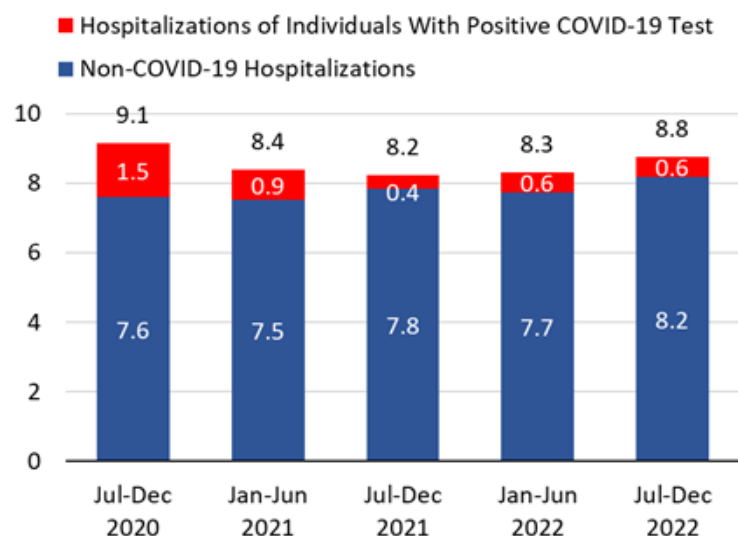


## Unplanned medical hospitalizations increased from last period.

During this period, 3,455 unplanned medical hospitalizations were reported. This count includes 223 hospitalizations of individuals who tested positive for COVID-19. The rate of hospitalizations of individuals who tested positive remained the same as last period, but the rate of non-COVID-19 hospitalizations rose to a higher level than seen in the last five periods.

About 43% of unplanned medical hospitalizations reported this period involved internal infections, and about 35% involved respiratory illness.

## Unplanned Medical Hospitalization SIRs per 1,000 Individuals Served

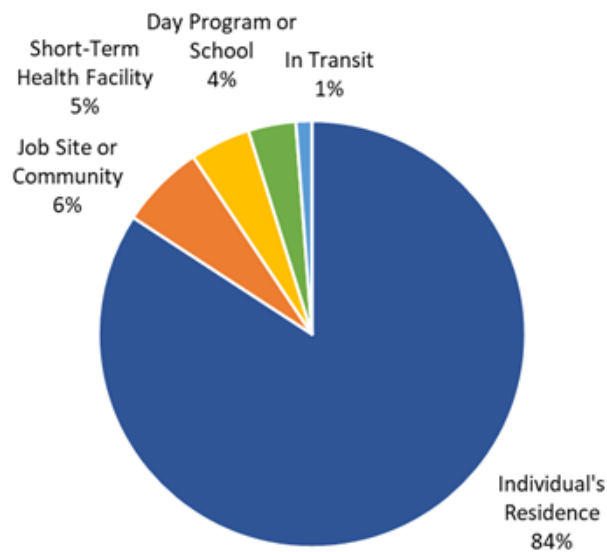


# Trend in Non-Mortality Title 17 Incidents by Location

**84% of non-mortality incidents occurred in individuals' residences.**

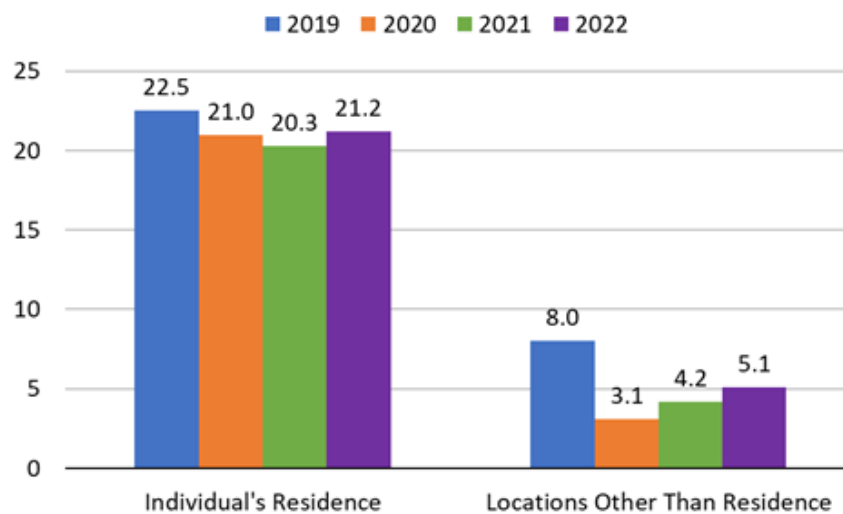
This is consistent with previous reporting periods. Incident reports identify the location where the event occurred. Most reported incidents occur in an individual's residence. The next most common locations are in the community or job site and in short-term health facilities.

**Breakdown of Non-Mortality Incidents by SIR Location, July-December 2022**



The rate of incidents increased both in individuals' residences and in other locations.

**All Non-Mortality Incidents per 1,000 Individuals, July-December, by SIR Location**

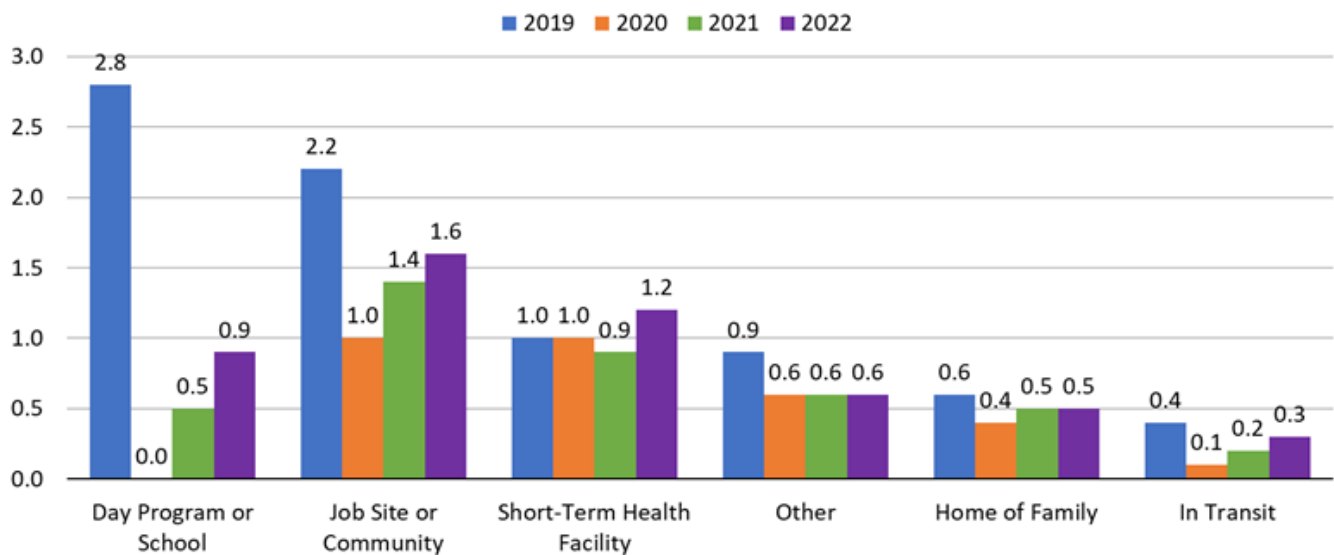


# Trend in Non-Mortality Title 17 Incidents by Location

## Non-mortality incidents increased across most locations.

Reported incidents that occurred in day programs or schools increased as compared to same period in 2021 but remained less than a third of the level observed in the same period in 2019, before the COVID-19 pandemic. There was also an increase in non-mortality incidents reported in short-term health facilities, during transit, and at job sites/community settings compared to the same period in 2021. The rate was unchanged for incidents in the home of family and all other settings.

**Location of Non-Mortality Incidents Outside the Individual's Residence per 1,000 Individuals, July-December**

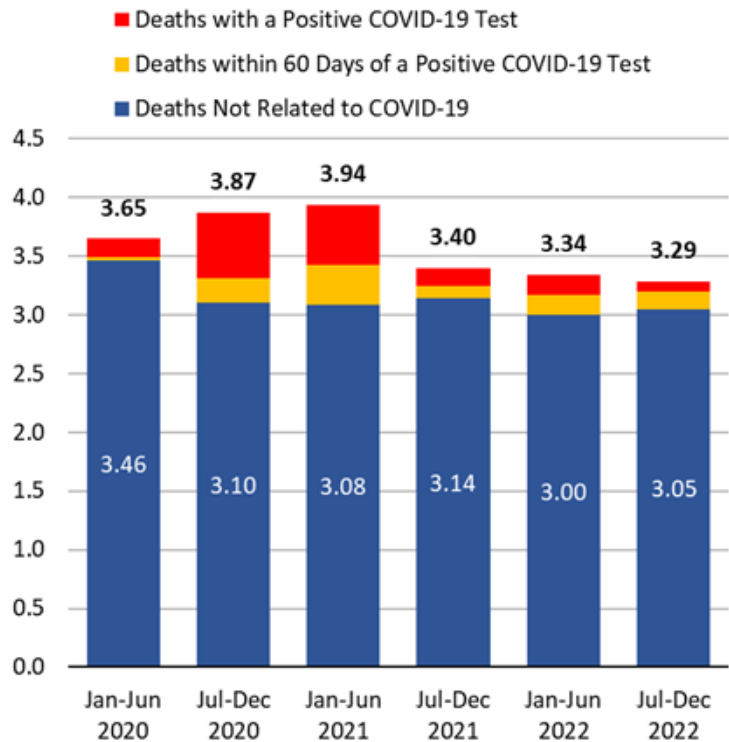


# Trend in Mortality Title 17 Incidents

**There were fewer deaths reported per 1,000 individuals this period than in any semiannual period since the COVID-19 pandemic began in 2020.**

There were 1,297 deaths reported this period. Of these, 92 deaths (7%) were for individuals who recently tested positive for COVID-19. This includes 33 individuals with a positive COVID-19 test indicated in the death SIR as well as 59 individuals who had tested positive within 60 days prior to their death.

**Rate of Deaths Reported per 1,000 Individuals Served by DDS**



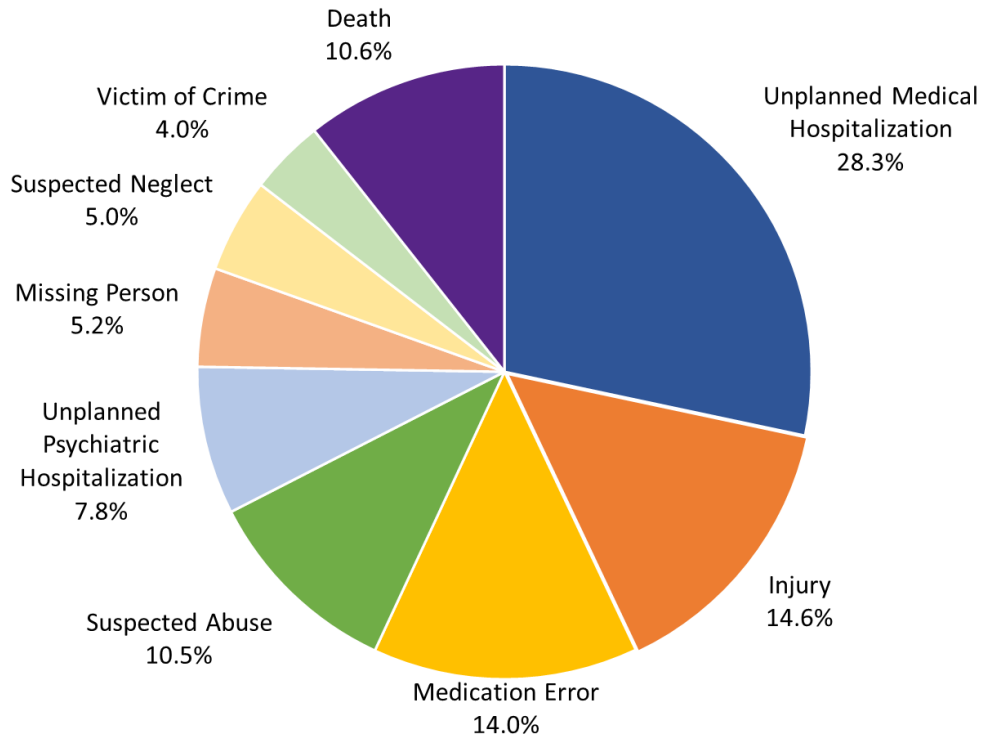
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## Other Title 17 Trends

**DDS Population Served and Count of Title 17 SIRs,  
July-December 2020 to July-December 2022**

| Period                    | DDS Population | All Title 17 SIRs | All Title 17 SIRs Per 1,000 |
|---------------------------|----------------|-------------------|-----------------------------|
| July 2020 – December 2020 | 355,999        | 9,977             | 28.0                        |
| January 2021 – June 2021  | 363,394        | 10,373            | 28.5                        |
| July 2021 – December 2021 | 374,264        | 10,444            | 27.9                        |
| January 2022 – June 2022  | 383,955        | 10,781            | 28.1                        |
| July 2022 – December 2022 | 394,630        | 11,674            | 29.6                        |

**Breakdown of Title 17 Reportable Incidents by Incident Type in  
July-December 2022 Among All Individuals**



## Incidents by Type and Subtype, July-December 2022

| Incident Type and Sub-Type*                  | All Individuals |                           | Individuals Residing Outside the Home of a Parent/Guardian |                          |
|--|-----------------|---------------------------|--|--------------------------|
|  | Incidents       | Individuals (N = 394,630) | Incidents  | Individuals (N = 68,815) |
| <b>Unplanned Medical Hospitalization</b>     | <b>3,455</b>    | <b>2,676</b>              | <b>3,378</b>   | <b>2,604</b>             |
| Cardiac-related                              | 307             | 282                       | 302  | 277                      |
| Diabetes                                     | 75              | 73                        | 73   | 71                       |
| Internal infection                           | 1,476           | 1,251                     | 1,460  | 1,236                    |
| Nutrition deficiency                         | 257             | 230                       | 250  | 223                      |
| Respiratory illness                          | 1,216           | 1,045                     | 1,188  | 1,019                    |
| Seizure                                      | 329             | 276                       | 309  | 257                      |
| Wound/skin care                              | 215             | 198                       | 212  | 195                      |
| <b>Unplanned Psychiatric Hospitalization</b> | <b>950</b>      | <b>548</b>                | <b>909</b>   | <b>517</b>               |
| <b>Suspected Abuse</b>                       | <b>1,285</b>    | <b>1,116</b>              | <b>1,127</b>   | <b>962</b>               |
| Alleged emotional/mental abuse               | 396             | 364                       | 341  | 311                      |
| Alleged financial abuse                      | 219             | 212                       | 204  | 198                      |
| Alleged physical/chemical restraint          | 78              | 55                        | 73   | 51                       |
| Alleged physical abuse                       | 550             | 507                       | 487  | 445                      |
| Alleged sexual abuse                         | 186             | 173                       | 149  | 136                      |
| <b>Suspected Neglect</b>                     | <b>604</b>      | <b>543</b>                | <b>494</b>   | <b>439</b>               |
| Fail to assist with personal hygiene         | 74              | 72                        | 59   | 58                       |
| Fail to prevent dehydration                  | 12              | 11                        | 11   | 10                       |
| Fail to prevent malnutrition                 | 8               | 8                         | 5  | 5                        |
| Fail to provide care-elder/adult             | 167             | 157                       | 147  | 138                      |
| Fail to provide food/clothing/shelter        | 51              | 49                        | 41   | 39                       |
| Fail to provide medical care                 | 96              | 90                        | 85   | 79                       |
| Fail to protect from health/safety hazards   | 294             | 269                       | 227  | 205                      |
| <b>Injury</b>                                | <b>1,786</b>    | <b>1,622</b>              | <b>1,692</b>   | <b>1,531</b>             |
| Bite   | 75              | 73                        | 68   | 66                       |
| Burns  | 28              | 28                        | 26   | 26                       |
| Fracture                                     | 643             | 620                       | 604  | 581                      |
| Dislocation                                  | 65              | 50                        | 56   | 42                       |
| Internal bleeding                            | 465             | 427                       | 450  | 412                      |
| Lacerations/sutures/staples                  | 505             | 478                       | 480  | 454                      |
| Medication reactions                         | 74              | 71                        | 73   | 70                       |
| Puncture wounds                              | 25              | 23                        | 23   | 21                       |
| <b>Medication Error</b>                      | <b>1,703</b>    | <b>1,294</b>              | <b>1,671</b>   | <b>1,266</b>             |
| <b>Victim of Crime</b>                       | <b>482</b>      | <b>458</b>                | <b>340</b>   | <b>320</b>               |
| Aggravated assault                           | 259             | 247                       | 172  | 163                      |
| Burglary                                     | 28              | 27                        | 24   | 23                       |
| Forcible rape or attempted rape              | 72              | 71                        | 44   | 43                       |
| Personal robbery                             | 40              | 40                        | 30   | 30                       |
| Larceny                                      | 99              | 97                        | 84   | 83                       |
| <b>Missing Person</b>                        | <b>634</b>      | <b>424</b>                | <b>590</b>   | <b>388</b>               |
| <b>Mortality</b>                             | <b>1,297</b>    | <b>1,297</b>              | <b>828</b>   | <b>828</b>               |
| <b>All Non-Mortality</b>                     | <b>10,377</b>   | <b>7,236</b>              | <b>9,715</b>   | <b>6,643</b>             |
| <b>All SIRs**</b>                            | <b>11,674</b>   |                           | <b>10,543</b>  |                          |
| <b>All Incidents***</b>                      | <b>12,196</b>   |                           | <b>11,029</b>  |                          |

\*Incidents with more than one type are listed under each type and subtype, so totals may differ from the sum across types.

\*\*The total number of reported SIRs.

\*\*\*The total number of incidents reported. SIRs can have multiple incident types.

Please refer to the glossary on page 14 of this report for definitions of these Title 17 incident types.



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# Glossary

## Regional Centers

Alta California Regional Center (ACRC)  
 Central Valley Regional Center (CVRC)  
 Eastern Los Angeles Regional Center (ELARC)  
 Far Northern Regional Center (FNRC)  
 Frank D. Lanterman Regional Center (FDLRC)  
 Golden Gate Regional Center (GGRC)  
 Harbor Regional Center (HRC)  
 Inland Regional Center (IRC)  
 Kern Regional Center (KRC)  
 North Bay Regional Center (NBRC)  
 North Los Angeles County Regional Center (NLACRC)  
 Redwood Coast Regional Center (RCRC)  
 Regional Center of Orange County (RCOC)  
 Regional Center of the East Bay (RCEB)  
 San Andreas Regional Center (SARC)  
 San Diego Regional Center (SDRC)  
 San Gabriel/Pomona Regional Center (SGPRC)  
 South Central Los Angeles Regional Center (SCLARC)  
 Tri-Counties Regional Center (TCRC)  
 Valley Mountain Regional Center (VMRC)  
 Westside Regional Center (WRC)

## Reportable Special Incident Definitions

**Injury** – Serious injury/accident, including lacerations requiring sutures or staples; puncture wounds requiring medical treatment beyond first aid; fractures; dislocations; bites that break the skin and require medical treatment beyond first aid; internal bleeding requiring medical treatment beyond first aid; any medication errors; medication reactions that require medical treatment beyond first aid; or burns that require medical treatment beyond first aid.

**Medication error** – When an individual under vendored care experiences one or more of the following situations: 1) wrong medication, 2) wrong dose, 3) wrong time, 4) wrong route, or 5) wrong individual.

**Missing person** – These conditions must apply: the vendor has communicated with any law enforcement agency in any way and described the individual as missing to that agency or has filed a formal missing person’s report with a law enforcement agency.

**Mortality** – Any individual death, regardless of cause.

**Suspected abuse** – Reasonably suspected abuse/exploitation, including physical, sexual, fiduciary, emotional/mental, or physical and/or chemical restraint.

**Suspected neglect** – Reasonably suspected neglect, including failure to provide medical care for physical and mental health needs; prevent malnutrition or dehydration; protect from health and safety hazards; or assist in personal hygiene or the provision of food, clothing, or shelter, or exercise the degree of care that a reasonable person would exercise in the position of having the care and custody of an elder or a dependent adult.

**Unplanned medical hospitalization** – Unplanned hospitalization due to the following conditions: respiratory illness, seizure-related; cardiac-related, internal infections, diabetes, wound/skin care, and nutritional deficiencies.

**Unplanned psychiatric hospitalization** – Unplanned or unscheduled hospitalization due to a psychiatric condition when all of the following conditions are met: The discharge diagnosis indicates that the individual was admitted to hospital for a psychiatric condition, the individual is not conserved and does not consent to the admission, or the individual is conserved and the individual's parent, legal guardian or conservator does not consent to the admission, and the legal mechanism used to accomplish the admission is in Welfare and Institutions Code Section 6500.

**Victim of crime** – Victim of reportable crimes include the following: robbery, aggravated assault, larceny, burglary, and rape.

## **Residence Types Other than Home of Parent or Guardian**

**ARFPSHN:** Adult Residential Facility for People with Special Health Needs

**ILS/SLS:** Independent Living Skills or Supported Living Services

**CCF/RF:** Community Care Facility/Residential Facility

**CCH:** Community Crisis Home

**EBSH:** Enhanced Behavioral Support Home

**ICF/DD:** Intermediate Care Facility, including

- ICF/Developmentally Disabled (ICF/DD)
- ICF/Developmentally Disabled-Habilitation (ICF/DD-H)
- ICF/ Developmentally Disabled-Nursing (ICF/DD-N)

**SNF/NF:** Skilled Nursing Facility/Nursing Facility

**FHA or Foster:** Family Home Agency (Adults) and Foster Home (Children) Licensed

**SRF:** Specialized Residential Facility

**Correctional Facility or Transient:** Transient/homeless, State Hospital, Correctional Institution (Prison), California Youth Authority

**Other:** Certified Foster Home (Children) FFA, Psychiatric Treatment Center, Rehabilitation Center, Acute general hospital, Sub-acute, Sub-acute Pediatric, Community Treatment Facility, Hospice, Unknown

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