

California Department of  
Developmental Services

# **Special Incident Trends**

Semiannual Report January-June 2023

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# Summary of Trends

## Special Incident Report (SIR) Trends

### January-June 2023



**409,751  
individuals**

were served by DDS in the January-June 2023 period, up from 394,630 individuals served in the July-December 2022 period.



**31 fewer deaths  
occurred**

in the January-June 2023 period compared to the same period in 2022.



**12,760  
Title 17 SIRs**

were submitted this period, including 1,259 death SIRs and 11,501 non-mortality SIRs. This count excludes SIRs for COVID-19 that were not reportable under Title 17.



**Non-mortality  
incidents increased  
21%**

in January-June 2023 compared to the same period in 2022. During this period, 11,501 non-mortality incidents were reported, compared to 9,539 incidents reported in January-June 2022.



**COVID-19 reporting  
requirement ends.**

Effective April 3, 2023, DDS no longer required vendors and regional centers to report COVID-19 positive cases. From January 1 through April 2, 2023, 3,455 positive COVID-19 cases were reported via special incident reports (SIRs).

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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.

From March 2020 through March 2023, 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. Effective April 3, 2023, DDS no longer requires vendors and regional centers to report COVID-19 positive cases.

This report provides a semiannual analysis of the number and rate of SIRs for individuals served by DDS in community settings between January and June 2023. 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 September 2023, for January-June 2023.

# Key Trends – January-June 2023

## Reported Non-Mortality Incidents Increased

Non-mortality Title 17 reportable incidents continued to increase this period, nearing the rate reported in July-December 2019 before the COVID-19 pandemic began. An increase from January-June 2022 was observed among all types of incidents, all incident locations, and almost all residence types. The rate of unplanned medical hospitalizations per 1,000 individuals served rose to a rate higher than the previous four periods.

## Reported Mortality Incidents Decreased

The rate of reported deaths per 1,000 individuals served decreased compared to the rate in the previous four periods. The rate of deaths was essentially consistent across the six months of this period, with a slightly higher rate of deaths in January-March 2023 and a lower rate of deaths in June 2023. This trend is consistent with previous years.

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## Non-Mortality Title 17 SIR Trends

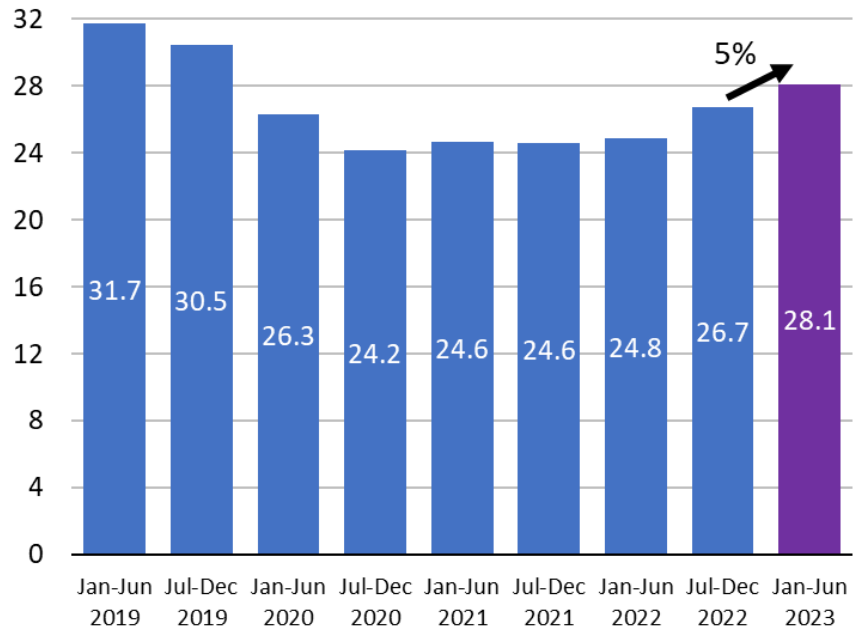
# Non-Mortality Title 17 Incidents

## Reported non-mortality incidents increased compared to the same period in 2022.

There were 11,501 non-mortality SIRs in January-June 2023, compared to 9,539 in January-June 2022. The rate of non-mortality SIRs per 1,000 individuals increased 5% from last period. This period's rate of non-mortality incidents is the highest reported since 2019.

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

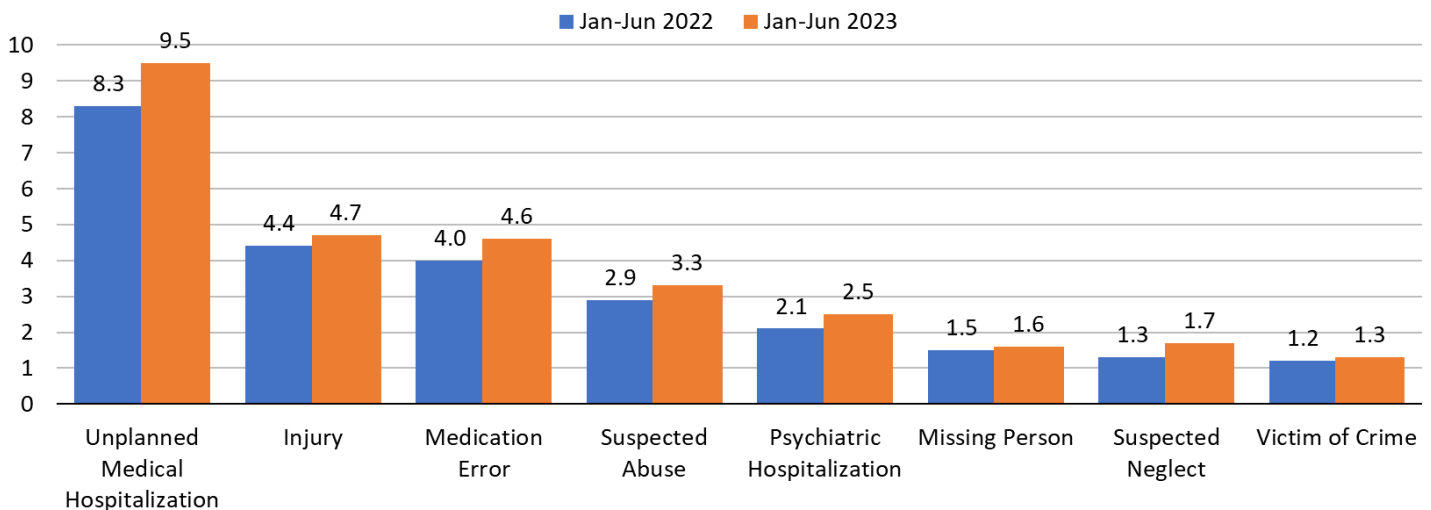
### Rate of Non-Mortality Title 17 SIRs per 1,000 Individuals Served by DDS



## The rate of non-mortality incidents reported per 1,000 individuals increased across all incident types.

The rates of reported incidents per 1,000 individuals increased for all incident types compared to the same period in 2022.

### Rate of Non-Mortality SIRs per 1,000 Individuals in January-June 2022 and January-June 2023, by Incident Type



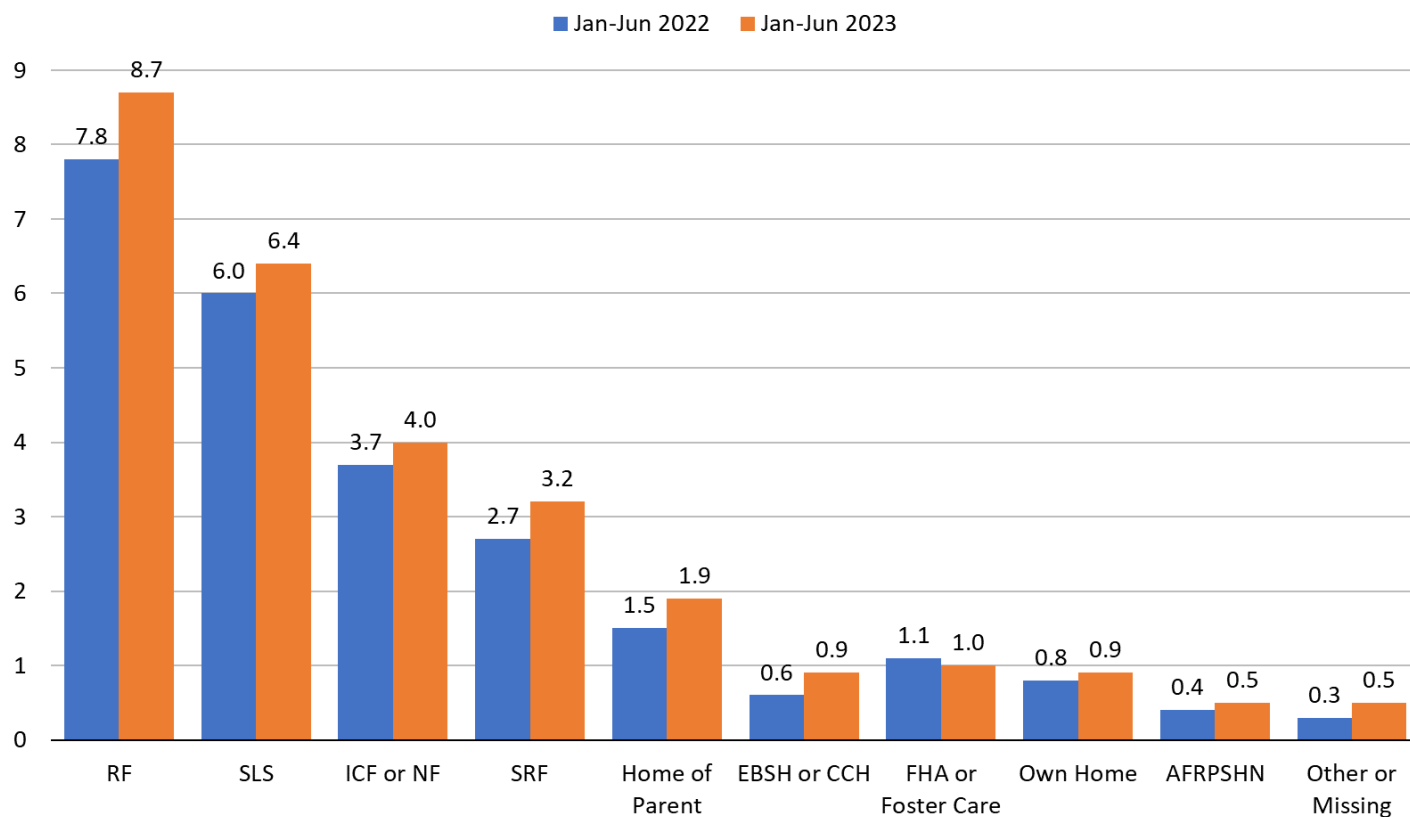
# Non-Mortality Title 17 Incidents by Residence Type

**The rate of non-mortality incidents reported per 1,000 individuals increased for almost all residence types.**

The rates of reported incidents per 1,000 individuals increased for most residential types compared to the same reporting period in 2022. The increase in incidents was experienced both by individuals living in and those residing outside the home of a parent or guardian.

The rate of reported incidents decreased for individuals served by Family Home Agencies or Foster Care.

**Rate of Non-Mortality SIRs per 1,000 Individuals in January-June 2022 and January-June 2023, by Residence Type**



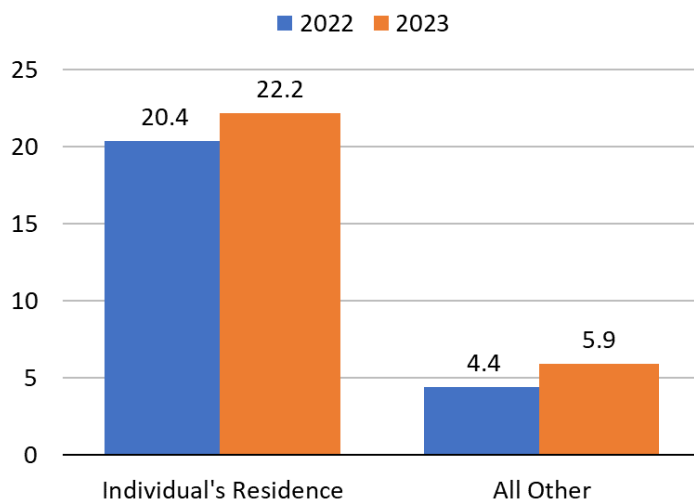
*Please refer to the glossary on page 12 of this report for definitions of these residential types.*

# Non-Mortality Title 17 Incidents by Location

The rate of non-mortality incidents reported per 1,000 individuals increased in individuals' residences and in all other locations.

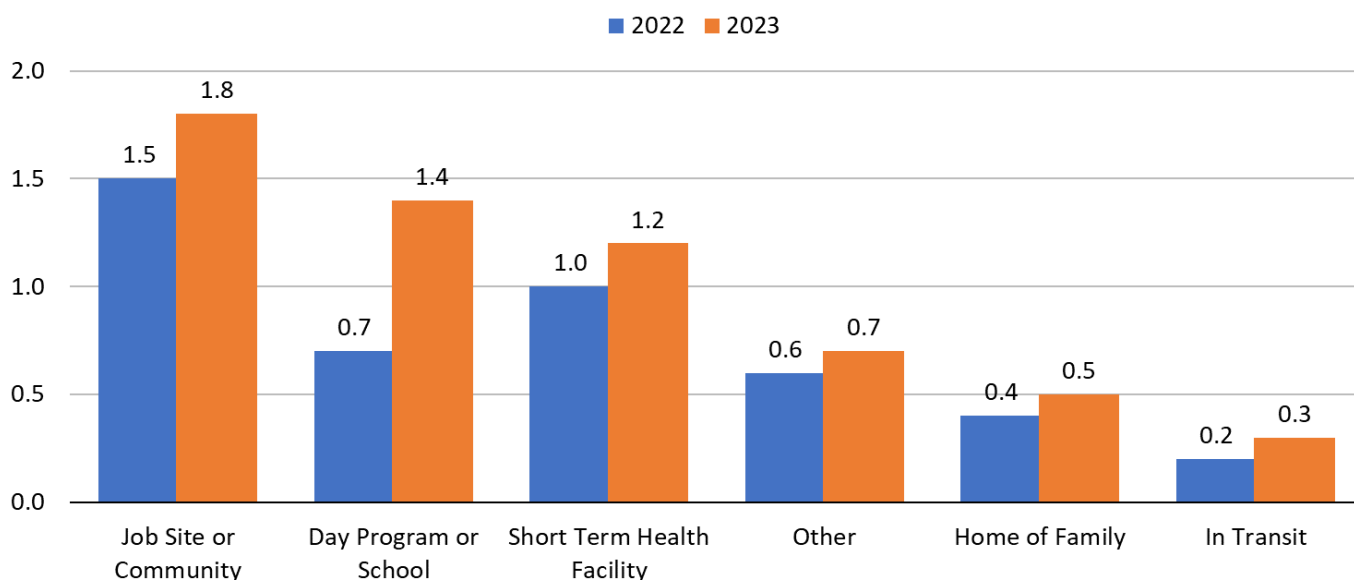
The rate of reported non-mortality incidents that occurred in an individual's residence and in other locations increased from the same reporting period in 2022. Based on regulatory requirements, most non-mortality incidents are reported for individuals who live outside the home of a parent or guardian, representing 20% of all individuals served. Most reported incidents occur in an individual's residence.

### Non-Mortality Incidents per 1,000 Individuals, January-June, by SIR Location



Larger increases took place for non-mortality incidents reported to have occurred in locations other than the individual's residence. The rate of non-mortality incidents occurring in day programs or schools doubled from the same period in 2022.

### Non-Mortality Incidents per 1,000 Individuals, January-June, by SIR Location (Individual's Residence Excluded)





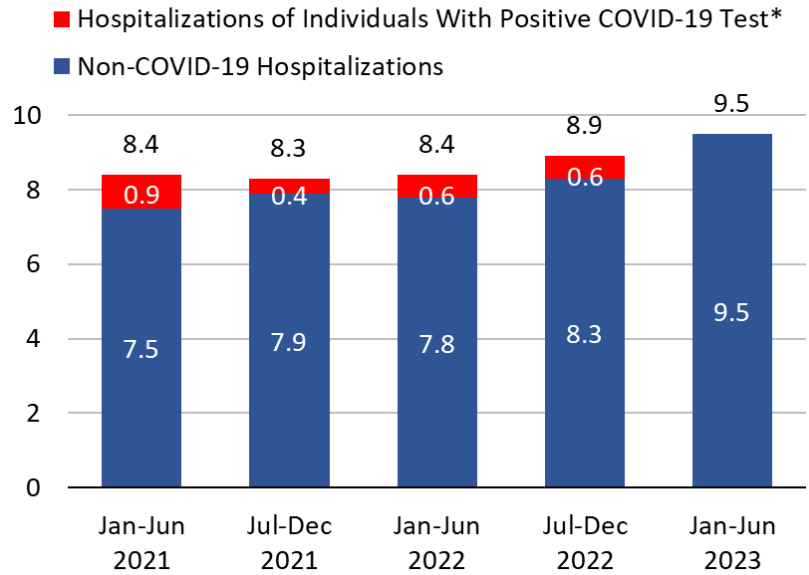
# Unplanned Medical Hospitalization SIRs

## Unplanned medical hospitalizations increased from last period.

During this period, 3,914 unplanned medical hospitalizations were reported, compared to 3,198 in January-June 2022. This is the highest rate of unplanned medical hospitalizations in the last five periods.

With the DDS directive ending the reporting requirement for COVID-19 positive cases in April 2023, fewer than 100 unplanned medical hospitalizations were reported for individuals with a positive COVID-19 test this period.

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



*\*The COVID-19 reporting requirement ended effective April 3, 2023. This category of hospitalizations is not distinguished in the January-June 2023 data.*

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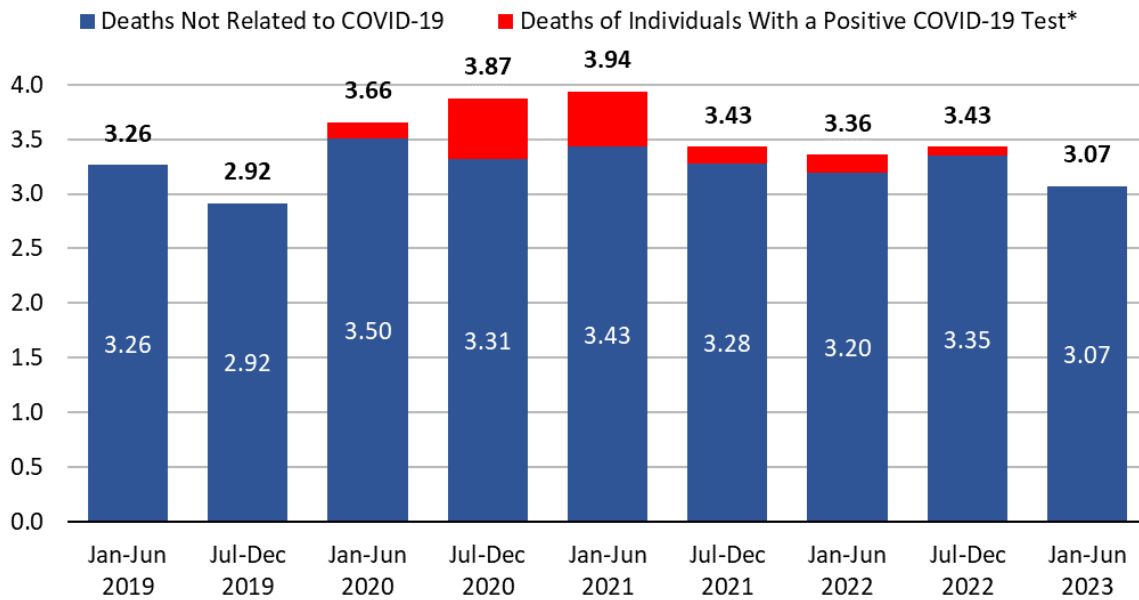
## Mortality Title 17 SIR Trends

# Mortality Title 17 Incidents

**There were fewer deaths reported per 1,000 individuals this period than in any semiannual period since July-December 2019.**

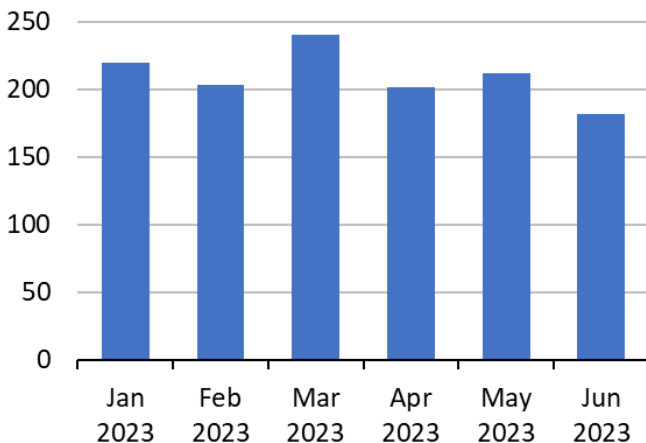
There were 1,259 deaths reported this period. With the DDS directive ending the reporting requirement for COVID-19 positive cases in April 2023, few deaths of individuals with a positive COVID-19 test were reported this period. Deaths of individuals who tested positive for COVID-19 are therefore not distinguished in this period's data.

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



*\* The COVID-19 reporting requirement ended effective April 3, 2023. This category of mortality SIRs is not distinguished in the January-June 2023 data.*

## Deaths Reported by Month, January-June 2023



## Deaths were reported consistently across the months of this period.

The number of deaths reported was slightly higher in January-March 2023. The number of monthly deaths then decreased in June 2023. This trend is consistent with previous years.

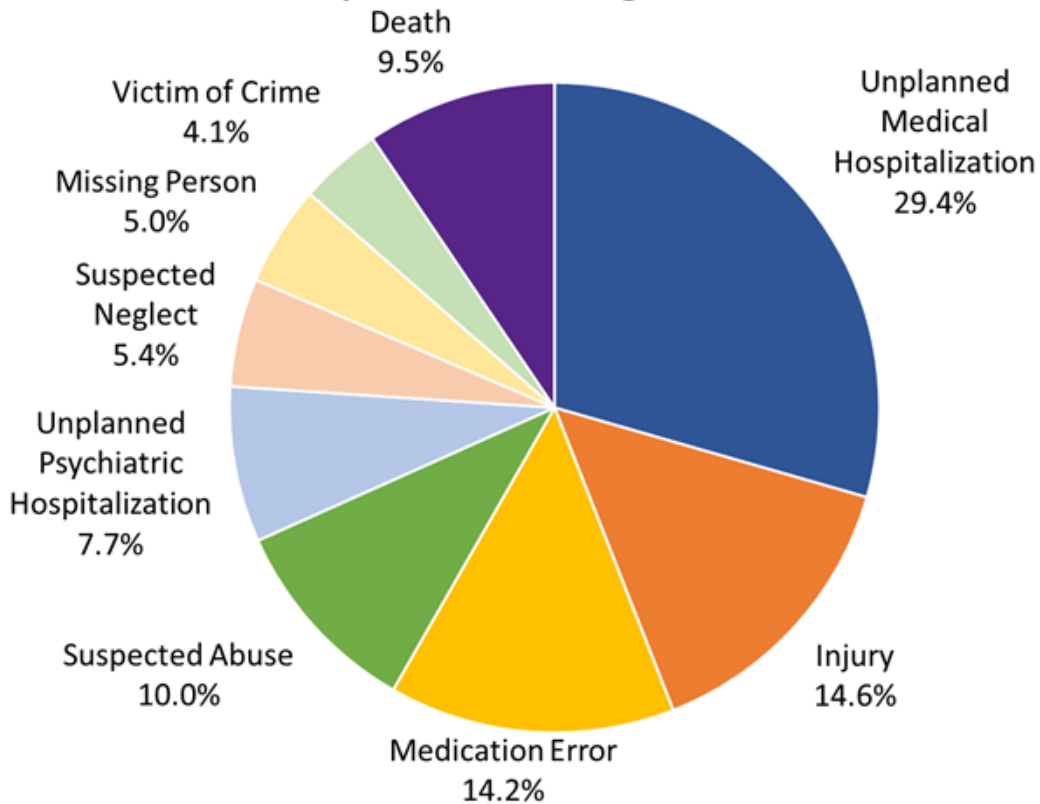
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## Other Title 17 Trends

**DDS Population Served and Count of Title 17 SIRs,  
January-June 2021 to January-June 2023**

Period	DDS Population	All Title 17 SIRs	All Title 17 SIRs Per 1,000
January 2021 – June 2021	363,394	10,387	28.6
July 2021 – December 2021	374,264	10,477	28.0
January 2022 – June 2022	383,955	10,829	28.2
July 2022 – December 2022	394,630	11,898	30.1
January 2023 – June 2023	409,751	12,760	31.1

**Title 17 Reportable Incidents by Incident Type,  
January-June 2023 Among All individuals**



## Incidents by Type and Subtype, January-June 2023

Incident Type and Sub-Type*	All Individuals		Individuals Residing Outside the Home of a Parent/Guardian	
	Incidents	Individuals (N = 409,751)	Incidents	Individuals (N = 69,480)
<b>Unplanned Medical Hospitalization</b>	<b>3,914</b>	<b>2,950</b>	<b>3,796</b>	<b>2,851</b>
Cardiac-related	364	314	349	301
Diabetes	103	90	99	87
Internal infection	1,645	1,381	1,606	1,345
Nutrition deficiency	276	252	274	250
Respiratory illness	1,429	1,178	1,395	1,148
Seizure	389	323	358	296
Wound/skin care	251	229	245	224
<b>Unplanned Psychiatric Hospitalization</b>	<b>1,030</b>	<b>597</b>	<b>993</b>	<b>564</b>
<b>Suspected Abuse</b>	<b>1,333</b>	<b>1,133</b>	<b>1,157</b>	<b>966</b>
Alleged emotional/mental abuse	426	395	368	340
Alleged financial abuse	204	197	194	187
Alleged physical/chemical restraint	96	67	86	57
Alleged physical abuse	551	488	471	412
Alleged sexual abuse	201	190	160	149
<b>Suspected Neglect</b>	<b>716</b>	<b>654</b>	<b>601</b>	<b>544</b>
Fail to assist with personal hygiene	90	86	73	70
Fail to prevent dehydration	13	12	13	12
Fail to prevent malnutrition	8	8	7	7
Fail to provide care-elder/adult	162	153	133	126
Fail to provide food/clothing/shelter	129	126	117	114
Fail to provide medical care	125	121	118	114
Fail to protect from health/safety hazards	322	303	253	235
<b>Injury</b>	<b>1,941</b>	<b>1,743</b>	<b>1,833</b>	<b>1,637</b>
Bite	75	63	67	55
Burns	47	45	42	40
Fracture	645	632	609	596
Dislocation	69	63	61	55
Internal bleeding	497	445	482	430
Lacerations/sutures/staples	602	560	564	523
Medication reactions	71	69	70	68
Puncture wounds	25	25	20	20
<b>Medication Error</b>	<b>1,890</b>	<b>1,402</b>	<b>1,857</b>	<b>1,374</b>
<b>Victim of Crime</b>	<b>545</b>	<b>511</b>	<b>379</b>	<b>349</b>
Aggravated assault	305	291	203	193
Burglary	22	21	17	16
Forcible rape or attempted rape	102	97	58	53
Personal robbery	35	34	23	22
Larceny	106	104	95	93
<b>Missing Person</b>	<b>664</b>	<b>399</b>	<b>630</b>	<b>365</b>
<b>Mortality</b>	<b>1,259</b>	<b>1,259</b>	<b>829</b>	<b>829</b>
<b>All Non-Mortality</b>	<b>11,501</b>	<b>7,758</b>	<b>10,735</b>	<b>7,075</b>
<b>All SIRs**</b>	<b>12,760</b>		<b>11,564</b>	
<b>All Incidents***</b>	<b>13,292</b>		<b>12,075</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 12 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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