

Division of Health Improvement  
Incident Management Bureau  
**2024** Fiscal Year  
Annual Report



HEALTH CARE  
AUTHORITY

## Mission Statement

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IMB exists to ensure the health, safety, and well-being of individuals served on the Developmental Disabilities Waiver (DDW), the Mi Via Self-Directed Waiver, adults on the Medically Fragile Waiver, and the Supports Waiver, by investigating allegations of abuse, neglect, exploitation, suspicious injury, environmental hazard, and death.

**Who do we serve?** DHI and its partners provide supports and services to adults who meet eligibility criteria for the Medicaid Developmental Disabilities (DD) Waiver, Mi Via Self-Directed Waiver, the Medically Fragile<sup>1</sup> Waiver program, and the Supports Waiver. Intellectual disability is characterized by limitations both in intellectual functioning (reasoning, problem solving) and in adaptive behavior, which covers a wide range of everyday social and practical skills. The disability originates before the age of 18. “Developmental Disabilities” is an umbrella term that includes intellectual disability but also includes other disabilities that are apparent before the age of 22 and are likely lifelong. Some developmental disabilities are largely physical issues, such as cerebral palsy or epilepsy. Some individuals may have a condition that includes physical and intellectual disability, for example Down syndrome. Some people with developmental disabilities also have significant medical or mental health needs. In FY2024, the number of adults enrolled in I/DD services through the DD Waiver, Mi Via Self-Directed Waiver, the Supports Waiver, and the Medically Fragile Waiver programs reached nearly 7,800 individuals due to recent allocations.

### What is Abuse, Neglect or Exploitation?

**Abuse** is defined as knowingly, intentionally, and without justifiable cause inflicting physical pain, injury, or mental anguish.

\* **Mental Anguish** is defined as a relatively high degree of mental pain and distress that is more than mere disappointment, anger, resentment, or embarrassment, although it may include all of these, and is objectively manifested by the recipient of care or

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<sup>1</sup> For the Medically Fragile waiver, IMB only has authority to investigate cases involving adults. Any allegation involving a child (under the age of 18) on the waiver is referred the Children, Youth and Families Department.

services by significant behavioral or emotional changes or physical symptoms. NMAC 7.1.14.7(Q).

**Sexual Abuse** is defined as the inappropriate touching of a recipient of care or services for sexual purpose or in a sexual manner, and includes kissing, touching the genitals, buttocks, or breasts, causing the recipient of care or services to touch another for sexual purpose, or promoting or observing for sexual purpose any activity or performance involving play, photography, filming, or depiction of acts considered pornographic. Sexual conduct engaged in by an employee with a person for whom they are providing care or services is sexual abuse per se. NMAC 7.1.14.7(AA).

**Verbal Abuse** is defined as profane, threatening, derogatory, or demeaning language, spoken or conveyed with the intent to cause mental anguish. NMAC 7.1.14.7(EE).

**Neglect** is defined as the failure of the caretaker to provide basic needs of a person, such as clothing, food, shelter, supervision, and care for the physical and mental health of that person. Neglect causes or is likely to cause harm to a person. NMAC 7.1.14.7(S).

**Exploitation** is defined as an unjust or improper use of a person's money or property for another person's profit or advantage, financial, or otherwise. NMAC 7.1.14.7(K).

**Suspicious Injuries:** are not defined in the New Mexico Administrative Code; however, some examples of suspicious injuries are listed in the NMAC 7.1.14.

**Environmental Hazard:** is defined as a condition in the physical environment which creates an immediate threat to health and safety of the individual. NMAC 7.1.14.7(J).

## Reporting

In April of 2023, the Incident Management Bureau and The New Mexico Adult Protective Services Department merged to form one Central Intake reporting system. Together, they maintain a 24-hour hotline for reporting abuse, neglect, exploitation, suspicious injury, environmental hazard and death. The hotline number is (866)-654-3219. Individuals can also submit reports online at <https://www.nmhealth.org/about/dhi/ane/rane/>. See NMAC 7.1.14 for Incident Reporting Requirements for Community Providers.

## Immediate Action and Safety Plan (IASP)

**The Immediate Action and Safety Plan (IASP) is required for all assigned allegations of abuse, neglect and exploitation and is utilized to keep the individual safe throughout the course of the investigation.** Some examples of an IASP include:

- Arrange for an individual to stay somewhere temporarily or a permanent move;
- Staff are re-trained on the individual's plans.
- Offer information on obtaining a protection order (restraining order, stalking order, sexual assault order, guardianship);
- Assist with obtaining medical assistance or assessment;
- Staff person accused of abuse is put on administrative leave or moved to a different type of position.

### Categories of Protective Services

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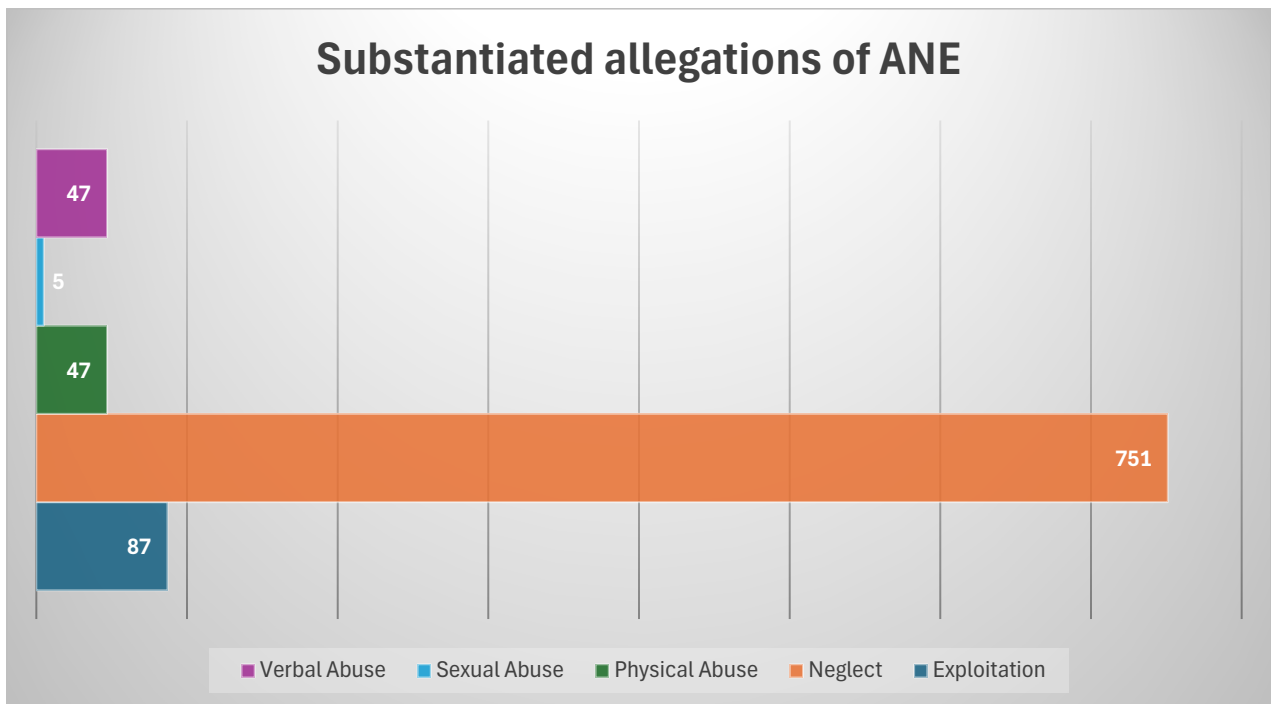
- Advocacy
- Alternative living arrangement
- Counseling
- Legal Services
- Medical Services
- Mental state examination
- Physical state examination
- Removal of staff involved



## FY24 IMB Descriptive Data

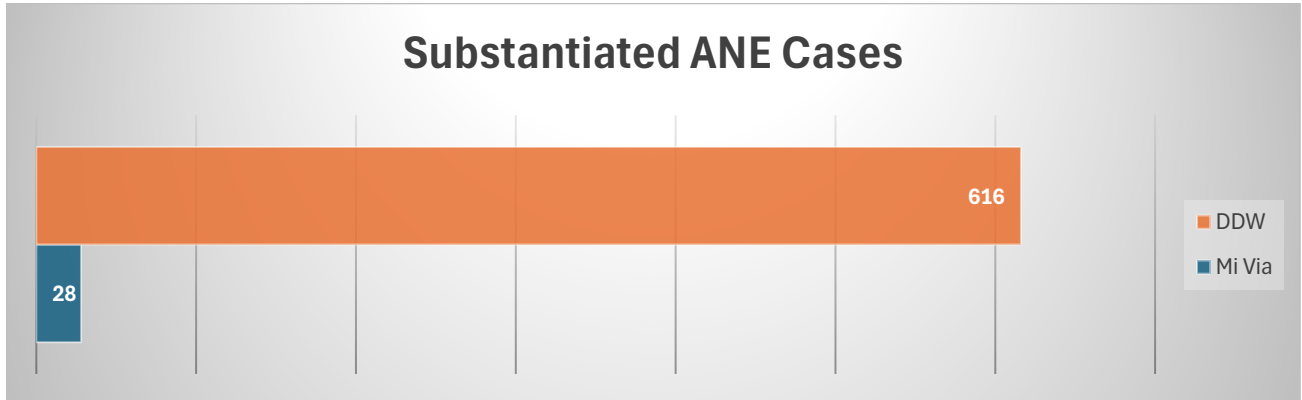
For FY24, IMB captured data regarding the overall types of abuse, neglect and exploitation experienced by individuals in the waiver systems as well as the types of abuse and causations for neglect. IMB also categorized the type and number of referrals made to outside agencies.

In FY24 as of 06/30/2024: IMB substantiated 644 cases which involved a total of 937 allegations of abuse, neglect, and exploitation



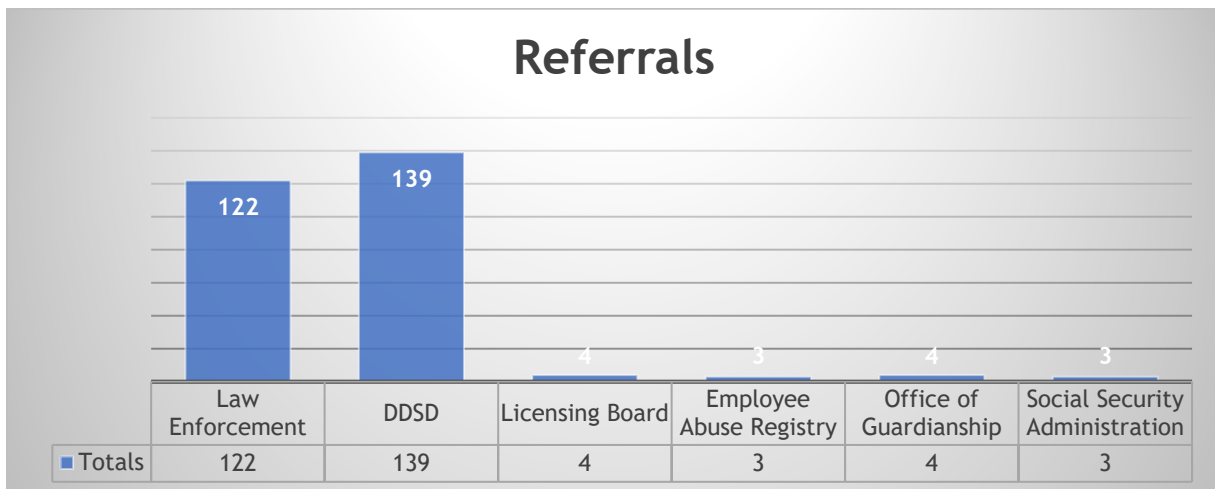
## ANE Substantiations by Waiver Program

The Mi Via Waiver Program makes up approximately 41% of the waiver system and accounts for only 6% of ANE reports for FY24. Of the 644 substantiated cases, only 28 involved a Mi Via Participant. Approximately 191 reports of ANE were reported for Mi Via recipients in FY24.



## Referrals

IMB makes a number of referrals to outside agencies for further action such as law enforcement agencies for criminal prosecution, abuse registry placement, licensing board review, guardianship referrals, and the DDS for provider contract management. IMB also collaborates with the New Mexico Department of Justice when cases involve criminal activity and/or Medicaid fraud and elder abuse.



**In FY24, IMB made 275 referrals to outside agencies for intervention.**

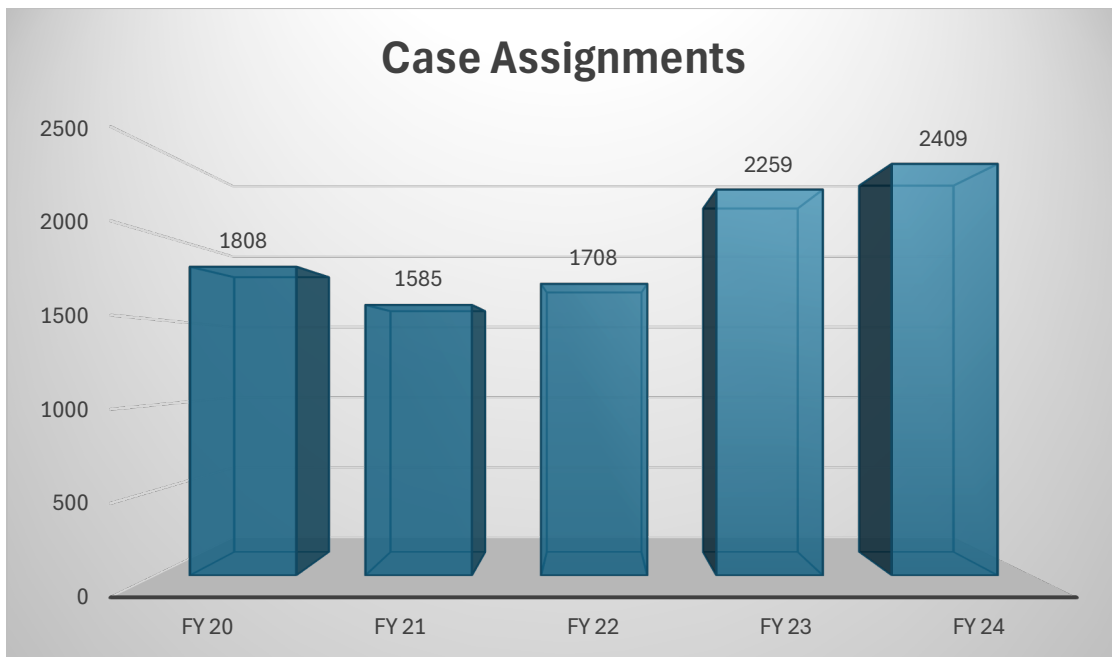
## Causation

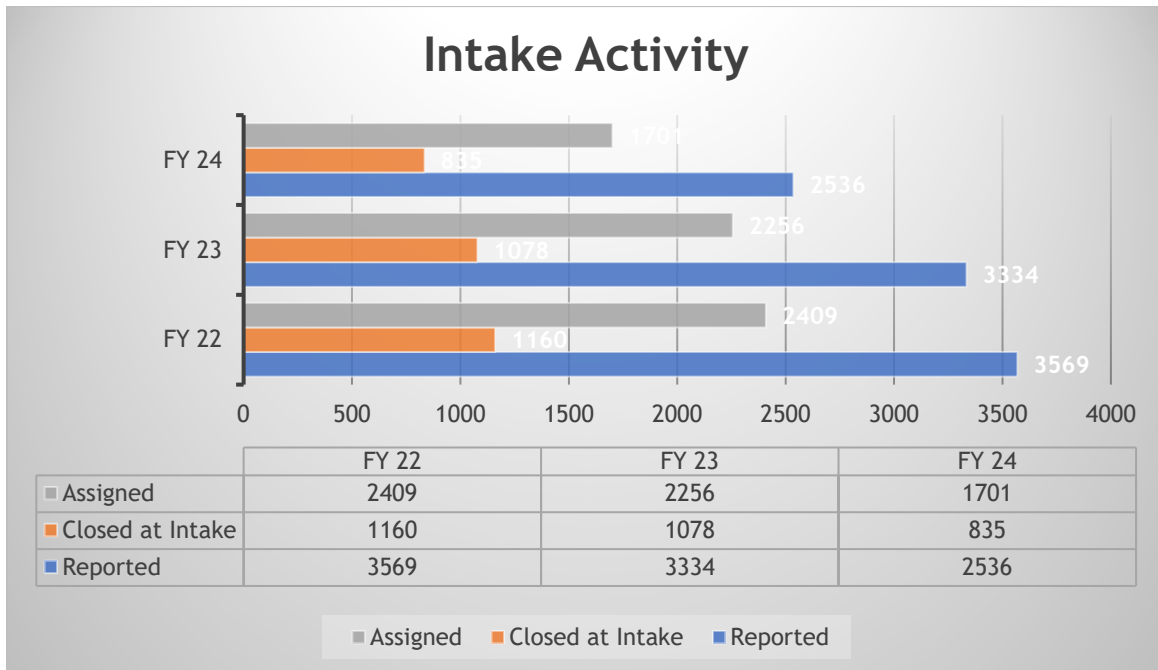
IMB has been collecting information on the causes and contributing factors of ANE; more specifically related to Neglect. Reported allegations of Neglect accounted for 78.0% of all IMB investigations in FY24.

IMB has identified 16 common causes of Neglect, including the five most common conditions that lead to premature death of people with I/DD which include: aspiration, supervision, dehydration, failure to follow service plans and sepsis. The 16 causes are aspiration, constipation, dehydration, delay in medical treatment, domestic violence, falls, human rights abuses, medication errors, pressure ulcers, sepsis, failure to follow healthcare plans, lack of appropriate supervision, the use of restraints, and lack of training. The top three causations for substantiated neglect allegations in FY24 were: 1). Service Plans not being followed 2). Supervision and 3). Training.

## Case Assignments

In FY24 there were a total of 2,409 case assignments of reported ANE. This is the highest case assignment number in the history of IMB. Below is a five year comparison for case assignments.





**How is the Division of Health Improvement working to prevent abuse of individuals with intellectual and developmental disabilities?** The Incident Management Bureau (IMB) serves individuals with I/DD by assessing needs and providing protective services in community-based programs through investigations of allegations of abuse, neglect, and exploitation, often collectively referred to as “abuse” or ANE. New Mexico state law requires all persons with knowledge about potential ANE to report; this includes people who work directly with individuals with I/DD. All family, friends and people who provide support can report abuse. Reports also come from law enforcement, medical providers, and other sources. There is a 24-hour ANE reporting hotline to increase reporting availability and efficiency in responding to urgent situations.

- An IMB Intake Specialist gathers preliminary information to assess the need for protection of the vulnerable adult and determine if a situation meets the definitions of abuse, neglect, or exploitation (ANE). An adult is considered anyone over 18 years of age. The **Community-Based Provider**, Mi Via Consultant, or Community Supports



Consultant is responsible for delivery of an immediate action and safety plan (IASP) and is required to update the IASP if instructed to by the assigned Investigator.<sup>2</sup>

- Once it is determined that an allegation meets the definition of abuse, neglect, or exploitation, as defined by the New Mexico Administrative Code (NMAC), the case is screened in, and an Investigator is assigned. The case is assigned a Priority Level, depending on the seriousness of the allegation. An Emergency requires the Investigator to respond within three hours, a Priority One allegation requires a 24-hour response and a Priority Two requires the Investigator respond within five calendar days.
- The Investigator will begin an investigation into the nature and cause of the abuse. The Immediate Action and Safety Plan (IASP) is continually assessed to ensure the health and safety of the alleged victim while the investigation progresses. Examples of actions that can be taken in an IASP can be found below.
- The Investigator also makes a mandatory report to law enforcement if they believe a crime has been committed, if the provider agency or others have not already done so.
- When an investigation is complete, the investigator determines a finding: either Substantiated or Unsubstantiated based on a preponderance of the evidence.
- Next, the Investigator requests a corrective/preventive action plan from the Provider agency (or the consultant or community supports coordinator) if an allegation is substantiated and an Interdisciplinary team (IDT) meeting be held by the case manager, (notification of the substantiation will be received in the form of a Decision Letter) detailing what actions will be taken to ensure the individual remains safe. These corrective/preventive actions and IDT meetings are individually tailored to each situation. The purpose of corrective/preventive actions and IDT meetings are to mitigate risk, increase safety, and provide education and training, based on deficient practice. An example of corrective/preventive actions could include re-training on healthcare plans, mandatory abuse, neglect, and exploitation reporting training for all program staff, updating the person's Individual Service Plan,

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<sup>2</sup> If the person is under 18 years of age, the report is forwarded to the Children, Youth and Families Department (CYFD).

re-evaluating the need for increased supervision or disciplinary action for the agency employee, including termination of employment, for serious violations.

As the waiver population continues to expand, safeguards for prevention of abuse, neglect and exploitation are of paramount importance and preventive actions should be seen as a shared responsibility between providers, the Department of Health and our community partners. IMB is working closely with the DDS to develop risk models with IMB data, meant to identify individuals most at risk for ongoing maltreatment while continuing to advocate for more prevention activities.

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