Innovations in the Implementation of Preventive Strategies and Measuring Their Effectiveness Towards the Prevention of Harmful Incidents to People with Mental Disabilities who Receive Home and Community Based Services

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Abstract : Background: Providers of in-home and community based services strive for the elimination of preventable harm to the people under their care as well as to the employees who support them. Traditional models of safety and protection from harm have assumed that the absence of incidents of harm is a good indicator of safe practices. However, this model creates an illusion of safety that is easily shaken by sudden and inadvertent harmful events. As an alternative, we have developed and implemented an evidence-based resilient model of safety known as C.O.P.E. (Caring, Observing, Predicting and Evaluating). Within this model, safety is not defined by the absence of harmful incidents, but by the presence of continuous monitoring, anticipation, learning, and rapid response to events that may lead to harm. Objective: The objective was to evaluate the effectiveness of the C.O.P.E. model for the reduction of harm to individuals with mental disabilities who receive home and community based services. Methods: Over the course of 2 years we counted the number of incidents of harm and near misses. We trained employees on strategies to eliminate incidents before they fully escalated. We trained employees to track different levels of patient status within a scale from 0 to 10. Additionally, we provided direct support professionals and supervisors with customized smart phone applications to track and notify the team of changes in that status every 30 minutes. Finally, the information that we collected was saved in a private computer network that analyzes and graphs the outcome of each incident. Result and conclusions: The use of the COPE model resulted in: A reduction in incidents of harm. A reduction the use of restraints and other physical interventions. An increase in Direct Support Professional's ability to detect and respond to health problems. Improvement in employee alertness by decreasing sleeping on duty. Improvement in caring and positive interaction between Direct Support Professionals and the person who is supported. Developing a method to globally measure and assess the effectiveness of prevention from harm plans. Future applications of the COPE model for the reduction of harm to people who receive home and community based services are discussed.