

LAKE COUNTY BOARD OF DD/DEEPWOOD

BOARD POLICY

Reviewed and Adopted by the Board:
Date: August 17, 2015

Signature on File
Elfriede Roman, Superintendent

I. SUBJECT: REPORTING AND HANDLING OF MAJOR UNUSUAL INCIDENTS/UNUSUAL INCIDENTS

II. PURPOSE:

To define unusual incidents/major unusual incidents and to establish procedures for prompt and accurate handling and reporting of unusual incidents/major unusual incidents (UI's/MUI's). To promote the timely investigation of UI's/MUI's by the appropriate authority and the implementation of corrective action.

III. REFERENCES:

42 CFR 483.420 Conditions of Participation: Client Protections

Ohio Revised Code

5123.61 Duty to report abuse neglect and other major unusual incidents;

5123.62 Rights of persons with a developmental disability

2151.421 Reporting child abuse or neglect

2151.03 Neglected child defined - failure to provide medical or surgical care for religious reasons

2151.031 Abused child defined

Ohio Administrative Code

5123:2-17-02 Addressing major unusual incidents and unusual incidents to ensure health, welfare, and continuous improvement

5123-2-7-01 Intermediate Care Facilities - Definitions

5123:2-2-06 Behavioral support strategies that include restrictive measures

5123:2-5-07 Investigative agent certification standards

5123:2-2-01 Provider Certification

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IV. DEFINITIONS

- A. “**Agency Provider**” means a provider, certified or licensed by the Ohio Department of Developmental Disabilities (DODD), or a provider approved by the Ohio Department of Medicaid to provide the Transitions Developmental Disabilities (TDD) waiver, that employs staff to deliver services to individuals and may subcontract the delivery of services. “Agency Provider” includes a county board while providing specialized services.
- B. “**At Risk Individual**” means an individual whose health or welfare is adversely affected or health or welfare may reasonably be considered to be in danger of being adversely affected.
- C. “**Incident Report**” means documentation that contains details about a major unusual incident or unusual incident and shall include, but is not limited to: the individual’s name; individual’s address; date of incident; location of incident; description of incident; type and location of injuries; immediate actions taken to ensure health and welfare of individual involved and any at-risk individuals; name of the primary person involved and his or her relationship to the individual; names of witnesses; statements completed by persons who witnessed or have personal knowledge of the incident; notifications with name, title, and time and date of notice; further medical follow-up; and printed name and signature of the person completing the incident report.
- D. “**Independent Provider**” means a self-employed person who provides services for which he or she must be certified under rule 5123:2-2-01 of the Administrative Code or a self-employed person approved by the Ohio Department of Medicaid to provide services under the Transitions Developmental Disabilities waiver and does not employ, either directly or through contract, anyone else to provide the services.
- E. “**Individual**” means a person with a developmental disability (DD).
- F. “**Intermediate Care Facility**” (ICF) means an intermediate care facility for individuals with intellectual disabilities as defined in rule 5123:2-~~2~~-7-01 of the Administrative Code.
- G. “**Primary Person Involved**” (PPI) means the person alleged to have committed or to have been responsible for the Physical Abuse, Sexual Abuse, Verbal Abuse, Exploitation, Failure to Report, Misappropriation, Neglect, Prohibited Sexual Relations, Rights Code Violation, or Suspicious/Accidental Death of an individual

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with DD.

- H. **“Provider”** means any Agency or Independent provider.
- I. **“Specialized Services”** means any program or service designed and operated to serve primarily individuals, including a program or service provided by an entity licensed or certified by DODD.
- J. **“Major Unusual Incident” (MUI)** means the alleged, suspected or actual occurrence of an incident when there is reason to believe that the health or welfare of an individual may be adversely affected or an individual may be placed at a reasonable risk of harm, if such an individual is receiving services through the developmental disabilities service delivery system or will be receiving services as a result of the incident. There are three categories of major unusual incidents that correspond to three administrative investigation procedures delineated in Appendix “A,” “B” and “C” of the state “MUI Rule” (5123:2-17-02). MUI’s include the following:

Category A

- 1. **“Abuse”**
 - a) **“Physical Abuse”** means the use of physical force that can be reasonably expected to result in physical harm or serious physical harm as those terms are defined in section 2901.01 of the Revised Code. Such force includes, but is not limited to, hitting, slapping, pushing or throwing objects at an individual.
 - b) **“Sexual Abuse”** means unlawful sexual conduct or sexual contact as those terms are defined in section 2907.01 of the Revised Code and the commission of any act prohibited by section 2907.07; 08; and 09 of the Revised Code (e.g., public indecency, importuning and voyeurism).
 - c) **“Verbal Abuse”** means the use of words, gestures or other communicative means to purposely threaten, coerce, intimidate, harass, or humiliate an individual.
- 2. **“Accidental or Suspicious Death”** means the death of an individual resulting from an accident or suspicious circumstances.
- 3. **“Exploitation”** means the unlawful or improper act of using an individual or an individual’s resources for monetary or personal benefit, profit or gain.
- 4. **“Failure To Report”** means that a person, who is required to report pursuant to section 5123.61 of the Revised Code [includes all county board employees

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and providers], has reason to believe that an individual has suffered or faces a substantial risk of suffering any wound, injury disability, or condition of such a nature as to reasonably indicate abuse, misappropriation, or exploitation that results in a risk to health and welfare or neglect of that individual, and such person does not immediately report such information to a law enforcement agency, a county board, or, in the case of an individual living in a developmental center, either to law enforcement, or the Ohio Department of DD. Pursuant to division (C) (1) of section 5123.61 of the Revised Code, such report shall be made to the Ohio Department of DD and the county board when the incident involves an act or omission of an employee of a county board.

5. **“Misappropriation”** means depriving, defrauding, or otherwise obtaining the real or personal property of an individual by any means prohibited by the Revised Code, including chapters 2911 and 2913.
6. **“Neglect”** means, when there is a duty to do so, failing to provide an individual with any treatment, care, goods, supervision, or services necessary to maintain the health or welfare of the individual.
7. **"Peer-to-Peer Act"** means one of the following incidents involving two individuals served:
 - (a) **“Exploitation”** which means the unlawful or improper act of using an individual or an individual’s resources for monetary or personal benefit, profit, or gain.
 - (b) **“Theft”** which means intentionally depriving another individual of real or personal property valued at twenty dollars or more or property of significant personal value to the individual.
 - (c) **“Physical Act”** that occurs when an individual is targeting, or firmly fixed on another individual such that the act is not accidental or random and the act results in an injury that is treated by a physician, physician assistant, or nurse practitioner. Allegations of one individual choking another or any head or neck injuries such as a bloody nose, a bloody lip, a black eye or other injury to the eye, shall be considered MUIs. Minor injuries such as scratches or reddened areas not involving the head or neck shall be considered unusual incidents and shall require provider immediate action, a provider review to uncover possible cause/contributing factors, and provider prevention measures.
 - (d) **“Sexual Act”** which means sexual conduct and/or contact for the purposes of sexual gratification without the consent of the other individual.
 - (e) **“Verbal Act”** which means the use of words, gestures, or other

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communicative means to purposely threaten, coerce, or intimidate the other individual when there is the opportunity and ability to carry out the threat.

8. **“Prohibited Sexual Relations”** means a developmental disabilities (DD) employee engaging in consensual sexual conduct or having consensual sexual contact with an individual who is not the employee's spouse, and for whom the DD employee was employed or under contract to provide care or supervise the provision of care at the time of the incident.
9. **“Rights Code Violation”** means any violation of the rights enumerated in Section 5123.62 of the Revised Code that creates a likely risk of harm to the health or welfare of an individual.

Category B

1. **“Attempted Suicide”** means a physical attempt by an individual that results in emergency room treatment, in-patient observation, or hospital admission.
2. **“Death Other Than Accidental or Suspicious Death”** means the death of an individual by natural cause without suspicious circumstances.
3. **“Medical Emergency”** means an incident where emergency medical intervention is required to save an individual's life (e.g., choking relief techniques such as back blows or cardiopulmonary resuscitation, epinephrine auto injector usage, or intravenous for dehydration.)
4. **“Missing Individual”** means an incident that is not considered Neglect and an individual's whereabouts, after immediate measures taken, are unknown and the individual is believed to be at or pose an imminent risk of harm to self or others. An incident when an individual's whereabouts are unknown for longer than the period of time specified in the individual service plan that does not result in imminent risk of harm to self or others shall be investigated by the provider as an unusual incident.
5. **“Significant Injury”** means an injury of known or unknown cause that is not considered abuse or neglect and that results in concussion, broken bone, dislocation, second or third degree burns or that requires immobilization, casting, or five or more sutures. Significant injuries shall be designated in the incident tracking system as either known or unknown cause.

Category C

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1. “**Law Enforcement**” means any incident that results in the individual served being arrested, charged, or incarcerated.
 2. “**Unapproved Behavior Support**” means the use of a restrictive measure or intervention prohibited by O.A.C. 5123:2-2-06 Behavioral Support Strategies that Include Restrictive Measures or a restrictive measure implemented without approval by the human rights committee or positive intervention committee or without informed consent, that results in a likely risk to the individual’s health and welfare. A restrictive measure or intervention prohibited by paragraph (J) of rule 5123:2-1-02 of the Administrative Code that does not pose a likely risk to health and welfare shall be investigated by the provider as an unusual incident.
 3. “**Unscheduled Hospitalization**” means any hospital admission that is not scheduled unless the hospital admission is due to a pre-existing condition that is specified in the individual service plan indicating the specific symptoms and criteria that require hospitalization.
- K. “**Unusual Incident**” (UI) means an event or occurrence involving an individual with DD, which is not consistent with routine operations, policies, procedures, or the care or individual service plan of the individual, but is not a “Major Unusual Incident (MUI).” Unusual Incident (UI) includes, but is not limited to, medication errors without a likely risk to health and welfare; falls; peer-to-peer incidents that are not MUIs; overnight relocation of an individual due to fire, natural disaster, or mechanical failure; dental injuries; an injury that is not a significant injury; and rights code violations or unapproved behavior supports without a likely risk to health and welfare.

V. POLICY:

It is the policy of the Lake County Board of Developmental Disabilities/Deepwood to require that all providers have procedures in place that ensure that unusual incidents/ major unusual incidents are promptly and accurately reported, thoroughly investigated, causes/contributing factors are identified and that appropriate prevention measures are taken.

It is also the policy of the Lake County Board that a review system of all unusual incidents be maintained that allows for the tracking of incidents and the monitoring of Agency-wide trends and patterns. It is also Board policy that all documentation and records involving the reporting and handling of unusual incidents are confidential in nature and subject to Board policies and procedures regarding the handling of confidential material. It is the responsibility of each employee, whether full-time, part-time or substitute, to be thoroughly

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familiar with this policy and related procedures.

A. Documentation and Investigation of Unusual Incidents/Major Unusual Incidents

1) **Unusual Incidents (UIs)**

Any county board employee, Agency provider employee or Independent provider witnessing, becoming aware of and/or responding to an unusual incident shall first take appropriate action to ensure the health and welfare of at risk individuals. Next, he/she is to fill out and submit to the appropriate manager/designee a completed UI/MUI Reporting Form. This report will be completed as soon as possible, but no later than the ending of his/her shift on the day of the occurrence. If the incident is a possible MUI, it shall be reported immediately to the appropriate manager/designee.

All incident report forms are primarily to be used for individual related purposes and as such are to be handled, stored and maintained as confidential individual information.

Each Agency provider and each individual service department of the Board, shall establish a policy/procedure that identifies what is to be reported as a UI; requires anyone who becomes aware of a UI to report it to the person/position designated by the provider/department who can initiate proper action; the timely completion of an Incident Report form; and requires that an investigation, including the identification of causes/contributing factors and preventive actions be taken to protect the health and welfare of individuals. Agency providers and the county board as a provider shall ensure that its respective staff is trained and knowledgeable regarding MUI/UI Agency policies and MUI /UI departmental procedures.

Independent providers shall report UIs by notifying the individual's guardian or other person whom the individual has identified on the same day that the incident occurs. The Independent provider shall also complete a Consumer Incident Reporting Form and fax (440-350-5125) or deliver a copy to the assigned Service and Support Administrator (SSA) on the same day the unusual incident occurred or is discovered. Supported Living providers, Ohio Department of DD Home and Community-Based Service waiver providers, Transition Developmental Disabilities (TDD) providers, and the county board as a waiver provider shall submit copies of Consumer Incident Reporting Forms to the Service and Support Administration Department (fax # 440-350-5125) as soon as possible, but at least on a weekly basis.

If the UI occurs at a site operated by the county board or at a site operated by

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an entity with which the county board contracts, the county board or contract entity shall notify the licensed provider, staff, family, guardian or other person whom the individual has identified, as applicable, at the individual's home. The notification shall be made the same day that the incident is discovered. All incidents are to be reported to the individual's applicable legal representative as required by the regulations governing that specific program/provider, and when appropriate, other persons having care responsibilities for the individual. When an individual has an incident which may cause the need for any type of response in an adjoining area of his/her life (i.e., day program to residential/residential to day program), the environment where the incident occurred will inform the second service area of the details, to enable them to support the individual through the period of time close to the incident.

UI Logs

Agency providers and Independent providers shall review all UIs as necessary, but no less than monthly, to ensure appropriate preventive measures have been implemented and trends and patterns identified and addressed as appropriate. Each Agency provider and Independent provider shall maintain a log of UIs. The log shall include, but not be limited to, the name of the individual, a brief description of the incident, any injuries, time, date, location, preventive measures and whether the incident was reported to the county board as a potential/determined MUI. The Agency provider and the county board shall ensure that trends and patterns of unusual incidents are included and addressed in the ISP of each individual affected. The Board's Unusual Incident Review (UIR) Committee shall meet monthly and review logs maintained by providers to ensure that MUIs required to be reported have been reported and that patterns and trends have been identified and addressed.

2) **Major Unusual Incidents (MUIs)**

The manager/designee of the service provider where an incident occurs will immediately take all reasonable measures to ensure the individual's health and welfare, including immediate and ongoing medical attention, as appropriate; and/or removal of an employee from direct contact when the employee is alleged to have been involved in abuse or neglect until such time as the provider has reasonably determined that such removal is no longer necessary; and other necessary measures to protect the health and welfare of at risk individuals. Providers shall report all potential or determined MUI's to the Lake County Board of DD/Deepwood **MUI Reporting Line** (440-350-5145; or 440-918-5145) and then fax a fully completed and signed UI/MUI

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Reporting Form to MUI fax # **440-350-5143** by 3:00 P.M. the next working day following the provider's initial knowledge of the MUI. The provider or county board staff shall immediately but no later than four hours after discovery of the incident notify the MUI Reporting Line (**440-350-5145**; or **440-918-5145**) of all possible or determined MUI's under any of the following circumstances:

- a) The incident involves any of the following possible MUIs: Physical Abuse; Sexual Abuse; Verbal Abuse; Exploitation; Misappropriation; Neglect; Peer-to-Peer Act; Accidental or Suspicious Death;
- b) The provider has received inquiries from the media regarding a MUI;

Reports of MUIs involving Physical Abuse, Sexual Abuse, Verbal Abuse, Neglect, Exploitation, Misappropriation, Law Enforcement, Missing Individual, Peer to Peer Act, Prohibited Sexual Relations, Attempted Suicide, Failure to Report and Death shall be filed in all cases regardless of where the incident occurred. Reports regarding the remaining categories of MUIs (Significant Injury, Medical Emergency, Unapproved Behavior Support, Unscheduled Hospitalization, and Rights Code Violation) shall be filed only when the incident occurs in a program operated by a county board or when the individual is being served by a licensed or certified provider. Reports regarding all MUIs involving an individual who resides in an ICF or who receives round-the-clock waiver services shall be filed regardless of where the incident occurred or whether the person was receiving services at the time.

An Investigative Agent, pursuant to section 5126.221 of the Revised Code, and 5123:2-5-07 of the Administrative Code will complete an investigation of the MUI following rules set forth in 5123:2-17-02, including Appendix A, B and C. Non-Investigative Agent staff may assist an Investigative Agent by gathering documents or entering information into the incident tracking system (ITS), fulfilling category C administrative investigation requirements or performing other administrative or clerical duties that are not specific to the Investigative Agent role. Except when law enforcement or the public children's services agency is conducting the investigation, the Investigative Agent shall conduct all interviews for MUIs unless the investigator determines the need for assistance with interviewing an individual. For an MUI occurring at an ICF, the Investigative Agent may utilize interviews conducted by the ICF or conduct his/her own interviews. If the Investigative Agent determines the information is reliable, the Investigative Agent may utilize other information received from law enforcement, public children's

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services agency or providers in order to meet the requirements of 5123:2-17-02. If an investigation requirement cannot be met, or is not relevant to a specific MUI, the Investigative Agent shall document the reason(s).

An ICF is required to conduct an investigation regardless of where an incident involving an individual occurs. The ICF investigation must comply with applicable federal regulations, including 42 C.F.R.483.420 (October 1, 2012). The Investigative Agent may utilize information from the ICF investigation or conduct a separate investigation. A copy of the county board investigation shall be provided to the ICF and a copy of the ICF investigation shall be provided to the county board.

When an Agency provider conducts an internal review of an incident for which an MUI has been filed, the Agency shall submit the results of its internal review of the incident, including statements and documents, to the county board within fourteen days of the Agency becoming aware of the incident.

All developmental disabilities employees/administrators shall fully cooperate with investigations, including interviews and completion of written statements. Providers and county boards shall respond to Investigative Agent requests for information within the timeframe requested. The timeframe requested shall be reasonable. County board employees cannot disclose information regarding the involved individual or MUI investigation to anyone other than involved managers, Investigative Agents, law enforcement and/or as part of an Individual Plan meeting (e.g., to discuss preventive measures) and will be subject to discipline if violations of this confidentiality occur.

The individual's team, including the Service and Support Administrator (SSA) and/or provider(s), shall collaborate on the development of preventive measures to address the causes and contributing factors to the MUI. The team members shall jointly determine what constitutes reasonable steps necessary to prevent reoccurrence of the MUI. For category "A" and "B" MUIs, the provider will submit a copy of the Lake County prevention plan form to the county board Investigative Agent within fourteen days of the MUI filing. The provider and/or SSA will submit (within fourteen days) the DODD Unapproved Behavior Support, Unscheduled Hospitalization or Law Enforcement follow-up form, as applicable, for category "C" MUIs.

The county board's Investigative Agent shall complete a report of the MUI investigation and submit it for closure into DODD's Incident Tracking

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System (ITS) within thirty working days unless DODD grants an extension. No later than five working days following the Investigative Agent's recommendation via the ITS that the category "A" or "B" MUI be closed, the Investigative Agent shall provide a written summary of the MUI, including preventive measures to the following parties unless the information in the written summary has already been communicated: (1) the individual, the individual's legal guardian or other person who the individual has identified; (2) the licensed or certified provider and provider at the time of the incident; (3) the Service and Support Administrator and Support Broker, as applicable. Written summaries are not provided for category "C" MUIs (Law Enforcement, Unapproved Behavior Support and Unscheduled Hospitalizations). In the case of an individual's death, the written summary shall be provided to the individual's family, only upon request by the individual's family.

The written summary shall not be provided to the PPI, the PPI's spouse, or the PPI's significant other. No later than five working days following closure of a case, the county board shall make a reasonable attempt to notify the PPI as to whether the MUI has been substantiated, unsubstantiated/insufficient evidence, or unsubstantiated/unfounded. If there is no Service and Support Administrator, individual team, Qualified Intellectual Disability Professional, or Agency provider involved with the individual, a county board designee shall be responsible for ensuring that the preventive measures developed in response to the MUI and included in the written summary are, as reasonably possible, implemented. An individual, individual's guardian, other person who the individual has identified, or provider may dispute the findings by submitting a letter of dispute and supporting documentation to the county board Superintendent within 15 calendar days. The county board Superintendent or his/her designee shall consider the letter of dispute, the supporting documentation and any other relevant information and issue a determination within 30 calendar days and take action consistent with such determination, including confirming or modifying the findings or directing that more information be gathered and the findings be reconsidered.

DODD shall conduct the investigation when the MUI includes an allegation against: the county board Superintendent; a management employee who reports directly to the Superintendent; an Investigative Agent; a Service and Support Administrator; an MUI contact employed by the county board; a current member of a county board; a person having any known relationship with any of the persons specified above when such relationship may present a conflict of interest or the appearance of a conflict of interest; an employee

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of a county board when it is alleged that the employee is responsible for an individual's Death, has committed Sexual Abuse, engaged in Prohibited Sexual activity, or committed Physical Abuse or Neglect resulting in emergency room treatment or hospitalization.

County boards and Agency providers shall implement a written procedure for the internal review of all MUIs and shall be responsible for taking all reasonable steps necessary to prevent the reoccurrence of MUIs.

B. Notification of Outside Authorities/Guardians for MUIs

- 1) The provider shall immediately report to the law enforcement entity having jurisdiction of the location where the incident occurred, any allegation of Physical Abuse, Sexual Abuse, Verbal Abuse, Misappropriation, Peer-to-Peer Act, Exploitation, Failure to Report, or Neglect, which may constitute a criminal act. The provider shall document the time, date and name of the person notified of the alleged criminal act. The county board shall ensure that the notification has been made.

All allegations of Abuse or Neglect as defined in sections 2151.03, 2151.031 and 2151.421 of the Revised Code of an individual under the age of twenty-one years shall be immediately reported to the Lake County Department of Job and Family Services (440-350-4000). The notification may be made by the provider or the county board. The county board shall ensure that the notification has been made.

- 2) By 3:00 P.M. on the working day following notification by the provider or becoming aware of the MUI, a county board Investigative Agent shall enter preliminary information regarding the incident through DODD's online system.
- 3) The provider, including a county board as a provider, shall make the following notifications, as applicable, when the potential or determined MUI or discovery of the MUI occurs when such provider has responsibility for the individual. The notification shall be made on the same day the potential MUI or discovery of the potential MUI occurs and include immediate actions taken: (a) Guardian or other person whom the individual has identified. (b) Service and Support Administrator (SSA) serving the individual. (c) Licensed or certified residential provider. (d) Staff or family living at the individual's home who have responsibility for the individual's care. (e) Support Broker for an individual enrolled in the Self-Employed Life Funding Waiver. (f) The residential provider will notify the day program provider

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when the incident may have an impact on the individual's day services. Names and identifiers of other individuals involved in the incident shall not be released to family/guardians. Any person violating this policy shall be subject to disciplinary action based on the improper disclosure of confidential material. The above notifications or efforts to notify shall be documented. The county board shall ensure that all required notifications have been made.

- 4) Notification shall not be made if the person to be notified is the primary person involved (PPI), the PPI's spouse, or the PPI's significant other.
- 5) Notification to a person is not required when the report comes from such person or in the case of a death when the family is already aware of the death.
- 6) Notification shall be made to the individuals' guardians and other persons whom the individuals have identified in a Peer-to-Peer Act unless such notification could jeopardize the health and welfare of an individual served.
- 7) In any case where law enforcement has been notified of an alleged crime, DODD may provide notification of the incident to any other provider, developmental center, or county board for whom the PPI works, for the purpose of ensuring the health and safety of any at-risk individual. The notified provider or county board shall take such steps necessary to address the health and safety needs of any at-risk individual and may consult DODD in this regard. DODD shall inform any notified entity as to whether the incident is substantiated. Providers, developmental centers, or county boards employing a PPI shall notify DODD when they are aware that the PPI works for another provider.

C. Review System

1) **Unusual Incident Review Committee (UIRC)**

The Unusual Incident Review Committee, as established by the Superintendent, will meet on a monthly basis, with the expressed intention to review aggregate information from all reported UI/MUIs including those from licensed or certified county board providers.

The role of the Committee will be to look for trends, patterns, and concerns relating to the general safety and well being of individuals served by the board. The Committee will provide feedback to the Superintendent, Program Directors, and the Individual Planning teams. Finally, the Committee will monitor and report on the progress made on corrective action taken by the Superintendent, Program Directors, and/or Individual Planning teams in

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response to issues raised by the Committee. The Committee will establish procedures to guide its activities and actions.

2) **MUI Analyses**

County board operated programs and providers shall analyze MUIs to identify trends/patterns and needed follow-up semi-annually and annually. The semi-annual review shall be cumulative for January 1 through June 30th and include an in-depth analysis. The annual review shall be cumulative for January 1 through December 31st and include an in-depth analysis. All reviews and analyses shall be completed within thirty calendar days following the end of the reporting period and shall contain the following elements:

- (a) Date of review;
- (b) Name of person completing the review;
- (c) Time period of review;
- (d) Comparison of data for previous three years;
- (e) Explanation of data;
- (f) Data for review by MUI category type;
- (g) Specific individuals involved in established trends and patterns (i.e., five MUIs of any kind within six months, ten MUIs of any kind within a year, or other pattern identified by the individual's team);
- (h) Specific trends by residence, region, or program;
- (i) Previously identified trends and patterns; and
- (j) Actions plans and preventive measures to address noted trends and patterns.

Each year, the County board shall send its MUI analysis and follow-up actions to DODD by August 31st for the semi-annual review and by February 28th for the annual review. Likewise, each provider shall send its analysis and follow-up actions to the county board Superintendent and Investigative Services Director for all programs it provides serving Lake County individuals by February 28th and August 31. The County board shall keep the analysis and follow-up actions on file and make them available to DODD upon request. The County board and DODD shall review the analysis to ensure that all issues have been reasonably addressed to prevent reoccurrence. The County board shall ensure that trends and patterns of MUIs are included and addressed in the affected individual's service plan.

3) **MUI Committee**

The County board shall have a committee that reviews trends and patterns of MUIs. The committee shall be made up of a reasonable representation of the county board, provider agencies, families, and other stakeholders deemed

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appropriate by the committee. The role of the committee shall be to review and share the county aggregate data prepared by the county board to identify trends, patterns, or areas for improving the quality of life for individuals served by Lake County. The committee shall meet each September to review and analyze data for the first six months of the calendar year and each March to review and analyze data for the preceding calendar year. The county board shall send the aggregate data prepared for the meeting to all participants at least ten days in advance of the meeting. The county board shall record and maintain minutes of each meeting and distribute the minutes to members of the committee.

D. Training

Agency providers and county boards shall ensure staff employed in direct services positions are trained on the requirements of state “MUI Rule” 5123:2-17-02 and this policy prior to direct contact with any individual. Thereafter, staff employed in direct services positions shall receive annual training on these requirements including a review of health and welfare alerts issued by DODD since the previous year’s training. Agency providers and county boards shall ensure staff employed in positions other than direct services positions are trained on the requirements no later than ninety days from date of hire. Thereafter, staff employed in positions other than direct services positions shall receive annual training on the requirements including health and welfare alerts issued by DODD since the previous year’s training. Independent providers shall be trained on the requirements of rule 5123:2-17-02 prior to application for initial certification in accordance with rule 5123:2-2-01 of the Administrative Code and shall receive annual training on the requirements of rule 5123:2-17-02 including a review of health and welfare alerts issued by DODD since the previous year’s training.

VI. DISTRIBUTION:

Board Members
All Management Staff
All Staff (Via Department Managers)
LEADD President
Certified Providers (via SSA Department)

VII. REVIEWED:

8/15, 8/13, 2/11, 2/09, 2/07, 3/06, 3/04, 1/02, 8/01, 5/01, 2/01, 1/01, 11/00, 1/98, 1/97, 4/96, 11/94, 4/94, 12/92, 8/90

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VIII. APRC Review:

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