

MAJOR UNUSUAL INCIDENT (MUI) REPORTING POLICY

This policy establishes a system of reporting, investigating, reviewing, analyzing and remedying incidents that adversely affect the health and welfare of individuals and to monitor preventative actions taken to ensure health and welfare for the Erie County Board of Developmental Disabilities (Board). This policy and procedures does not relieve any person of the responsibility to comply with ORC 5123:61.

The Board shall contract with the Clearwater Council of Governments (COG) for Investigative Agent services. The Investigative Agent (IA) shall be an employee of the Clearwater Council of Governments and will follow the Clearwater Council of Governments' procedure for the investigation of all Major Unusual Incident's (MUI).

The Superintendent shall establish, revise and keep current the procedures to be utilized in the implementation of this policy. The Superintendent / designee shall ensure compliance with these procedures. All revisions or changes will be shared with the Board when made.

Superintendent Signature:  Date: 5/18/17

Implemented: 05/04

Board Approval: 6/21/12, 5/18/17

Reviewed: 03/07, 06/09, 12/10, 6/5/12, 07/14, 05/16, 5/18/17

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Cross Reference: ORC 5123:61

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I. DEFINITIONS

As used in this policy the following definitions shall apply:

- A. 'Major Unusual Incidents (MUI)' means the alleged, suspected, or actual occurrence of an incident when there is reason to believe the health or safety of an individual may be adversely affected or an individual may be placed at a reasonable risk of harm as listed in this paragraph, if such individual is receiving services through the Department of Developmental Disabilities (DODD) service delivery system or will be receiving such services as a result of the incident.
1. 'Accidental or suspicious death' means the death of an individual resulting from an accidental or suspicious death.
 2. 'Exploitation' means the unlawful or improper act of using an individual or an individual's resources for monetary or personal benefit, profit, or gain.
 3. 'Failure to report' means that a person, who is required to report pursuant to section 5123.61 of the Revised Code, 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 (including misappropriation, exploitation that results in a risk to health and welfare or neglect 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 department. Pursuant to division (C)(1) of section 5123.61 of the Revised Code, such report shall be made to the department and the county board when the incident involves an act or omission of an employee of a county board.
 4. '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 of the Revised Code.
 5. '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.
 6. 'Peer-to-peer acts' 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 of r 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 and 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 assistants 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 major unusual incidents. Minor injures such as scratches or reddened areas not involving the head or neck shall be considered unusual incidents and shall require immediate actions, a review to uncover possible cause/contributing factors, and preventive measures.

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- d) Sexual act which means sexual conduct and/or contact for the purpose of sexual gratification without the consent of the other individual.
 - e) Verbal act which means the use of words, gestures, or other communicative means to purposefully threaten, coerce, or intimidate the other individual when there is the opportunity and ability to carry out the threat.
7. Physical abuse. 'Physical abuse' means the use of physical force that can reasonably be 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 can include, but is not limited to, hitting, slapping, pushing, or throwing objects at an individual.
 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.
 10. '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. of the Revised Code (i.e., public indecency, importuning, and voyeurism).
 11. 'Verbal abuse' means the use of words, gestures or other communicative means to purposely threaten, coerce, intimidate, harass, or humiliate an individual.
 12. 'Attempted suicide' means a physical attempt by an individual that results in emergency room treatment, in-patient observation, or hospital admission.
 13. 'Death other than accidental or suspicious death' means the death of an individual by natural cause without suspicious circumstances.
 14. '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).
 15. '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 as an unusual incident.
 16. 'Significant injury' means an injury from a 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, five or more sutures. Significant injuries shall be designated in the incident tracking system as either known or unknown cause.

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17. 'Law enforcement' means any incident that results in the individual being arrested, charged, or incarcerated.
 18. 'Unapproved behavior support' means the use of any aversive strategy or intervention prohibited by paragraph (J) of rule 5123:2-1-02 of the Administrative Code or an aversive strategy implemented without approval by the human rights committee or behavior support committee or without informed consent, that results in a likely risk to the individual's health and welfare. An aversive strategy 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 as an unusual incident.
 19. '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.
- B. 'DD employee' means any of the following:
1. An employee of the department;
 2. An employee of a county board;
 3. An employee of an agency provider in a position that includes providing specialized services to an individual; or
 4. An independent provider.
- C. 'Primary person involved' (PPI) means the person alleged to have committed or to have been responsible for the accidental or suspicious death, exploitation, failure to report, misappropriation, neglect, physical abuse, prohibited sexual relations, rights code violation, sexual abuse or verbal abuse.
- D. 'Provider' means an agency provider or independent provider that provides specialized services.
- E. '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 the department.
- F. 'Unusual Incident' (UI) means an event or occurrence involving an individual that is not consistent with routine operations, policies and procedures, or the individual's care or individual service plan, but is not a major unusual incident. UI includes, but is not limited to, dental injuries, falls, an injury that is not a significant injury, medication errors without a likely risk to health and welfare, overnight relocation of an individual due to a fire, natural disaster, or mechanical failure an incident involving two individuals served that is not a peer-to-peer act major unusual incident and rights code violations or unapproved behavior supports without a likely risk to health and welfare.
- G. 'Working day' means Monday, Tuesday, Wednesday, Thursday, or Friday except when that day is a holiday as defined in section 1.14 of the Revised Code.

II. REPORTING AND NOTIFICATION REQUIREMENTS FOR UI/MUI'S

- A. The Board shall designate the Contact Person/designee to receive and manage receipt of all reports required in this policy and shall, in conjunction with the Clearwater Council of Governments, ensure that a system exists whereby providers make all reports required by this policy, and that this system is communicated to providers.
1. If the provider is a developmental center, all reports required in OAC 5123:2-17-02 shall be made directly to DODD or as specified by DODD.

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- B. Those required to report UI/MUI's are:
 - 1. Any DD employee as defined in I.B. of this policy.
- C. All unusual incidents written by independent providers or County board personnel shall be reported to the Board Contact Person. Any unusual incident shall be reported within 24 hours following knowledge of the occurrence.
- D. All MUI incidents shall be reported to the Board Contact Person.
 - 1. MUI's are to be reported as soon as possible and no later than 24 hours following knowledge of occurrence. Unless the allegation is one of the following, then must be reported no later than four (4) hours after discovery of the incident:
 - a) Misappropriation;
 - b) Abuse (physical, verbal or sexual);
 - c) Neglect;
 - d) Exploitation;
 - e) Accidental or suspicious death;
 - f) When the provider has received an inquiry from the media regarding a major unusual incident.
 - 2. If any of the above incidents are suspected or have occurred, verbal notification to the Board Contact Person/designee (during normal business hours) or the on-call SSA (during non-business hours). This report can be done via telephone; however a written incident report must follow as soon as possible, but no later than 24 hours following the discovery of the incident.
 - 3. All providers must submit a written report and the report must be received by Board by 3:00 p.m. the next working day following initial knowledge of a potential or determined major unusual incident.
 - a) The county board as a provider must submit a written report to the Board Contact Person/designee by the end of same working day the incident occurs or is discovered.
 - 4. The Board Contact Person/designee shall review the incident and render it either an unusual incident or a major unusual incident.
 - a) Should the Board Contact Person/designee be unclear whether to classify the incident as an MUI/UI, they shall discuss the incident with the Investigative Agent.
 - b) Should the Investigative Agent be unclear whether to classify as an MUI/UI, the incident shall be discussed with DODD and make the final determination.
 - 5. If notification is received by the Board Contact Person/designee, the Board Contact Person or designee shall notify and send copy of the report to the assigned SSA. The Investigative Agent will assure that notification be made to the appropriate authorities. The appropriate authorities may include law enforcement agency, as defined in ORC 5123.61, having jurisdiction over the location at which the incident occurred. If the MUI includes conduct that would constitute a possible criminal act, including abuse or neglect by the local public children services agency and municipal or county peace officer in which the individual resides as defined in ORC 2151.421 rules adopted pursuant to that section will be applied. If the individual is under twenty-one years of age and meets the definition of an abused or neglected child as defined in ORC 2151.03 and 2151.031 will be applied.

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6. The SSA will also ensure the immediate health and welfare of the individual and ensure same day notification to the guardian or other person whom the individual has identified, family living at the individual's residence who has responsibility for the individual's care, residential provider or Support broker if individual is enrolled on the Self Waiver is made at this time if the incident occurred at a county-operated program.
7. If the MUI occurs at a private provider agency site, the Board Contact will notify the provider and the provider will notify the guardian or other person whom the individual has identified, family living at the individual's residence who has responsibility for the individual's care, residential provider or Support broker if individual is enrolled on the Self Waiver and document accordingly.
8. If notification is received by the on-call SSA, the on-call SSA will contact the Investigative Agent and the provider shall notify the appropriate authorities under the direction of the on-call SSA. The IA as defined in (II)(D) of this policy and ensure the immediate health and welfare of the individual. Same day notification to the guardian or other person whom the individual has identified, family living at the individual's residence who has responsibility for the individual's care, residential provider or Support broker if individual is enrolled on the Self Waiver is also to be made at this time if the incident occurred at a county-operated program.
9. Once the determination is made that an incident is an MUI, the Board Contact Person/designee shall notify the Investigative Agent via email or fax within the same business day of the agency provider's notification whenever possible. If the MUI occurs at the Board or is discovered by the Board, the Board Contact Person/designee shall notify the Investigative Agent as soon as possible, preferably within the same business day in order to maintain DODD timelines. If the Board is closed, the written incident report shall be emailed or faxed on the following business day.
10. By three p.m. on the working day immediately following receipt of the written incident report submitted by the provider pursuant to paragraph (II)(D) of this policy, the Clearwater Council of Governments shall enter preliminary information regarding the incident through the online system established by DODD.
11. No later than 48 hours upon receipt of a MUI report, the Investigative Agent/designee shall commence an investigation as required by 5123:2:17-02 by utilizing the investigation protocol as developed and outlined as an appendix to the rule.
12. When a provider has placed an employee on leave or otherwise taken protective action pending the outcome of the investigation, the Board or DODD department, as applicable, shall keep the provider apprised of the status of the investigation so that the provider can resume normal operations as soon as possible consistent with the health and welfare of any at-risk individuals.
13. In any case where law enforcement has been notified of an alleged crime, the DODD department 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 welfare of any at-risk individual. The notified provider or county board shall take such steps necessary to address the health and welfare needs of any at-risk

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individual and may consult the department in this regard. The DODD department shall inform any notified entity as to whether the incident is substantiated. Providers, developmental centers, or county boards employing a PPI shall notify the DODD department when they are aware that the PPI works for another provider.

III. INVESTIGATING MUI'S

Immediately upon receipt of a report of an MUI, the Board Contact Person/designee shall review the incident to ensure that the provider has taken all reasonable measures necessary to protect the health and welfare of the individual(s) and determine whether any additional actions must be taken. The Board may request that this review be conducted by another county board, a Regional Council of Government, DODD or any other government entity authorized to conduct a review if any of the circumstances specified in (C) (4) of this policy, are present.

- A. The Board shall contract with the Clearwater Council of Governments for an Investigative Agent, who will conduct all investigations of MUI's for the Board.
 - 1. The Investigative Agent, employed by the Clearwater Council of Governments, shall maintain appropriate certification, issued by DODD in accordance with AC 5123:2-5-07.
 - 2. The Investigative Agent shall comply with the Procedures of the Clearwater Council of Governments for investigations.
 - 3. Board staff may assist the investigative agent by gathering documents or entering information into the ITS or other administrative or clerical duties that are not specific to the investigative agent role.
- B. The Clearwater Council of Government's Investigative Agent shall immediately commence an investigation using the investigation protocol outlined by the Clearwater Council of Governments if the MUI involves any of the following:
 - 1. Abuse, neglect or misappropriation;
 - 2. Any injury of an unknown or suspicious origin;
 - 3. Suspicious or accidental death;
 - 4. The individual cannot be located;
 - 5. Any other MUI the Board determines should be investigated based on a review of the incident conducted.
- C. The Board is aware that the DODD may conduct a separate review or investigation of any MUI, or may request that a separate review or investigation be conducted by another county board, a Regional Council of Government or any other entity authorized to conduct such investigations. If a separate investigation is conducted, the investigation shall be completed within thirty days, unless the investigation is being conducted by a law enforcement agency or local public children services agency.
- D. A separate investigation shall be conducted if the following circumstances are present:
 - 1. The MUI includes an allegation that the person responsible for the incident is:
 - a) The Board Superintendent or the Executive Director of the Clearwater Council of Government;

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- b) A Board management employee who reports directly to the superintendent of the Board or the executive director of the Clearwater Council of Government;
 - c) An investigative agent;
 - d) A service and support administrator;
 - e) The Board contact person;
 - f) A current Board member appointed pursuant to ORC 5126.02;
 - g) A person having any known relationship with any of the persons specified in above paragraphs (a)(i)(ii).
- 2. The MUI includes an allegation that an employee of the Board is responsible for: the death of an individual, has committed sexual abuse against an individual, or has committed any other abuse or neglect against an individual that has resulted in an emergency room visit or hospitalization.
 - 3. The Board has requested that DODD conduct a separate investigation, and DODD has determined that there is a reasonable basis for the request.
 - 4. An individual, advocate selected by the individual, the legal guardian, as applicable, or provider has made a complaint to DODD regarding an investigation conducted by the Board and DODD has determined that there is a reasonable basis for the complaint.
- E. The provider shall cooperate with all investigations conducted by other entities, and shall respond to all requests for additional information made by DODD, the Board SSA Department, or any investigating entity as soon as practicable but within five working days of receipt of the request.
 - F. The Investigative Agent shall submit a report on the investigation to DODD within thirty working days of the receipt of a report of an MUI. The report shall be submitted through the online system established by DODD.
 - G. The Investigative Agent may request reasonable extensions of the time period for submission of the report. DODD shall grant such extensions for good cause. If any extension is granted, DODD may require submission of interim reports and shall identify alternative actions that may assist with the timely conclusion of the report.
 - H. The Board Contact Person/designee shall provide a written summary of the investigation findings to the individual or legal guardian, and the advocate selected by the individual, as applicable, and the provider at least five working days after to submission of the report to DODD. The written summary shall be provided in a format prescribed by DODD and include a statement of the facts and findings of the investigation, including all preventive measures implemented in response to the incident. 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 the closure of a case, the Board shall make a reasonable attempt to notify the PPI as to whether the MUI has been substantiated, unsubstantiated/insufficient evidence, or unsubstantiated/unfounded.
 - 1. The Board shall notify the individual, advocate selected by the individual, or the legal guardian, as applicable, and the provider of the right to submit written comments to the Superintendent regarding the investigation's

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conclusion and any preventative measures implemented in response to the incident. Any written comments received by Board shall be submitted to DODD.

2. An individual, individual's guardian, individual's advocate, or provider may dispute the findings by submitting a letter of dispute and supporting documentation to the Board superintendent, or to the director of the department if the DODD has conducted the investigation, within fifteen calendar days following receipt of the summary. An individual may receive assistance from any person selected by the individual to prepare a letter and provide supporting documentation. 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.
3. The superintendent / designee or the DODD director / designee, as applicable, shall consider the letter of dispute, the supporting documentation, and any other relevant information and issue a determination within thirty calendar days of such submission 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.
4. In cases where the letter of dispute has been filed with the Board, the disputant may dispute the final findings made by the Board by filing those findings and any documentation contesting such findings as are disputed with the director of the DODD department within fifteen calendar days of the Board determination. The director will issue a decision within thirty calendar days.

IV. REVIEW, PREVENTION AND CLOSURE OF MUI'S

- A. Each agency providers shall develop and implement a written procedure for their internal review of all MUI's, this includes the Board as a provider. All providers shall be responsible for taking all reasonable steps to prevent the reoccurrence of MUI.
- B. The Board and other providers in Erie County shall jointly determine what constitutes reasonable steps necessary to prevent the reoccurrence of MUI. If the Board and another provider are unable to reach agreement, DODD shall make the determination. If the Board or provider lacks sufficient resources to take such steps, the Board or provider may make a written request for assistance from DODD. DODD shall consider requests for assistance made and shall ensure that all actions necessary to protect the health and welfare of individuals served are taken.
 1. Once the investigation is completed, the IA will notify the assigned SSA and request plan of prevention via email. The designated SSA in coordination with the interdisciplinary team will develop prevention plans and forward this plan to the Board Contact Person/designee and the IA/designee.
 2. The SSA will monitor the services of the individual to ensure the health and welfare of the individual, and ensure that all plans of correction/prevention plans are implemented and that written verification of such is incorporated into the MUI file.

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3. The completed recommendations for the prevention plan will be given within 10 days of the final report to the Board Contact Person/designee for tracking purposes and assist the IA to answer questions on ITS that have been posted by DODD.
- C. DODD shall review each report submitted by the Board. DODD may obtain additional information necessary to conduct this review, including copies of all investigation reports that have been prepared. Such additional information shall be provided within the time period specified by DODD.
- D. DODD shall determine when to close cases of abuse, neglect, misappropriation, death, exploitation, failure to report, missing individual, peer to peer acts, prohibited sexual relations, rights code violation, significant injury when cause is unknown, unapproved behavior support, any case subject of the director's alert and any cases investigated by DODD. DODD shall solicit input from the Board prior to making this determination.
- E. The Board Contact Person/designee shall determine when to close cases other than those specified above in paragraph (D)(3) of this policy.
- F. When determining that a case should be closed, DODD or the Board shall consider the following criteria:
 1. Whether all reasonable measures have been taken to ensure the health and welfare of the individual;
 2. Whether a thorough investigation of the incident has been conducted;
 3. Whether the incident is part of a pattern or trend requiring some additional action;
 4. Whether appropriate measures have been implemented to prevent recurrence;
 5. Whether all requirements set forth in statute have been satisfied;
 6. Whether the case meets the criteria for referral to the abuse registry unit pursuant to ORC 5123.51;
 7. The Board Contact Person/designee shall be responsible for notifying the provider when a case is closed.

V. UNUSUAL INCIDENTS (UI's)

- A. Each provider, including the Board, shall require anyone who becomes aware of an unusual incident to report it to the person designated by the provider who can initiate proper action. Our guidelines are: (1) If you see it write an incident report and report it to your supervisor, and (2) If you hear about it, write an incident report. Reports must be made no later than twenty-four hours after becoming aware of the incident.
- B. Each agency provider and Board as a provider shall:
 1. Identifies what is to be reported as a UI, which shall include UIs as defined by this rule;
 2. Requires anyone who becomes aware of a UI to report it to the person designated by the provider who can initiate proper action;
 3. Requires the report to be made no later than twenty-four (24) hours after the discovery of the incident;
 4. Requires appropriate actions be taken to protect the health and welfare of any at-risk individuals.

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5. Requires agency provider to investigate unusual incidents, identify the cause and contributing factors and develop prevention plan to protect the health and welfare of any at-risk individuals.
- C. The agency provider and Board as a provider shall ensure that all staff are trained and knowledgeable regarding the policy and procedure.
- D. If the UI occurs at a site operated by the Board or at a site operated by an entity with which the Board contracts, the Board or contract entity shall notify the licensed provider or staff, guardian or family, as applicable, at the individual's home. The notification shall be made the same day that the incident is discovered.
- E. Individual providers shall make and send reports to the person designated by the Board on the day the UI is discovered; and notify the individual's guardian or other person whom the individual has identified, as applicable. The Board shall designate a person responsible for logging these incidents.
- F. Each agency provider, independent provider and county board as a provider shall maintain a log of all 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, and preventive measures.
- G. Each agency provider, independent provider and Board as a provider shall review and analyze all UI's at least monthly, to ensure appropriate preventive measures have been implemented and trends and patterns are identified and addressed as appropriate.
- H. The UI reports, documentation of identified trends and patterns, and corrective action shall be made available to the Board and department upon request.
- I. The Board shall review, on a quarterly basis, a representative sampling of provider logs, individual provider log(s), and logs where the board is a provider for the purpose of ensuring that all MUIs required to be reported have been reported and that trends and patterns have been identified and addressed. The sampling shall be made available to the department for review upon request.
- J. When the board is a provider of relevant services, the department shall review, on a monthly basis, a representative sampling of county board logs. The Board shall submit the specified logs to DODD upon request. The department shall review the logs to ensure all MUIs have been reported and trends and patterns have been identified and addressed.
- K. The agency provider and the Board as a provider shall ensure that trends and patterns of UIs are included and addressed in each individual's service plan of each individual affected.

VI. ANALYZING MUI'S TO IDENTIFY PATTERNS AND TRENDS

- A. All waiver providers, including Boards as providers, shall complete a semi-annual and annual report regarding MUI trends and patterns and send to the Board. The semi-annual review shall be cumulative for the first two quarters of the year and include an in-depth analysis. The annual review shall be cumulative for all four quarters of the year and include an in-depth analysis. Each review period shall include the preventive measures taken to address the trends and patterns.
- B. All reviews and analyses shall be completed within thirty calendar days following the end of the review period.
- C. Boards shall conduct the analysis and follow-up for all entities operated by the Board and for all individual providers. The Board shall send its analysis and

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follow-up actions to the department by August thirty-first for the semi-annual review and by February twenty-eighth for the annual review.

- D. Each waiver agency and independent provider shall conduct the analysis, implement follow-up actions and send its semi-annual and annual analysis and follow-up actions to the county board for all programs operated in the county by August thirty-first for the semi-annual review and by February twenty-eighth for the annual review. The Board shall keep the analysis and follow-up actions on file and make them available to the department upon request.
- E. The Board and DODD shall review the analysis to ensure that all issues have been reasonably addressed to prevent reoccurrence.
- F. The Board shall ensure that trends and patterns of MUIs are included and addressed in the affected individual's service plan.
- G. Each Board or as applicable, each council of governments to which the Board belongs, 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(s), provider agencies, individuals who receive services and their families, and other stakeholders deemed appropriate by the committee.
- H. The role of the committee shall be to review and share the county or council of government's aggregate data prepared by the Board or council of governments to identify trends, patterns, or areas for improving the quality of life for individuals supported in the county or counties.
- I. 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 Board or council of governments shall send the aggregate data prepared for the meeting to all participants ten calendar days in advance of the meeting.
- J. The Board or council of governments shall record and maintain minutes of each meeting, distribute the minutes to members of the committee, and make the minutes available to any person upon request.
- K. The department shall ensure follow-up actions identified by the committee have been implemented.
- L. DODD shall prepare a report on trends and patterns identified through the process of reviewing MUIs. DODD shall periodically, but at least semi-annually, review this report with a committee appointed by the director of DODD which shall consist of at least six members who represent various stakeholder groups, including Ohio Legal Rights Service and the Ohio Department of Job and Family Services. The committee shall make recommendations to DODD regarding whether appropriate actions to ensure the health and welfare of individuals served have been taken. The committee may request that DODD obtain additional information as may be necessary to make recommendations.

VII. ACCESS TO RECORDS

- A. Reports made under ORC 5123.61 and ORC 5123:2-17-02 are not public records as defined in ORC 149.43. Records may be provided to parties authorized to receive them in accordance with ORC 5123.613 and ORC 5126.044.
 - 1. The Board / COG shall not review, copy or include in any reports required by this rule personnel records of an employee that are confidential under state or federal statutes or rules, including medical and insurance records, worker's compensation records, immigration status forms (I-9),

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- and social security numbers.
2. The Board / COG may review, but not copy, personnel records that include confidential information about an employee including, but not limited to, payroll records, performance evaluations, disciplinary records, correspondence to employees regarding status of employment, motor vehicle drivers records, professional licenses and criminal records checks. Investigative Agent staff may include in reports required by this rule information about the results of the review of personnel records specified in this paragraph.
 3. Board / COG personnel may review and copy personnel records prepared in connection with the provider's daily operations, such as training records, time sheets and work schedules.
 4. Upon DODD request, the provider shall provide copies of personnel records that are not confidential to DODD.
 5. The provider shall redact any confidential information contained in a record that is copied before the copies are provided to either the Board or DODD.
 6. The provider shall not be able to enter or alter any information contained on the online system.
 7. Any party entitled to receive any report required by this policy may waive receipt of the report. Any waiver of receipt of a report shall be made in writing.

VIII. TRAINING AND TECHNICAL ASSISTANCE

- A. All agency providers and Board shall ensure their staff are trained on the requirements of this rule regarding the identification and reporting of MUIs and UIs prior to unsupervised contact with any individual and in all cases, no later than thirty calendar days after employment. Thereafter, all employees shall receive training during each calendar year, which shall include a review of health and welfare alerts released since the previous calendar year's training.
- B. All individual providers shall follow the requirements for initial training on the provisions of this rule according to their certification requirements and shall receive annual training from the date of certification on identification and reporting of MUIs and UIs and health and welfare alerts released since the previous calendar year's training.
- C. All agency providers and Board shall ensure that all staff responsible for administrative compliance with this rule receives training on all applicable requirements of this rule at the time of employment or no later than ninety calendar days from the time of employment and each calendar year thereafter. The training shall include the review of health and welfare alerts released since the previous calendar year's training.
- D. The COG shall ensure that staff responsible for conducting investigations receive initial and annual department-approved training.
- E. DODD shall provide technical assistance and training to providers and Boards as necessary. The department shall periodically monitor compliance with the provisions of this rule.

**ERIE COUNTY BOARD OF DEVELOPMENTAL DISABILITIES
MAJOR UNUSUAL INCIDENT (MUI) REPORTING PROCEDURE**

IV. OVERSIGHT

- A. DODD shall conduct such reviews of the Board and providers as necessary to ensure the health and welfare of individuals and compliance with the requirements of this rule. Failure to comply with the requirements of this rule may be considered by DODD in any regulatory capacity, including certification, licensure, and accreditation.
- B. DODD shall provide access to the ITS to the Ohio Department of Jobs and Family Services and Ohio legal rights service in accordance with section 5123.604 of the Revised Code.