

MUI Trend, Pattern & Analysis Training for Agency Providers



Today's Agenda

- MUI Analyses
- UI logs
- Incident Reporting
- Peer-to-Peer Acts
- 24-hour reporting systems
- Prevention plans
- Training



2007 Trends

- Misappropriation
- Lack of Agency/Co. Bd. Oversight
- Home Manager – All Control > No oversight
- Neglect
- Not following Supervision Plan
- Left Alone at Home
- Sleeping
- Left in Vehicle
- Sexual Abuse
- Peer – Sexual Contact about 65% of the time

MUI Quarterly Reviews (Agency Provider)

- 1st quarter: Review MUIs that occurred at your agency between 1/1 and 3/31
- 3rd quarter: Review MUIs that occurred at your agency between 7/1 and 9/30
- Reviews must be completed within 30 calendar days following the end of the quarter
- Identify MUI trends/patterns and corresponding plans of action
- Reviewed documentation should include the date and signature of the person conducting the review
- Agency reviews should be submitted to the county board within 60 calendar days following the end of the quarter

Annual & Semi-Annual Analyses (Agency Providers)

- Should only include MUIs that *occurred* at your agency or during time when agency staff were with the individual
- Semi-Annual analysis for MUIs that occurred between 1/1 and 6/30 shall be reviewed by 7/31 and sent to County Board by 8/31
- Annual analysis for MUIs that occurred between 1/1 and 12/31 shall be reviewed by 1/31 and sent to County Board by 2/28

What Should be Included in the Semi-Annual and Annual Analysis?

- Time span of the review (i.e. 2005, 2006 and 2007) with a year-to-year comparison to identify relative trends/patterns
- Review and compare data by homes to identify trends/patterns that may be occurring at a certain location
- Review and compare the data of specific individuals
- Include cause and contributing factors as to why trends are occurring
- The analysis can be conducted by any management or administrator selected by the provider agency

What Should be Included in the Semi-Annual and Annual Analysis?

- Review previously identified trends/patterns from the previous year (both program specific and individual specific) and discuss the effectiveness of the action plans initiated
- Review current year's data, identify trends/patterns (both program specific and individual specific) and develop an action plan to address the trends, making sure to include when the plan will be initiated, who will initiate it and who will be responsible to ensure it is completed
- Avoid vague terms like "will monitor"
- Spell out if you are re-training staff (Be Specific)

Annual & Semi-Annual Analyses (Agency Providers)

- Annual analysis for MUIs that occurred between 1/1 and 12/31 shall be reviewed by 1/31 and sent to the county board by 2/28
- These analyses and follow up actions shall be kept on file by the county board and made available to ODMRDD upon request

Incident Reporting

- Provider and County Board staff report using internal agency or county board reporting system
- Anyone who becomes aware must report to designated person in their agency

Incident Reporting

- ***Agency Provider and County Board as a provider report to County Board MUI or IA Section***

Incident Reporting

County Board IA/MUI contact reviews all potential incidents to determine if an MUI should be filed

Incident Reporting

Immediate Actions to protect the individual and other individuals from harm

Reporting Timeframes

- *Immediate for potential Abuse/Neglect/Exploitation or Misappropriation, Peer-to-Peer and all Deaths*
- *All others to County Board IA by next working day*

Incident Reporting Form

- *Who – What – Where
When – How – Why*
- *Detail*
- *Timeframes*

Incident Reporting Exercise



Incident Reporting

- Each witness should complete a written statement
- Attach the statements to the incident report
- This should be completed as soon as possible

UI Logs

- Review Monthly
- Appropriate preventive measures
- Trends and patterns identified and addressed

UI Logs

- Name of individual
- Brief description of incident
- Any injuries
- Time/date/location
- Preventive measures

Peer to Peer Acts



“Intent to Harm”

Physical abuse is the use of physical force that can reasonably be expected to result in physical harm.

*Peer-to-Peer
Physical Abuse*

Peer-to-Peer acts committed by one individual against another when there is physical abuse with intent to harm.

Peer-to-Peer Acts

- To determine if a peer-to-peer act is an MUI – consider the following two elements:
 - ✓ Force – could the action have reasonably been expected to cause harm?
 - ✓ Intent – Was the victim the intended target of the PPI or just a “victim of circumstance?”

Intent

Did the individual go after the other individual to hurt them?

EXAMPLES



Example #1

Individual lives with four others.

Fire alarm goes off.

Staff redirect individual from going out the back door.

Individual is agitated and starts hitting a peer who is close by.

Example #2

Individual A runs at Individual B and grabs his arm.

Staff pulls Individual A away from Individual B.

Individual B has a bruise on his right upper arm.

Individual A has a BSP for aggression.

Example #3

Individual A is in the activity room with five peers.

Individual A has a BSP for Physical Aggression.

Individual A is putting a CD in the stereo and seems fine.

Individual A walks past peers and over to Individual B.

Individual A pushes individual B.

Individual B falls and has a red area on her knee.

Neglect

- When determining neglect – consider the following:
 - ✓ What is the *reasonable* risk of harm
 - ✓ Systems Issue as the PPI
 - ✓ Was the action *neglectful* or *neglect*?

Neglect



- Training Example

Identified trends in reporting and how to address these trends



- Late law enforcement notification
- Late four hour reporting to county board
- Late incident reports to the county board
- Poor 24-hour systems for reporting MUIs

Prevention Plans

- Cause and contributing factors of the incident
- Team process
- Verification
- Monitoring
- Follow-up



Training



(P)(1) Training on Identification and Reporting Requirements

Who: All agency providers and county boards.

When: Prior to unsupervised contact and no later than 30 calendar days after employment and annually thereafter (calendar year). Includes review of health/safety Alerts issued since the last training.

(P)(3) Staff Responsible for Administrative Compliance to the Rule

- Receive training on all applicable rule requirements
- At the time of employment but no later than 90 days
- Annually, thereafter including health/safety Alerts released since the previous training

The End


