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**Housekeeping**

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- Posting Questions and Comments
- Proof of Continuing Professional Development Units will be emailed for those who actively participated in the Webinar
- Follow up by Email or Phone to MUI Office at 614-995-3810.

**Thank you for your participation!**

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**Why Stakeholders?**

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*Pick all that apply:*

1. This requirement can help come up with ideas to enhance individual's lives, improve quality in my community and prevent the reoccurrence of MUIs.
2. All the cool COGs and County Boards are doing it
3. The Department makes me do it

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**Rule Requirements for Stakeholders**



O.A.C. 5123:2-17-02(L)(6) Each county board or as applicable, each council of governments to which county boards belong, shall have a committee that reviews trends and patterns of major unusual incidents.

The committee shall be made up of a reasonable **representation of the county board(s), providers, individuals who receive services and their families, and other stakeholders deemed appropriate by the committee.**

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**Rule Requirements for Stakeholders**



O.A.C. 5123:2-17-02(L)(6)(a) The role of the committee shall be to review and share the county or council of governments aggregate data prepared by the county board or council of governments to **identify trends, patterns, or areas for improving the quality of life for individuals served in the county or counties.**

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**Rule Requirements for Stakeholders**



O.A.C. 5123:2-17-02(L)(6)(b) 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 or council of governments shall **send the aggregate data prepared for the meeting to all participants at least ten calendar days in advance of the meeting.**

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### Required Elements for Stakeholders



O.A.C. 5123:2-17-02(L)(6)(c) The county 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.

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### Rule Requirements for Stakeholders



O.A.C. 5123:2-17-02(L)(6)(d) The county board shall ensure **follow-up actions identified by the committee have been implemented**



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### Required Elements for Stakeholders



(L)(7) The department shall prepare a report on **trends and patterns** identified through the process of reviewing major unusual incidents. The department shall periodically, but at **least semi-annually,** review this report with a committee appointed by the director of the department which shall consist of at least six members who represent various stakeholder groups, including disability rights Ohio and the Ohio department of Medicaid.

The committee shall make recommendations to the department regarding whether appropriate actions to ensure the health and welfare of individuals served have been taken. The committee may request that the department obtain additional information as may be necessary to make recommendations.

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## Stakeholder Composition

- We have a representative from Children Services on our Stakeholder committee. The benefits of that are that the communication has improved between the two agencies and I think it assists Children Services to understand our process better.
- The other Stakeholder addition that we have made is having two nurses on the committee, one a countyboard nurse and the other is a residential agency nurse. This has been the most beneficial for our committee when discussing hospitalizations, injuries, falls and many other medical issues.
- Their input and knowledge has been a great addition to our committee.

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## Some Common Mistakes

### ***Not Addressing significant increases and decreases***

For example in the last year, there was a 17% increase in Medical Emergencies. The County Board did not drill down to see if there was a certain type of medical emergencies that was increasing like choking incidents

### ***Not addressing identified Trends with action plans***

### ***Not following up on Committee Recommendations***

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## Stakeholders Example # 1

Clearwater Council of Governments  
Stakeholder Data  
2013 Major Unusual Incident  
Annual

### OVERVIEW

**Types and Percentages of Incidents**  
During 2013, the MUI Unit investigated at total of 486 major unusual incidents compared to 432 major unusual incidents in 2012 and 436 major unusual incidents in 2011. The breakdown of MUIs investigated by type of incident is as follows:

| Incident Category    | MUIs filed in 2011 | Sub. | MUIs filed in 2012 | Sub. | MUIs filed in 2013 | Sub. |
|----------------------|--------------------|------|--------------------|------|--------------------|------|
| Physical Abuse       | 17                 | 6    | 22                 | 8    | 22                 | 5    |
| Sexual Abuse         | 2                  | 0    | 5                  | 2    | 5                  | 2    |
| Verbal Abuse         | 13                 | 8    | 12                 | 7    | 18                 | 10   |
| Neglect              | 37                 | 29   | 39                 | 29   | 42                 | 29   |
| Misappropriation     | 42                 | 37   | 27                 | 26   | 39                 | 29   |
| Peer / Peer Physical | 19                 | 17   | 19                 | 16   | 17                 | 13   |
| Peer/Peer Verbal     | 4                  | 3    | 7                  | 4    | 8                  | 7    |

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## Stakeholders Example #1

### Categories Higher than State Average

| 2012              |     | 2013                  |     |
|-------------------|-----|-----------------------|-----|
| Law Enforcement   | 6%  | Law Enforcement       | 9%  |
| Medical Emergency | 5%  | Medical Emergency     | 11% |
| Known Injury      | 12% | Known Injury          | 11% |
| Hospitalization   | 28% | Hospitalization       | 23% |
| Failure to Report | 1%  | Death                 | 5%  |
|                   |     | Rights Code Violation | 2%  |

### Location of Incidents

| 2011                      |            | 2012                      |            | 2013                      |            |
|---------------------------|------------|---------------------------|------------|---------------------------|------------|
| Location                  | Number     | Location                  | Number     | Location                  | Number     |
| CB Operated               | 43         | CB Operated               | 54         | CB Operated               | 54         |
| School                    | 3          | School                    | 2          | School                    | 2          |
| Workshop                  | 32         | Workshop                  | 42         | Workshop                  | 40         |
| Transportation            | 7          | Transportation            | 10         | Transportation            | 12         |
| SSA                       | 1          | SSA                       |            | SSA                       |            |
| <b>Residential</b>        | <b>312</b> | <b>Residential</b>        | <b>301</b> | <b>Residential</b>        | <b>319</b> |
| Family Homes              | 22         | Family Homes              | 32         | Family Homes              | 41         |
| Waiver/SL Homes           | 242        | Waiver/SL Homes           | 235        | Waiver/SL Homes           | 224        |
| Nursing Homes             | 0          | Nursing Homes             | 4          | Nursing Homes             | 5          |
| ICF/c                     | 48         | ICF/c                     | 30         | ICF/c                     | 40         |
| <b>Non Board Operated</b> | <b>40</b>  | <b>Non Board Operated</b> | <b>39</b>  | <b>Non Board Operated</b> | <b>43</b>  |
| Transportation            | 1          | Transportation            | 1          | Transportation            | 3          |
| Day Programs              | 18         | Day Programs              | 23         | Day Programs              | 11         |
| Workshop                  | 18         | Workshop                  | 15         | Workshop                  | 16         |
| After Hours Activities    | 3          | After Hour Activities     |            | After Hour Activities     | 13         |
| <b>Community</b>          | <b>41</b>  | <b>Community</b>          | <b>38</b>  | <b>Community</b>          | <b>70</b>  |
| <b>Total</b>              | <b>436</b> | <b>Total</b>              | <b>432</b> | <b>Total</b>              | <b>486</b> |

## Stakeholders Example #1

### INCIDENT SPECIFIC REVIEW

Include Incident Specific Review for all 19 categories.

| Physical Abuse |           |           |           |
|----------------|-----------|-----------|-----------|
| Allegation     | 2011      | 2012      | 2013      |
| Family         | 5         | 9         | 6         |
| Guardian       |           |           | 1         |
| Payee          |           |           | 1         |
| Staff          | 7         | 7         | 9         |
| Unknown        | 2         | 1         | 2         |
| Other          | 3         | 5         | 3         |
| <b>TOTAL</b>   | <b>17</b> | <b>22</b> | <b>22</b> |

Allegations of physical abuse increased from 2011 to 2012. Rate of substantiation is 35% for 2011, 36% for 2012, and 23% for 2013.  
 \*Statewide data indicates the top two PPIs for physical abuse is staff and family.

| Sexual Abuse |          |          |          |
|--------------|----------|----------|----------|
| Allegation   | 2011     | 2012     | 2013     |
| Family       | 3        | 1        |          |
| Guardian     |          |          |          |
| Payee        |          |          |          |
| Staff        | 1        | 2        | 2        |
| Unknown      |          |          |          |
| Other        | 1        | 2        | 3        |
| <b>TOTAL</b> | <b>5</b> | <b>5</b> | <b>2</b> |

\*Statewide data indicates that the top two PPIs for Sexual Abuse are friends and family members. The rate of substantiation is 40% for 2011 and 2012 and 0% for 2013.

## Stakeholders Example #1

### Misappropriation

| Allegation   | 2011      | 2012      | 2013      |
|--------------|-----------|-----------|-----------|
| Family       | 2         | 1         | 5         |
| Guardian     |           |           |           |
| Payee        | 1         |           |           |
| Staff        | 11        | 6         | 10        |
| Unknown      | 25        | 18        | 16        |
| Other        | 3         | 2         | 8         |
| <b>TOTAL</b> | <b>42</b> | <b>27</b> | <b>39</b> |

Misappropriation has remained fairly consistent over the time span reviewed. The substantiation rate is 88% for 2011, 74% for 2012, and 74% for 2013.

#### 2012 Values:

|              |                        |
|--------------|------------------------|
| Property     | \$4039.00              |
| Cash         | \$2367.00              |
| Medication   | 4 incidents (\$198.00) |
| Credit Card  | 0                      |
| Identity     | 0                      |
| <b>TOTAL</b> | <b>\$6514.00</b>       |

*\*Helpful Comparison: Statewide data indicates the top two things stolen were cash and property.*

#### 2013 Values:

|              |                        |
|--------------|------------------------|
| Property     | \$882.00               |
| Cash         | \$2115.00              |
| Medication   | 6 incidents (\$129.00) |
| Credit Card  | \$1950.00              |
| Identity     | 2 incidents (\$711.00) |
| <b>TOTAL</b> | <b>\$5787.00</b>       |



### Stakeholders Example #1

**Exploitation**

Substantiation rate increased by 30%, discussed what is meant by exploitation where the person is being taken advantage of in some way.

**Misappropriation**

Substantiation rate increased by 5%, total of allegations have increased as well which shows that people are reporting.

*\*For next report, IAs will identify what is meant by "Unknown" to show how many PPIs were actually unknown staff as opposed to just not knowing who the PPI was.*

**Peer to Peer incidents**

*For next report, IAs will identify the location as "work", "home", and "community" so that committee knows where incidents are taking place to better identify a prevention plan.*

**Peer to Peer Verbal**

Discussed the rule change and the need for the allegations to be "threatening" or "harassing" and also the ability for the alleged PPI to carry out the threat.

**Peer to Peer Misappropriation**

Substantiated 2 in the 3 years with these incidents. Discussed allowing the providers a short time to look for property, receipts, etc. that have been reported missing before we file them as MUIs.

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### Stakeholders Example #1

**Rights Code Violation**

There was a decrease in the number of allegations. Discussed that when the team is looking at rights restrictions they really should only be put into place because it to protect health and safety.

**Failure to Report**

Discussed that this is filed when staff fail to report a potential MUI. None were filed during this time span.

**Missing Person**

Stayed consistent over the 3 years

**Deaths**

Saw an increase largely due to the ICF and the fact that they have more medically fragile individuals.

**Law Enforcement**

Slight increase over the 3 years

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### Stakeholders Example #1

**Medical Emergencies**

There was a significant decrease in the three years and this was contributed to the committee's recommendation of various trainings over the years.

**Known Injuries**

Falls were the highest numbers for injuries

*For next report, IAs will identify why the person lost their balance and fell and what were the circumstances: uneven surface, slippery surface, etc.*

*For next report, IAs will identify the location of the injuries work, home, or community.*

*For next report, IAs will no longer have "other" in the type of injuries and will list what each injury was.*

**Unapproved Behavior Supports**

*For next report, IAs will continue to report if the behavior support was necessary and if there were any injuries due to the behavior support being used.*

**Hospitalizations**

Significant increase this is due to the ICF that is in Ottawa County.

*For next report, IAs will identify if a case of pneumonia was bacterial or aspirational.*

*Louise Terry, Ottawa RN, is going to give information for a Hot Topic on choking and the importance of follow up medical care and monitoring to ensure that the individual does not develop aspiration pneumonia.*

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### Stakeholders Example #1

**Discussions:**

Verbal abuse – discussed with the committee what can be done when we have these substantiated allegations as far as retraining with staff. Discussion of Good Life, disability awareness training that is being developed by the COG to be used. Kelli Grisham will check DSPATH’s training to see if this is addressed in that training.

Exploitation – discussed with the committee about educating the individual will continue to see what happens with this category.

Known Injuries – discussed with the committee about the adaptive equipment that is used and if the individual knows how to properly use it. The committee then decided that we needed to break out why the individuals are falling and where they are falling before we can come up with better prevention plans.

Discussed getting new members for the committee as the current committee would like to see more self-advocates and family members be invited to the SH meeting. It was decided that when self-advocates/family members attend, they will be paid \$40.00 by the COG for their service since all other committee members are in paid positions.

Ability Works is going to have some direct support professionals attend the next meeting.

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### Stakeholders Example #1

Wyandot CB is going to invite a self-advocate and a home provider.

Huron CB is going to invite First Choice of Ohio as a residential and day program provider.

Marion CB is going to invite OSS as a transportation provider.

Renaissance House is going to have some direct support professionals attend the next meeting.

Crawford CB is going to invite a residential provider.

If still need a provider maybe ask RVI from Ottawa who does both day programming and residential.

The next meeting will be March 20, 2015 at 10:00am the place has yet to be determined. There will be notice sent out when that has been set.

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### Stakeholders Example #2

2014 Semi-Annual Stakeholder

Meeting Agenda

September 18, 2014



- Introductions
- Review Purpose of Committee
  - ✦ To review and analyze MUI data prepared by the county.
  - ✦ To identify trends, patterns, or areas for improving the quality of life for individuals supported in the county.
  - ✦ To discuss possible causes of the trends/ patterns.
  - ✦ To develop follow-up actions to address the trends and patterns and improve the quality of life for individuals supported in the county.

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### Stakeholders Example #2

- Review of Data/Identifying Trends/Identifying Likely Causes of Trends (Highest categories, areas of increase/decrease, areas of concern, etc.)
- Discussion of Prior Action Plans/Updates
- Create Action Plan

**At the end of the meeting, we want to be able to answer the following questions:**

- What trends has the committee identified? What are some likely causes for those trends?**
- What actions does this committee recommend to address these trends?**

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### Stakeholders Example #2

List of Acronyms used in Stakeholder Meeting:

*This is a helpful tool for Committee Members*

- BCBDD-Butler County Board of Developmental Disabilities
- BCCS- Butler County Children Services
- BSP- Behavior Support Plan
- COG- Council of Governments (The Southwestern Ohio Council of Governments (SWOCOG) includes Butler, Clermont, Hamilton and Warren County and is a way to collaborate and share resources.)
- DODD- Ohio Department of Developmental Disabilities
- HRC- Human Rights Committee
- IDS- Individual Data System (A statewide system in which county boards enter basic demographic information about individuals receiving services).
- IEP- Individual Education Plan
- IR- Incident Report
- ISP- Individual Service Plan
- ITS- Incident Tracking System (The statewide system that tracks Major Unusual Incidents)
- MUI- Major Unusual Incident
- PPI- Primary Person Involved (The alleged perpetrator in a Major Unusual Incident)
- SC/SSA- Support Coordinator/Service and Support Administrator
- UBS- Unapproved Behavior Support
- UI- Unusual Incident

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### Stakeholders Example #2

| Incident Category           | MUIs filed in 1/12-6/12 |               | MUIs filed in 1/13-6/13 |               | MUIs filed in 1/14-6/14 |               |            |     |                |
|-----------------------------|-------------------------|---------------|-------------------------|---------------|-------------------------|---------------|------------|-----|----------------|
|                             |                         | Substantiated |                         | Substantiated |                         | Substantiated |            |     |                |
| Alleged Abuse - PHYSICAL    | 19                      | 6%            | 3                       | 14            | 5%                      | 7             | 26         | 9%  | 6 (3 pending)  |
| Alleged Abuse - SEXUAL      | 3                       | 1%            | 2                       | 4             | 1%                      | 0             | 7          | 2%  | 1              |
| Alleged Abuse - VERBAL      | 7                       | 2%            | 5                       | 11            | 4%                      | 2             | 9          | 3%  | 4              |
| Alleged Neglect             | 51                      | 16%           | 36                      | 45            | 15%                     | 31            | 63         | 21% | 32 (1 pending) |
| Attempted Suicide           | 0                       | 0%            | N/A                     | 0             | 0%                      | N/A           | 0          | 0%  | N/A            |
| Death                       | 12                      | 4%            | N/A                     | 7             | 2%                      | N/A           | 6          | 2%  | N/A            |
| Exploitation                | 5                       | 2%            | 3                       | 3             | 1%                      | 2             | 6          | 2%  | 2              |
| Failure To Report           | 7                       | 2%            | 5                       | 3             | 1%                      | 2             | 1          | 0%  | 1              |
| Significant Injury          | 15                      | 5%            | N/A                     | 20            | 7%                      | N/A           | 20         | 7%  | N/A            |
| Law Enforcement             | 4                       | 1.3%          | N/A                     | 8             | 3%                      | N/A           | 12         | 4%  | N/A            |
| Medical Emergency           | 4                       | 1.3%          | N/A                     | 9             | 3%                      | N/A           | 4          | 1%  | N/A            |
| Minappropriation            | 35                      | 11.5          | 20                      | 31            | 10.5%                   | 17            | 23         | 8%  | 9 (3 pending)  |
| Missing Individual          | 3                       | 1%            | N/A                     | 9             | 3%                      | N/A           | 11         | 4%  | N/A            |
| Peer-to-Peer Acts           | 1                       | 0%            | 1                       | 1             | 0%                      | 0             | 1          | 0%  | 1              |
| Peer-to-Peer Acts Physical  | 24                      | 8%            | 13                      | 31            | 10.5%                   | 24            | 7          | 2%  | 7              |
| Peer-to-Peer Acts Sexual    | 3                       | 1%            | 1                       | 1             | 0%                      | 0             | 4          | 1%  | 2              |
| Peer-to-Peer Acts Verbal    | 4                       | 2%            | 4                       | 18            | 6%                      | 16            | 19         | 7%  | 18             |
| Prohibited Sexual Relations | 0                       | 0%            | 0                       | 1             | 0%                      | 0             | 0          | 0%  | 0              |
| Rights Code Violation       | 1                       | 0%            | 0                       | 0             | 0%                      | 0             | 1          | 0%  | 1              |
| Unapproved Behavior Support | 29                      | 10%           | N/A                     | 11            | 4%                      | N/A           | 14         | 5%  | N/A            |
| Unchecked Hospitalization   | 68                      | 24%           | N/A                     | 68            | 23%                     | N/A           | 66         | 22% | N/A            |
| <b>TOTALS</b>               | <b>299</b>              |               | <b>93</b>               | <b>294</b>    |                         | <b>101</b>    | <b>298</b> |     | <b>84</b>      |

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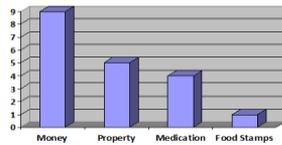
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### Stakeholders Example #2

#### MISAPPROPRIATION



**Important to Note:**

- Although cash was more frequently stolen, the largest amounts stolen can be attributed to thefts from access to bank accounts.
- There was a significant decrease in theft and/or alleged theft by staff.
- Problems in the IT applications prevented review of all misappropriations.

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### Stakeholders Example #2

#### Individuals with 5 or more MUIs in 6 months

| Client         | MUI Number<br>(Only 1** listed if multiple incidents) | Category                        | Create Date                     |
|----------------|---|---------------------------------|---------------------------------|
| Individual # 1 | 2014-009-0088   | Misappropriation                | 3/4/2014                        |
|                | 2014-009-0222   | Alleged Neglect                 | 5/19/2014                       |
|                | 2014-009-0224   | Missing Individual              | 5/21/2014                       |
|                | 2014-009-0249   | Unscheduled Hospitalization     | 6/5/2014                        |
| Individual # 2 | 2014-009-0289   | Peer-to-Peer Acts               | 6/25/2014                       |
|                | 2014-009-0045+  | Peer-to-Peer Acts (4)           | 2/4, 2/13, 3/20, and 6/13/2014  |
|                | 2014-009-0175   | Unscheduled Hospitalization     | 4/22/2014                       |
|                | 2014-009-0265   | Law Enforcement                 | 6/13/2014                       |
| Individual # 3 | 2014-009-0068+  | Unscheduled Hospitalization (4) | 2/19, 2/26, 5/13, and 6/16/2014 |
|                | 2014-009-0092   | Alleged Neglect                 | 3/5/2014                        |
|                | 2014-009-0038   | Alleged Neglect                 | 1/30/2014                       |
| Individual # 4 | 2014-009-0054+  | Peer-to-Peer Acts (3)           | 2/11, 3/11, and 4/29/2014       |
|                | 2014-009-0123   | Unscheduled Hospitalization     | 3/25/2014                       |
|                | 2014-009-0028   | Alleged Abuse - PHYSICAL        | 1/16/2014                       |
| Individual # 5 | 2014-009-0063+  | Alleged Abuse - VERBAL (2)      | 2/18 and 6/17/2014              |
|                | 2014-009-0191   | Alleged Abuse - SEXUAL          | 5/1/2014                        |
|                | 2014-009-0192   | Alleged Neglect                 | 5/1/2014                        |
|                | 2014-009-0223+  | Missing Individual (2)          | 5/20 and 6/30/2014              |

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### Stakeholders Example #2

#### STAKEHOLDER MINUTES

0014 Semi-Annual Stakeholder Meeting Minutes, 9/18/14

Please see sign-in sheet for those in attendance.

Meeting started with introductions and review of the purpose of the committee.

The group first reviewed overall data by category for the past three years. The group noticed an increase in filing of physical abuse (although substantiated cases remained about the same). There was also a large increase in filing of neglects, but again the substantiated cases were similar.

Misappropriation cases decreased both in the number filed and number substantiated. There was an increase in Missing Person cases which is especially concerning considering the definition to file is more strict now than in prior years. There was also an increase in law enforcement cases.

The group then compared statewide data to that of Butler County. Statewide neglect cases comprise 10% of all MUIs, but in Butler County they are 21%. Peer to peer acts are 7% of cases statewide but are 10% in Butler County. Statewide there are 9% unapproved behavior support, but that is lower in Butler County at 5%. Overall, the biggest concern in this area was the neglect difference. Committee did wonder if having a more extensive nursing staff and more nursing involvement made us more likely to catch and report potential medical neglects.

The group then compared the total MUIs and reporting rates of Butler County to counties similar and size and also to COG counties. Butler County is 7<sup>th</sup> in Ohio in terms of total MUI numbers. The reporting rate is 25<sup>th</sup> in the state. It was noted in one county, the reporting rate and total were significantly lower than Butler County even though the number of people served was similar. The group discussed that the county being compared had a high number of individual budgets and many of the providers selected through those budgets are not DODD providers which may impact reporting.

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### Stakeholders Example #3

- The substantiation rate of Protocol/Category A cases peaked in 2012 as during that year, the most Protocol/Category A cases were filed and substantiated.
- Over the course of the three year period, approximately 61% of the cases occurred in provider environments. This location trend was a function of individuals spending the majority of time in provider environments.
- Per information provided by DODD MUI, XX County provided services to 526 people. This figure represents 17% of the total number of individuals receiving services in the MEORC RSC counties, and slightly less than 0.6% of the people receiving services state-wide.
- The mui reporting rate per 100 people served exceeded the MEORC RSC county rate by 17% and the state-wide rate by 31%.

**Note: This County is a member of a COG and utilizes COG data to make comparisons to other counties in the area.**

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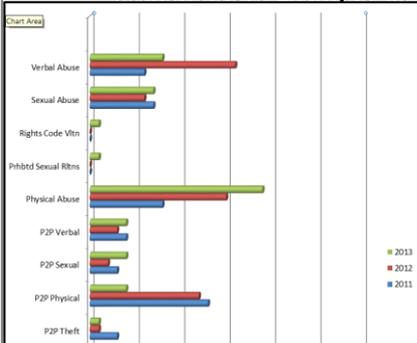
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### Stakeholders Example #3



*A break down of different types of Protocol A cases is helpful to be beneficial for analysis. Here is example of Protocol A cases.*

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### Stakeholders Example #3

| Category                               | 2011           | 2012           | 2013           | TOTAL            |
|--|----------------|----------------|----------------|------------------|
| <b>Category A (protocol cases)</b>     |                |                |                |                  |
| Accidental/Suspicious                  | 0              | 1              | 0              | 1                |
| Death                                  | 2 (1)          | 0              | 0              | 2 (1)            |
| Exploitation                           | 0              | 1 (1)          | 4 (1)          | 5 (2)            |
| Failure to Report                      | 11 (5)         | 15 (12)        | 20 (9)         | 46 (26)          |
| Misappropriation                       | 11 (7)         | 27 (18)        | 21 (11)        | 59 (36)          |
| Neglect                                | 0              | 0              | 0              | 0                |
| P2P Exploitation                       | 0              | 0              | 0              | 0                |
| P2P Theft                              | 3 (2)          | 1 (1)          | 1              | 5 (3)            |
| P2P Physical                           | 13 (9)         | 12 (7)         | 4 (3)          | 29 (19)          |
| P2P Sexual                             | 3 (1)          | 2 (2)          | 5 (1)          | 10 (4)           |
| P2P Verbal                             | 4 (3)          | 3 (3)          | 4 (2)          | 11 (8)           |
| Physical Abuse                         | 8 (1)          | 15 (1)         | 19 (5)         | 42 (7)           |
| Prohibited Sexual Relations            | 0              | 0              | 1              | 1                |
| Rights Code Violation                  | 0              | 0              | 1              | 1                |
| Sexual Abuse                           | 7 (2)          | 6              | 6 (3)          | 19 (5)           |
| Verbal Abuse                           | 6 (2)          | 16 (9)         | 8 (3)          | 30 (14)          |
| <b>Category A Totals</b>               | <b>68 (33)</b> | <b>93 (54)</b> | <b>94 (38)</b> | <b>261 (125)</b> |
| <b>Category B</b>                      |                |                |                |                  |
| Attempted Suicide                      | 1              | 0              | 0              | 1                |
| Death other than accidental/suspicious | 4              | 5              | 5              | 14               |
| Medical Emergency                      | 12             | 13             | 10             | 35               |
| Missing individual                     | 1              | 0              | 0              | 1                |
| Significant Injury                     | 13             | 11             | 8              | 32               |
| <b>Category C</b>                      |                |                |                |                  |
| Law Enforcement                        | 0              | 0              | 0              | 0                |
| Unapproved Behavior                    | 2              | 7              | 0              | 9                |
| Supporter                              |                |                |                |                  |

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### Stakeholders Example #3

**SUBSTANTIATION PERCENTAGES**

| 2011  | 2012  | 2013  | 3 Year |
|-------|-------|-------|--------|
| 48.5% | 54.5% | 40.4% | 48.0%  |

**MUI PROVIDER LOCATION**

| Location     | 2011 | 2012 | 2013 | 3 Year Total |
|--------------|------|------|------|--------------|
| Provider     | 87   | 97   | 88   | 272          |
| County Board | 21   | 32   | 30   | 83           |
| No Provider  | 23   | 36   | 34   | 93           |

**MUI CATEGORY SPECIFIC INFORMATION**

**UNSCHEDULED HOSPITALIZATIONS**

|                             |   |
|-----------------------------|---|
| Allergic Reaction           | 1 |
| Altered State               | 4 |
| Blood Clot(s)               | 1 |
| Blood Pressure              | 2 |
| Blood Sugar Levels          | 1 |
| Body Temperature Variations | 1 |

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### Stakeholders Example #3

- There were 95 unscheduled hospitalization cases over the three year period.
- For 2013, XX County accounted for 28% of the total MEORC RSC county unscheduled hospitalization cases and 0.8% of said cases state-wide
- Over the course of the three year period, XX County accounted for 4.1% of the total MEORC RSC county unscheduled hospitalization cases
- More unscheduled hospitalization cases were filed regarding males than females
- Discussion and recommendations: It was noted that medication may have been a factor in some of the bowel obstruction cases. With regard to psychiatric admissions, it was noted that services to address psychiatric issues are not readily available. The team did not have a recommendations for further action.

*Each MUI type is broken down, reviewed and further analyzed.*

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### Stakeholders Example #3

*Types of Primary Person Involved is reviewed by category type to identify any patterns or trends.*

**PRIMARY PERSONS INVOLVED**

| 2011                     | Category   | PP1   | Total |
|--------------------------|------------|-------|-------|
| Alleged Abuse - PHYSICAL | Family     |       | 4     |
|                          | Other      | 1 (1) |       |
|                          | Staff      |       | 3     |
| Alleged Abuse - SEXUAL   | Family     |       | 1     |
|                          | Other      |       | 4     |
|                          | Unknown    | 1 (1) |       |
| Alleged Abuse - VERBAL   | Not Listed | 1 (1) |       |
|                          | Family     |       | 1     |
|                          | Other      | 2 (1) |       |
|                          | Staff      |       | 1     |
|                          | Unknown    | 2 (1) |       |
| Alleged Neglect          | Family     | 3 (3) |       |
|                          | Staff      |       | 7 (4) |
|                          | Unknown    |       | 1     |

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### Stakeholders Example #3

| Category A (Protocol) Cases | # of cases<br>[#<br>substantiated) | # of cases<br>[#<br>substantiated) | # of cases<br>[#<br>substantiated) | # of cases<br>[#<br>substantiated) |
|-----------------------------|------------------------------------|------------------------------------|------------------------------------|------------------------------------|
| Exploitation                | 5 (1)                              | 0                                  | 2 (1)                              | 7 (2)                              |
| Washington County           | 2 (1)                              | 0                                  | 0                                  | 2 (1)                              |
| Ohio                        |                                    |                                    | 119                                |                                    |
| Failure to Report           | 2 (1)                              | 1 (1)                              | 12 (6)                             | 15 (8)                             |
| Washington County           | 0                                  | 1 (1)                              | 4 (1)                              | 5 (2)                              |
| Ohio                        |                                    |                                    | 176                                |                                    |
| Misappropriation            | 26 (10)                            | 25 (18)                            | 76 (36)                            | 127 (64)                           |
| Washington County           | 11 (5)                             | 15 (12)                            | 20 (9)                             | 46 (26)                            |
| Ohio                        |                                    |                                    | 1528                               |                                    |
| Neglect                     | 28 (12)                            | 45 (27)                            | 95 (55)                            | 168 (94)                           |
| Washington County           | 11 (7)                             | 27 (18)                            | 21 (11)                            | 59 (36)                            |

*A comparison of County to Statewide Reporting is made*

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### Stakeholders Example #3

|   | 2013   |
|---|--------|
| Individuals Served for All MEORC RSC Counties | 3057   |
| XX County                                     | 526    |
| Ohio  | 88,984 |



|   | 2013 |
|---|------|
| Reporting Rate for All MEORC RSC Counties | 24.6 |
| XX County                                 | 28.9 |
| Ohio                                      | 22.1 |

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### Stakeholders Example #4

#### Highlights from Warren County Board Stakeholder Presentation

This County gives a brief description of each program reviewed and how many people are served. For example:

Adult Services provides community employment services, supported employment, contracted production work in house, leisure, recreation, and retirement opportunities.

Adult Services provided services to approximately 444 Individuals as of December 31, 2013.

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### Stakeholders Example #4

"Accidental or suspicious death" means the death of an individual resulting from an accident or suspicious circumstances.

"Death other than accidental or suspicious death" means the death of an individual by natural cause without suspicious circumstances.

**12 reports total- All Non Suspicious**

- Ages: 0-2 years old: 0 children
- 3-5 years old: 2 people
- 6-21 years old: 0 people
- 22-30 years old: 1 person
- 31-40 years old: 1 person
- 41-50 years old: 1 person
- 51- 64 years old: 6 people
- 65 + years old: 1 person

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### Stakeholders Example #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
- There were 18 incidents 01/01/13-12/31/13

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### Stakeholders Example #4

Stakeholder's Committee Meeting Minutes

March 18, 2014

Members present: Names and Titles |

The Committee had received the aggregate and comparison information prior to the meeting. The committee reviewed and compared the MUIs for calendar year 2013 to 2012 and 2011 (January 1 – December 31).

The following trends and issues were noted in the 2013 Annual MUI Stakeholder's meeting:

- **Medical Hospitalization** remains the largest category/number of MUIs for Warren County with 87 incidents from January 1, 2013 – December 31, 2013 compared to 89 incidents in 2012 and 93 incidents in 2011 for the same time period. Committee discussed that, as noted in previous committee meetings, this continues to be a difficult category to prevent due to various individuals' diagnoses and medical needs. Some individuals have chronic illnesses identified in their plans and when those issues cause a hospitalization, they do not constitute an MUI. Also, as trends and patterns arise for new medical concerns, ISP's have been revised when appropriate. The committee also discussed that of the 87 incidents, 47 occurred with the same provider who generally provides care to medically fragile individuals. The committee discussed that this provider is supposed to downsize considerable over the next year and if this occurs, the many individuals could be moved out of county and the number of medical hospitalizations could decrease.

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### Stakeholders Example #4

**2014 ACTION PLAN:**

- Committee discussed Medical Hospitalizations and the difficulty with prevention in this category as this continues to be a challenge. Teams will continue to address on-going medical issues in the ISP that lead to hospitalization as relevant. As UIs/MUIs are received with any trends/patterns in providers not following up with medical appointments as required for individuals, provider compliance specialist will follow up. SSA's will bring discuss medical concerns with teams and if a provider is not following up on medical related issues, the SSA will bring concerns to the Support Services division.
- Committee discussed the importance of training with Unapproved Behavior Supports so that least harmful techniques possible are used in each situation. The County Board offers CPI training to independent providers requiring training to work with individuals served. The County Board also offers training in MUI/UI and Individuals Rights to agency and independent providers to ensure that staff are aware of reporting requirements as well as what constitutes an Unapproved Behavior Support. There is a provider support group meeting once a month and a "Good Life" Facilitator is providing learning experiences to the providers during those meetings.

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### Stakeholders Example #5

**2011 Action Plan:**

For the first half of 2011, we are noticing an increase in the number of misappropriations that are occurring in Lucas County. There has been an increase in the number of home burglaries, as well as with staff stealing limited amounts of money contained in the homes. We attribute this trend to the economy, but also note that several providers have poor systems for monitoring finances. In response to this trend, the QA newsletter has an article regarding misappropriation for the next issue. I have also initiated a stakeholder group to develop a comprehensive misappropriation training that will be trained to County Board and providers. Beginning in September 2011, the MUI Coordinator is also training all Service and Support Specialists on Financial Monitoring and this same training will be conducted with Quality Assurance staff in October.

**2011 Year End Action Plan:**

The committee spent time discussing misappropriation cases. The misappropriation training has been developed and is slated to be presented to providers beginning May 2012. The training is geared toward administrative staff with financial oversight/monitoring duties. The training is not slated for direct care staff. The training was conducted 3 times in the year 2012; with great provider participation.

Also, there has been an increase in neglect cases. As a result, one of the QA Newsletter articles focused on neglect and provided information on how to identify, report, and prevent neglect.

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### Stakeholders Example #5

**2012 Action Plan:**

For the first half of 2012, Lucas County has seen an increase in alleged neglect MUIs which involve alarms. Either the alarms not being activated, not being utilized per the individual's plan and/or the alarms listed in the plan but not even present in the home. In response to this trend the MUI unit developed a Lucas County alert regarding alarms, which was sent to all providers, Service and Support Specialists, and Behavior Management Specialists.

**2012 End of Year Action Plan:**

Discussed that Peer to Peer Acts continues to be a gray area for providers. Will develop a training specific to Peer to Peer Acts when the new rules go into effect, as this will change the definitions of a few categories within Peer to Peer Acts. The training will then be offered to all providers. The committee also discussed health coordination. The SSA department is working on a process for the intake and processing of this information. Once that process is developed it will be shared with providers.

**2013 semi-annual action plan:**

Discussion of 2012 action plan involving alarms. Since only 3 MUIs were alarms related in the first half of 2013, it appears that the Lucas County alert was effective. Group was interested in looking more in depth that misappropriation to determine what amounts are being taken and who the PPI is. Will ensure that this is completed for the annual review to determine if the misappropriation training has been effective and/or if greater emphasis is needed in this area.

**2013 End of Year Action Plan:**

The MUI unit will work on tracking neglect cases and law enforcement cases to determine if there are particular training needs for providers and/or individuals for these categories.

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## Focused Review of Data

- **Unscheduled Hospitalizations (27%)**
- **Choking due to increased number of choking incidents and deaths**
- **Fatal Five** The Fatal Five refers to the top five disorders linked to preventable deaths of individuals in congregate care settings or in community based residential settings. While the issues can differ in order of frequency depending on the population being represented, the five conditions most likely to result in death or health deterioration for persons with Intellectual and Developmental disabilities are:
  - **Bowel Obstruction**
  - **GERD**
  - **Aspiration**
  - **Dehydration**
  - **Seizures**
- **Falls**
- **Unapproved Behavior Supports**

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## Statewide Patterns and Trends

- **Meets Semi-Annually and Annually**
- **Committee Membership**
- **Review of Data**
- **Makes recommendations for future trainings, Health and Safety Alerts, communication to the field and much more**




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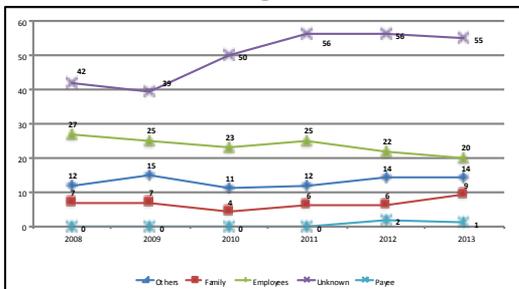
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## Percentage of Misappropriations by PPI Type 5-Yr Review 2008-2013




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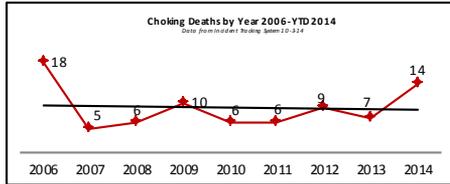
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### Review of Choking Information

- Each choking death was reviewed for a period of 8 years
- Fact patterns were analyzed for similarities (location, provider type, item choked on)




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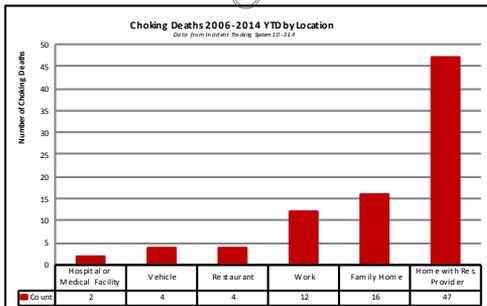
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### Patterns and Trends Choking Study




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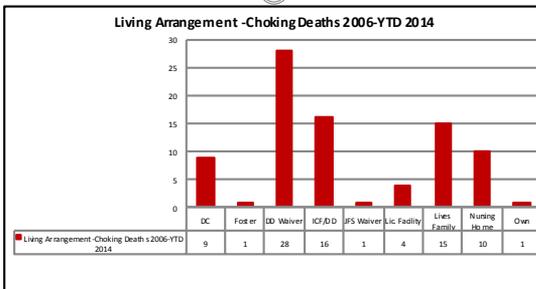
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### Choking Study Data




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## Stakeholder Review

- The Stakeholder Committee shall meet each September and March

| Meeting   | Time Period Reviewed                  |
|-----------|---------------------------------------|
| March     | January 1-December 31 (previous year) |
| September | January 1-June 30 (same year)         |

- All participants shall be sent the aggregate data at least ten calendar days in advance of the meeting.
- Stakeholder Information will be reviewed at both Accreditation and Quality Tier Reviews.




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## Special Thanks to the Panel

- Kelli Grisham, Clearwater COG**
- Leia Snyder, Butler County Board of DD**
- Tonya Hitchens, MEORC COG**

**Thanks to Warren and Lucas Counties for allowing their systems to be shared.**




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## THANK YOU!

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**Abuse/Neglect Hotline**  
 1-866-313-6733

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