Using Go to Webinar

Once you have joined the webinar, you will see the **Attendee Control** Panel and **Grab Tab**. The Control Panel contains panes that can be expanded or collapsed by clicking the Plus icon or Minus icon on the left side of each pane. **Note**: Viewing the Attendee List, raising your hand and asking questions are only available if the organizer has enabled these features.

- **Attendee List** - Displays all the participants in-session (if enabled by the organizer)
- **Grab Tab** – Allows you to open/close the Control Panel, mute/unmute your audio (if the organizer has enabled this feature) and raise your hand
- **Audio pane** – Displays audio format. Click **Settings** to select Mic & Speakers devices
- **Questions pane** – Allows attendees to submit questions and review answers (if enabled by the organizer). Broadcast messages from the organizer will also appear here
- **Webinar details** – Provides a quick reference, and the Webinar ID can be given to someone to join through www.joinwebinar.com

**Note:** You can not participate by phone only, you must be logged on or have a member of group logged on to webinar.
Attendance Policy

To receive CPD units for attending attendees must show an in-session duration (or the time an attendee was logged in to the webinar) of at least 75 percent but not greater than 125 percent of the total duration of the webinar. Attendees who show an in-session duration of less than 75 percent or more than 125 percent will NOT receive credit for attendance, or any available CPD units. The in-session duration is tracked by GoToWebinar’s automated reporting tools. Attendees must show an in-session duration of at least 45 minutes but less than 90 minutes to qualify for CPDs for Brown-Bag Thursday webinars, which are 60 minutes.

Definitions

Example 1: Tabitha logged in to the Brown-Bag Thursday webinar at 11:50 a.m. The webinar started at noon. She viewed the webinar until it ended at 1 p.m. Her in-session duration on the GoToWebinar report shows as 70 minutes, or 116 percent. Tabitha will receive CPD units.

Example 2: Becky logged in to the Brown-Bag Thursday webinar at 11:55 a.m. The webinar started at noon. She had a meeting at 12:30 and left her desk without logging out. She returned to her desk at 1:30 and logged out of the webinar. Her in-session duration on the GoToWebinar report shows as 95 minutes, or 160 percent. Becky will not receive CPD units because her in-session duration was greater than 125 percent.

Example 3: Yanni logged in to the Brown-Bag Thursday webinar at 11:50 a.m. The webinar started at noon. He had to leave his office at 12:20, and logged out of the webinar before leaving. His in-session duration on the GoToWebinar report shows as 30 minutes, or 50 percent. Yanni will not receive CPD units because his in-session duration was less than 75 percent.

Webinar Duration

The duration, in minutes, of the webinar

In-Session Time

Stamp of when attendee joined and exited the webinar

In-Session Duration

Time attendee remained in-session (participating in the webinar)

Join Time

Stamp of when attendee joined the webinar

Leave Time

Stamp of when attendee exited the webinar

Housekeeping

Group Attendance sheets for MUI-facilitated trainings should be emailed in the Excel Format located on website at Group Viewing Sheet to Connie.McLaughlin@dodd.ohio.gov or Debra.Forrest@dodd.ohio.gov. You do not need to send to anyone else.

Proof of Continuing Professional Development Units will be emailed for those who actively participated in the Webinar within 30 days of Webinar.

Follow up by Email or Phone to MUI Office at 614-995-3810.

Thank you for your participation!
Unusual Incident Investigations

An expanded emphasis on Unusual Incident Investigations went into effect 9/3/13 with latest rule.

What can we do to encourage reporting?

1. Follow a system that everyone understands and knows what to do. Start by believing.

2. Build into the system and test for times/areas of weakness – Weekends, prior to vacations, certain key people not available to report to.

3. Take all reports seriously – including “historical” reports and reports from all witnesses.
What can we do to encourage reporting?

4. Know resources and relationship with law enforcement/children’s services prior to crisis. Safety planning.

5. Maintain, as much as possible, confidentiality and anonymity. Support witness.


7. Take Immediate Action.

What can we do to encourage reporting?


9. Individual First – Think about the worst case scenario.

10. Leadership.
Unusual Incident Means?

"Unusual incident" 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.

Unusual incident 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.

"Incident report" means documentation that contains details about a major unusual incident or an unusual incident and shall include, but is not limited to:

(a) Individual's name;
(b) Individual's address;
(c) Date of incident;
(d) Location of incident;
(e) Description of incident;
(f) Type and location of injuries;
(g) Immediate actions taken to ensure health and welfare of individual involved and any at-risk individuals;
(h) Name of primary person involved and his or her relationship to the individual;
(i) Names of witnesses;
(j) Statements completed by persons who witnessed or have personal knowledge of the incident;
(k) Notifications with name, title, and time and date of notice;
(l) Further medical follow-up; and
(m) Name of signature of person completing the incident report.
Incident Report Form

This incident report is located in the Health and Safety Toolkit and contains space for immediate actions, causes/contributing factors and preventative measures. This form can be found [http://dodd.ohio.gov](http://dodd.ohio.gov)

Elements of an effective Incident Report

- **Who** – Staff and individuals involved in the incident
- **What** – What happened before (antecedent), during (detailed account) and after (immediate action) the incident
- **When** – Date and time of incident (Timely)
- **Where** – Location of the incident
Some Providers and County Boards provide each staff with a laminated card after MUI/UI training. The small card can be carried on the staff in their wallet and serves as a reference for how, what and when to report.

What tools can you implement to reinforce timely reporting of incidents?
(M) Requirements for Unusual Incidents

(1) Unusual incidents shall be reported and investigated by the provider.

(2) Each agency provider shall develop and implement a written unusual incident policy and procedure that:

- (a) Identifies what is to be reported as an unusual incident which shall include unusual incidents as defined in this rule;
- (b) Requires an employee who becomes aware of an unusual incident to report it to the person designated by the agency provider who can initiate proper action;
- (c) Requires the report to be made no later than twenty-four hours after the occurrence of the unusual incident; and
- (d) Requires the agency provider to investigate unusual incidents, identify the cause and contributing factors when applicable, and develop preventive measures to protect the health and welfare of any at-risk individuals.
(M) Requirements for Unusual Incidents

(3) The agency provider shall ensure that all staff are trained and knowledgeable regarding the unusual incident policy and procedure.

(4) If the unusual incident occurs at a site operated by the county board or at a site operated by an entity with which the county board contracts, the county board or contract entity shall notify the licensed provider or staff, guardian, or other person whom the individual has identified, as applicable, at the individual’s residence. The notification shall be made on the same day the unusual incident is discovered.
(M) Requirements for Unusual Incidents

(5) Independent providers shall complete an incident report, notify the individual's guardian or other person whom the individual has identified, as applicable, and forward the incident report to the service and support administrator or county board designee on the same day the unusual incident is discovered.

UI Investigations

Three questions

• What Happened?

• Why did it happen?

• What are you going to do about it?
What comes first?

HEALTH AND SAFETY

IMMEDIATE ACTIONS COME FIRST
IMMEDIATE ACTIONS COME FIRST
IMMEDIATE ACTIONS COME FIRST

Immediate Actions

- Always document what actions were taken following the incident
  - Assessed for injuries
  - Called 911
  - Initiated first aid
  - Separated the individuals
  - Notified law enforcement
  - Notified the county board/IA
How to Investigate a UI?

- Start with the Incident Report:
  - Description: Does the information given by staff explain what happened? Did the witness tell us the Who, What, Where and When?
  - Immediate Action
  - What was happening prior to incident? What was staff and individuals doing prior.
  - Antecedents

- Was there an Injury? Does the Injury match the story given as to how it occurred? Medical Treatment?
- Unknown Injury? Does staff document on the IR how this may have occurred?
- Where did this occur? Bathroom, bedroom?
- Witnesses – Staff and Individuals! Anyone Else
- Notifications
How to Investigate a UI?

- Interview as soon as possible after the incident so information will not be lost.
- It is difficult to recall specifics related to an incident the more time has passed.
- What do we know about the Individual? ISP, BSP, and relevant medical Info.
- What do we know about others involved? This would include peers, staff, family, etc..
- Working and personal relationships

How to Investigate a UI?

- What is the Cause?
- What are some of the Contributing Factors?
  - Staff
  - Equipment
  - Individuals
  - Policies
  - Environment
  - Communication Systems
  - Leadership
Causes & Contributing Factors

- What Happened?
- Why did it happen?
- Drill Down into the incident to identify the Root Cause as well as Contributing Factors.

Prevention Planning
Elements of a Good Prevention Plan

- Based on a thorough investigation which gives an explanation of “cause”. The prevention plan should attempt to address each cause identified not just “the obvious case.”
- Addresses other significant factors that played a role in the incident.
- Is not just “a plan to plan,” but is specific in identifying WHO is going to do WHAT, WHEN, WHERE, and HOW.

Elements of a Good Prevention Plan

- Takes into account not only “people” issues, but “systems” issues.
- One that not only addresses immediate action, but attempts to address long term planning towards a desired outcome.
- Includes involvement of the person and their guardian (as applicable) in the planning process.
- Shared across a variety of settings and includes feedback from a variety of disciplines for a holistic approach to a desirable outcome.
Elements of a Good Prevention Plan

Prevention planning:

A quality prevention planning process includes the steps that have been taken for a specific case, as well as any steps that will be systemic in nature, regarding future prevention.

Elements of a Good Prevention Plan

Prevention plans are not developed in a vacuum and should be a means to an end.

Both specific preventions for the individual case and far reaching system changing preventions should be included in a good prevention plan.
Prevention Plan

Does the action to be taken address the cause of the incident?

Is the action to be taken within the control of responsible person?

Are the necessary resources available?

If the preventative action is effectively implemented, can it minimize recurrence of the incident?

All UI’s require a prevention plan

All UI logs need prevention plans

A good prevention plan may prevent an MUI.

Is this a UI trend?
Prevention Plan

Do not blame the victim...

Consider ..

- Will this make a difference in the life of this individual and/or other individuals?

- How will you make sure that the prevention measure was implemented?

Rights Investigation

- On Monday, 9/5/13, While getting individuals ready for work, Sam M told me that he hates the home manager Carla Tortelli. Sam told me that yesterday he went out into the living room and Carla was sitting on the sofa playing a game on her IPad. Sam said that he went up to the television and turned the channel so he could watch a football game. Sam claims that Carla told him "I was watching that." Sam says this upset him and didn’t think it was fair so he went back to his room. Sam says that Carla came back to his room and told him that when her show was over he could watch what he wanted. Sam does not think that Carla is nice and is now asking to buy a television for his room.
Rights Investigation

- What is your immediate action?
- Who will you interview?
- History of the Individual and Staff Involved?
- Contributing Factors?
- Prevention Plan?

Peer/Peer Investigation

- Incident Description: Mike F. Matthew was at his day site when he grabbed another peer because he wanted to touch the peers leather coat. Staff were moving to separate the two men as Matt would not let go of the coat. Before staff could separate the peer (William C) fell to the ground.
Peer/Peer Investigation

- Immediate Action
- Did William have an Injury? Was he assessed and did he receive treatment?
- Was Mike firmly fixed and does injury make this an MUI?
- What is the supervision level for Mike and William?

Peer/Peer Investigation

- History? Does Mike have a history of grabbing people or only people with certain clothing?
- Does William have an unsteady gate or a history of falls?
- What are the Contributing Factors?
- What is the Prevention Plan?
Incident Description: Individuals were eating breakfast when Barbara S stood up from the table and fell to the ground. Barbara must have bumped her head on the table. She has a red mark on her head. She seemed fine so we helped her up to her chair and she finished drinking her juice. Incident was called into the Supervisor on Call.

Immediate Action?

What treatment was needed for injury?

How did she Fall?

Why did she Fall?

History?

Supervision Level? What if Barbara is eyes on?

Contributing Factors?

Prevention Plan?
When Adam came home off the bus I was standing at the front door waiting for him and Blake. Blake was in front of Adam and walking slow as usual. Adam told Blake to hurry the hell up. He bumped into Blake a little and then walked onto the porch. I told Adam that he needs to be nicer to his roommate. Adam told me to shut the F*** Up and to mind my own business. Due to his behavior I informed Adam that he would not be going to the dance tonight. Adam told me to go to H***.

Immediate Action?

What time does the bus drop folks off?

What time is the dance?

Was there a risk to the individual? How did he handle not going to the dance?

Contributing Factors?

Prevention Plan?
Dental Injury

- When I woke Joey up this morning I noticed that one of his front teeth was chipped. I helped him with his morning routine and looked around his room to see if I could find the rest of his tooth. He does not seem to be in pain and it is only the one front tooth.

Immediate Action

- Who to interview? (Individual does not verbally communicate and would be difficult to get information from.)
- Supervision Level
- Ask previous staff if they remember seeing his tooth in place?
- What activities is he involved with?
- History of falls?
Dental Injury

- Peer/Peer?
- Can you determine how this may have occurred.
- Cause & Contributing Factors
- Prevention Plan

Medication Error Investigation

- On Tuesday 3/7/15, Terry B. was accidentally given 10mg of Niacin. I was passing out medications to the guys in the home. We were rushing around to get on the bus and I gave him the Niacin. The Niacin belongs to Howard L. I contacted the supervisor who will contact the Nurse on duty.
Medication Error Investigation

- Immediate Action is important when a med error occurs.
- Always review the risk on medication errors.
- Review Medication Administration and your policies and procedures in regards to passing medications.
- Look for trends
- Contributing Factors and Prevention Plan?

(M) Requirements for Unusual Incidents

(6) Each agency provider and independent provider shall review all unusual incidents as necessary, but no less than monthly, to ensure appropriate preventive measures have been implemented and trends and patterns identified and addressed as appropriate.
(M) Requirements for Unusual Incidents

7. The unusual incident reports, documentation of identified trends and patterns, and corrective action shall be made available to the county board and department upon request.

8. Each agency provider and independent provider shall maintain a log of all unusual incidents. The log shall include, but is not limited to, the name of the individual, a brief description of the unusual incident, any injuries, time, date, location, and preventive measures.

http://dodd.ohio.gov/healthandsafety/Documents/UNUSUAL%20INCIDENT%20REPORT%20LOG%20pdf%208%2029%2013.pdf
(M) Requirements for Unusual Incidents

(9) The agency provider and the county board shall ensure that trends and patterns of unusual incidents are included and addressed in the individual service plan of each individual affected.

Why are UI Logs Important?

- UI logs will help you identify *Trends and Patterns* that need to be addressed to ensure the Health and Welfare of those you serve.
- To ensure that sound preventative measures are in place.
- It is required that all Providers complete monthly UI logs.
- DODD will review UI logs during compliance reviews.
- There is an emphasis on Unusual Incident Investigations.
What is a UI Trend?

**DODD Guidance:**
A trend is considered three of the same or similar incidents in a week or five in a month or anything that the team identifies as a pattern or trend for that person.

UI Trend Examples

Examples of UI Trends- Falls, Peer/Peer Acts, Medication Errors which includes missed meds, Finding meds on the floor, Unknown Injuries, Rights Violations, UBS

Scenario – Two Individuals live in IO Waiver Home together for 8 years. A new Individual with a diagnosis of Autism moves into the home. He has always lived with his mom. New Individual, while adjusting, will run through the house hitting peers and staff on their arms. The individual slapped his peers on the arms 6 times in the month of July.
## UI Log Sample

### UNUSUAL INCIDENT REPORT LOG

<table>
<thead>
<tr>
<th>Provider/Facility</th>
<th>Month/Year</th>
<th>County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Date/Time</td>
<td>Injury</td>
</tr>
<tr>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

### Additional Information

- **Reviewed by:**
  - TEN: __________
  - DOH: __________

- **Trends and Pattern Identified?**
  - Yes: [ ]
  - No: [ ]

- **Trends and Pattern Addressed?**
  - Yes: [ ]
  - No: [ ]

  If yes, please complete section below.

### Relevant Link

- Link to UI Log:
Clues of a good UI Log System

- A well organized system for the tracking unusual incidents
- The provider submitted logs as requested
- There is a clear indication of who completed the log review
- The date of the review is documented
Clues of a Good UI Log System

- Logs contain the following required elements:
  - Name of the individual
  - A brief description of the unusual incident
  - Any injuries
  - Time
  - Date
  - Location
  - Preventive measures

*Best Practice-Immediate Actions, Causes and Contributing Factors and Staff Involved*

Clues of a Good UI Log System

- Log includes good immediate actions such as medical assessments, protections for individuals, etc.
- There are no blank sections
- “Unknown” is rarely used
- Prevention Plans are specific and address the cause and contributing factors.
Clues of a Good UI Log System

- The Prevention Plan section doesn’t say “Continue to Monitor” or “Follow the Plan”
- Is mindful of person’s needs and diagnosis and doesn’t use phrases like “Remind Suzy to be careful” or “Redirect as needed”
- Prevention plan is not generic such as “Medical Follow up, Safety Reminder, Staff to monitor”

Clues of a Good UI Log System

- There is no evidence of unreported MUIs
- Log contains enough detail to tell the story of what happened
- Any patterns are clearly identified and have action steps.
### Example of Good UI Log

#### UNUSUAL INCIDENT REPORT LOG

<table>
<thead>
<tr>
<th>Provider/Facility</th>
<th>UI #</th>
<th>Date/Time</th>
<th>Injury</th>
<th>Home Name and Address</th>
<th>Location</th>
<th>Description of the incident (Explain the risk of harm)</th>
<th>Immediate Actions Taken to Decrease and Verify</th>
<th>Causes and Contributing Factors</th>
<th>Prevention Plan</th>
<th>U/M/U</th>
</tr>
</thead>
<tbody>
<tr>
<td>James, John</td>
<td>1101</td>
<td>11/11/13</td>
<td>6:10pm</td>
<td>Lost key</td>
<td>Linn Rd</td>
<td>James was in the kitchen when he turned on the stove and burned his hand. The burn was not severe.</td>
<td>Monitor key use and provide instruction on safe use of stove.</td>
<td>Key not secure. No evidence of intentional or accidental behavior.</td>
<td>Weekly monitoring and instruction.</td>
<td>NA</td>
</tr>
<tr>
<td>Joe, Black</td>
<td>1102</td>
<td>11/11/13</td>
<td>None</td>
<td>NA</td>
<td>NA</td>
<td>Joe had just finished his dinner. Joe was watching TV when he heard a loud noise. Joe's plate fell and broke.</td>
<td>Stop watching TV and require assistance with household activities.</td>
<td>Plate not secure. No evidence of intentional or accidental behavior.</td>
<td>Weekly monitoring and instruction.</td>
<td>NA</td>
</tr>
<tr>
<td>James, Blue</td>
<td>1103</td>
<td>11/11/13</td>
<td>6:10pm</td>
<td>Red mark on his left shoulder</td>
<td>Living</td>
<td>James was sitting in his living room watching TV when the remote control fell and hit his head.</td>
<td>Stop watching TV and require assistance with household activities.</td>
<td>Remote control not secure. No evidence of intentional or accidental behavior.</td>
<td>Weekly monitoring and instruction.</td>
<td>NA</td>
</tr>
<tr>
<td>James, Black</td>
<td>1104</td>
<td>11/12/13</td>
<td>7:05am</td>
<td>None</td>
<td>NA</td>
<td>James was offered a banana for breakfast. Joe did not want to eat it.</td>
<td>Stop offering food and require assistance with meal preparation.</td>
<td>Banana not secure. No evidence of intentional or accidental behavior.</td>
<td>Weekly monitoring and instruction.</td>
<td>NA</td>
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**Example of Good UI Log**

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<td>Banana not secure. No evidence of intentional or accidental behavior.</td>
<td>Weekly monitoring and instruction.</td>
<td>NA</td>
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</tbody>
</table>
## Example of a Good UI Log

**UNUSUAL INCIDENT REPORT LOG**

**GOOD EXAMPLE**

<table>
<thead>
<tr>
<th>Name</th>
<th>UI #</th>
<th>Date &amp; Time</th>
<th>Injury</th>
<th>Home Name and Address</th>
<th>Location</th>
<th>Description of the incident (Explain the risk of Harm)</th>
<th>Immediate Actions Taken to Ensure Health and Safety</th>
<th>Causes and Contributing Factors</th>
<th>Prevention Plan</th>
<th>UI/MU</th>
</tr>
</thead>
<tbody>
<tr>
<td>John</td>
<td>1111</td>
<td>12/2/13 2:29 p.m.</td>
<td>Right hand had a large bite mark on top of his hand. The skin was broken and the wound looked red and puffy.</td>
<td>1819 W. Broad Street, Apartment Court Yard</td>
<td>John said that his neighbor's dog, Lucky, bit him on the hand and it was bleeding.</td>
<td>1. Took John to Cleveland Metro. They confirmed the dog was current on shots. Cleaned wound, put stitches in it, and released 2 hours later with prescription. 2. Reminded staff to call staff next time the dog bites him.</td>
<td>John was probably playing rough with dog.</td>
<td>1. Take prescribed medication from ER, follow up with MD, call landlord to request that dog not be able to roam off leash. 2. Discussed risks of approaching stray dogs with John. 3. Told about maybe visiting Humane Society to see animals that he can maybe play with possible volunteer.</td>
<td>Ui</td>
<td></td>
</tr>
<tr>
<td>Sara</td>
<td>1112</td>
<td>12/8/13 9:53 a.m.</td>
<td>Large quarter-size bruise on left arm.</td>
<td>119 South Ave, Hallway</td>
<td>Sara was walking down the hallway and fell to the left hitting left side of body and arm on the wall.</td>
<td>Checked Sara and noticed reddened area on arm, she declined any other pain. Gave Sara her walker and assisted her to her feet.</td>
<td>Sara was not using her walker and rushing to restroom. Sara walks too fast.</td>
<td>1. Asked Sara if she would assistance to rest room every 1 hour so she doesn’t need to rush. 2. Remind Sara to use walker.</td>
<td>Ui</td>
<td></td>
</tr>
</tbody>
</table>

---

**Example of a Good UI Log**

| Robby Brown | 1116 | 12/12/13 7:00 p.m. | No Injuries | 123 W. Central Avenue | Living Room | Robby was watching OSU Michigan Basketball game on TV. When the Michigan team scored a 3 point shot, Robby threw his full can of Diet Coke at the TV. The glass went everywhere and the TV screen shattered. | 1. Tried to calm Robby by talking about his frustration per his ISP. Robby calmed down. 2. Checked Robby’s injuries. Cleaned up glass and spilled soda. 3. Put TV in closet to see if it can be repaired. At later time. 4. Contacted On Call | Robby sometimes had hard time expressing himself. | 1. Contact County Board and see if Counseling might be appropriate as an outlet for Robby. 2. Develop more strategies for Robby when he is becoming frustrated, like recording game and coming back to it when he is calmer. 3. TV Repair | Ui |      |
| Kris Cross | 1117 | 12/14/13 7:45 p.m. | None | 1 Castle Court | Family Room | Kris and his roommate were sitting in the family room and started screaming at each other. | Talked to guys and asked maybe they want to do stuff by themselves and they agreed. Kris went outside to chat hoops and roommate played video games. | Got into argument on bus ride home from work. | Spend about 5 minutes talking about their decision to arrive from work. | Ui |      |
| Sara Stein | 1118 | 12/16 8:20 a.m. | None | 119 South Ave | Hallway | Sara was walking down the hallway and fell on knees. Assessed and no injuries. Sara reported she is not in any pain and just fell. Helped to feet with walker. | Medication? Still not walking with her. | Reported to Nurse and Home Manager. | Ui |      |
| Sara Stein | 1119 | 12/18/13 7:57 a.m. | None | 119 South Ave | Kitchen | Sara was walking in kitchen and fell to knees. Staff was beside her and gave medications. Sara seemed really unsteady. | Just gave new medication. | Will check blood pressure after give medication, called nurse and home manager. | Ui |      |
### Example of a Good UI Log

<table>
<thead>
<tr>
<th>Name</th>
<th>Time</th>
<th>Location</th>
<th>Event Description</th>
<th>Staff Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sara</td>
<td>11:20</td>
<td>Hallway</td>
<td>Sara was walking down the hallway and started to drop and fell on knees.</td>
<td>Staff were with her and helped protect head and body lower to ground.</td>
</tr>
<tr>
<td></td>
<td>12/30/13</td>
<td></td>
<td>Medication was just administered. Temperature was 98.5 after fall and it was low.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>1. Called nurse and got new call manager.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>2. Talked to MD about scheduling an appointment with physician.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3. Called to MD and nurse.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>4. Appointment with Dr. scheduled for 12/30/13.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>5. Continue to walk with Sara.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>6. Encourage Walker and PCA to help.</td>
<td></td>
</tr>
<tr>
<td>Joe Walsh</td>
<td>11:20</td>
<td>Hallway</td>
<td>Sara was walking down the hallway and fell and hit her head on coffee table.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>1. Checked for no visible injuries. Asked if she was ok and she said she was.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>2. Took Sara to ER to get checked because she hit head hard on table. No injuries and released.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Medication was just administered. Temperature was 98.5 after fall and it was low.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>1. Calls to MD and nurse.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>2. Appointment with Dr. scheduled for 12/30/13.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3. Continue to walk with Sara.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>4. Encourage Walker and PCA to help.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>5. Check falls.</td>
<td></td>
</tr>
<tr>
<td>Paul and Sue</td>
<td>11:25</td>
<td>Lounge</td>
<td>Paula and Sue were going out. Paula called him swear words and then kicked him in the stomach.</td>
<td>Paula said that he took his cell phone to work and he can't find it.</td>
</tr>
<tr>
<td></td>
<td>11/31/13</td>
<td></td>
<td>Cell phone was left at home. Work called back unreported.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>1. Assisted Joe in obtaining new cell phone.</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>2. Helped Joe purchase locks for work locker so he can secure items.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3. Helped Joe purchase locks for work locker so he can secure items.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>4. It appears that the fall was a fall.</td>
<td></td>
</tr>
</tbody>
</table>

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### Examples of a Good UI Log

Trends and Pattern Identified?  **YES** ✔  **NO** ☐

Trends and Pattern Addressed?  **YES** ✔  **NO** ☐

If yes, please complete section below.

**Action taken to address identified Patterns and Trends:**

- Sara Stein fell 37 times in December 2013 resulting in some injuries such as bruising to knees and hand and hitting her head on the coffee table. Sara was taken to the Emergency Room for assessment to rule head trauma and none found.

- The following actions were taken:
  1. Staff documented time of falls which all occurred in the morning following medication administration.
  2. Staff began walking beside Sara to reduce likelihood of falling/reduce severity of injury.
  3. Staff are asking Sara each and every time she gets up if she would like to use her walker.
  4. Staff takes Sara's BP prior to after medication invasion she had a change in medication and it may be contributing to unsteady gait.
  5. Asked Sara's pharmacist to review medications to see if any could have an impact on falling. Pharmacist recommends that Doctor review the medications because the combination can be sedating.
  6. Sara went to the Doctors 12/30/13 and he discontinued the new medication and prescribed a different one. From 12/31/13-1/5/14, Sara has had no reported falls.
  7. Sara has follow up appointment with her Doctor on 1/21/14 and will report on any falls that occurred.

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O.A.C. §1792-17.32 (Ref)(6) Each agency provider and independent provider shall maintain a log of all unusual incidents. The log shall include, but is not limited to, the name of the individual, a brief description of the unusual incident, any injuries, time, date, location, and preventive measures.
Frequently Asked Questions

1. How should a provider document when they do not have any UIs that month? We recommend documenting on UI Log that there were no UIs that month.

2. Is the provider required to keep a UI log if they are not serving anyone? No.

Oversight

☐ (N)(1) The county board shall review, on at least a quarterly basis, a representative sample of provider logs, including logs where the county board is a provider, to ensure that major unusual incidents have been reported, preventive measures have been implemented, and that trends and patterns have been identified and addressed in accordance with this rule. The sample shall be made available to the department for review upon request.
(N)(2) When the county board is a provider, the department shall review, on a monthly basis, a representative sample of county board logs to ensure that major unusual incidents have been reported, preventive measures have been implemented, and that trends and patterns have been identified and addressed in accordance with this rule. The county board shall submit the specified logs to the department upon request.

(N)(3) The department shall conduct reviews of county boards and providers as necessary to ensure the health and welfare of individuals and compliance with this rule. Failure to comply with this rule may be considered by the department in any regulatory capacity, including certification, licensure, and accreditation.
SSA Rule O.A.C. 5123:2-11

(j) Provide ongoing individual service plan coordination to ensure services and supports are provided in accordance with the individual service plan and to the benefit and satisfaction of the individual. Ongoing individual service plan coordination shall:

(i) Occur with the active participation of the individual and members of the team;
(ii) Focus on achievement of the desired outcomes of the individual;
(iii) Balance what is important to the individual and what is important for the individual;
(iv) Examine service satisfaction (i.e., what is working for the individual and what is not working); and
(v) Use the individual service plan as the fundamental tool to ensure the health and welfare of the individual.

What if a Provider does not supply the UI Log?

1. The CB or COG will document all attempts to get logs.
2. The CB/COG will contact the DODD MUI Regional Manager by email with the requested dates and contact information of the provider.
3. The MUI Regional Manager can contact the Provider directly or participate in a conference call to discuss UI log requirements.
4. The MUI Department will follow up with a letter copying the Office of Provider Standards and Review (OPSR).
5. Referral will be made to OPSR if logs not received after request by DODD MUI office. This could result in citations issued to the provider.
THANK YOU!
Chuck Davis, MUI Regional Manager
(614) 995-3820
Charles.Davis@dodd.ohio.gov

Abuse/Neglect Hotline
1-866-313-6733