

Stark County Board of Developmental Disabilities

Policy 2.12 Incidents Adversely Affecting Health and Safety	Effective: 10/27/16
Chapter 2: Agency Administration	Page 1 of 21

INCIDENTS ADVERSELY AFFECTING HEALTH AND SAFETY

POLICY

The Stark County Board of Developmental Disabilities recognizes its responsibilities to provide a safe and healthy environment for individuals eligible for services from the Board. To that end the Board is committed to dedicating the resources required to accomplish all delegated and assigned responsibilities pursuant to rules adopted under section 5123.61 of the Ohio Revised Code (ORC) and section 5123:2-17-02 of the Ohio Administrative Code (OAC).

When there is reason to believe the health or safety of an individual receiving services through the Board may be adversely affected, or that the individual may be placed at a reasonable risk of harm by an alleged, suspected, or actual occurrence of an incident, the incident is designated as a Major Unusual Incident (MUI). (Note: Individuals affected by an incident that is likely to lead to the provision of services from the Board are considered as receiving services from the Board.)

A process shall be implemented and maintained to effectively manage incidents that adversely affect the health and safety of individuals. Through its Investigative Services Unit, the Board will define and establish a system to report, investigate, review, remedy and analyze such incidents and to monitor and verify the implementation of immediate, corrective and preventative actions taken to ensure the health and safety of individuals served. Throughout the process the Board will work with families, guardians, advocates, providers and other appropriate parties to monitor and verify that necessary actions have been taken to ensure individuals are maintained in safe and healthy environments.

In addition, management of incidents that do not rise to the level of MUIs (therefore called Unusual Incidents) is an integral responsibility of providers throughout the developmental disabilities system. While largely a provider-based responsibility, the Investigative Services Unit of Stark County Board of Developmental Disabilities carries out review and analysis of Unusual Incident logs and data as delegated in the aforementioned OAC. Careful management of systems in place to record and analyze these Unusual Incidents can be an important deterrent to the development of more serious incidents adversely affecting individuals with developmental disabilities.

Stark County Board of Developmental Disabilities

Policy 2.12 Incidents Adversely Affecting Health and Safety	Effective: 10/27/16
Chapter 2: Agency Administration	Page 2 of 21

The Board recognizes that as a provider of services it must ensure that its provider staff is trained, prior to the provision of services to any individual, on the requirements of the aforementioned OAC (sometimes referred to as the “MUI Rule”). In particular, this training must assure staff competency pursuant to the identification and timely reporting of incidents. (See the provider certification requirements detailed in OAC 5123:2-2-01.) In addition to maintaining the competency of its provider staff through regularly scheduled training, the Board also accepts this responsibility for its administrative employees, interns, contractors and volunteers.

Investigative Agents, assigned to the Investigative Services Unit, shall be certified as such by the Ohio Department of Developmental Disabilities pursuant to rules adopted under section 5126.25 of the ORC.

Nothing in this policy and its related procedure shall relieve any person of the responsibility to comply with Section 5123.61 of the ORC or Section 5123:2-17-02 of the OAC.

The Superintendent will develop procedures to implement this policy.

<p>Historical Resolution Information</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 20%;">Date</th> <th style="text-align: left;">Resolution Number</th> </tr> </thead> <tbody> <tr> <td>5/17/07</td> <td>05-55-07</td> </tr> <tr> <td>8/24/13</td> <td>08-58-13</td> </tr> <tr> <td>9/27/16</td> <td>09-39-16</td> </tr> </tbody> </table>	Date	Resolution Number	5/17/07	05-55-07	8/24/13	08-58-13	9/27/16	09-39-16	<p>Reviewer(s):</p> <p>Director of SSA/ Investigative Services</p>
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Stark County Board of Developmental Disabilities

Policy 2.12 Incidents Adversely Affecting Health and Safety	Effective: 10/27/16
Chapter 2: Agency Administration	Page 3 of 21

INCIDENTS ADVERSELY AFFECTING HEALTH AND SAFETY

PROCEDURE

This procedure establishes how Stark County Board of Developmental Disabilities (SCBDD) will comply with its mandated responsibilities for addressing reported incidents, identifying those that are properly established as Major Unusual Incidents (MUIs), conducting investigations of those established as MUIs, managing the responsibilities assigned to County Boards pertinent to all incidents regardless of whether they are established as MUIs, and implementing a continuous quality improvement process in order to prevent or reduce the risk of harm to individuals.

1. Application: This rule applies to SCBDD, and all providers contracting with the SCBDD.
2. Definitions
 - a. "Administrative investigation" means the gathering and analysis of information related to an MUI so that appropriate action can be taken to address any harm or risk of harm and prevent future occurrences. There are three administrative investigation procedures that correspond to the three categories of MUIs (Categories A, B and C).
 - b. "Agency provider" means a provider, certified or licensed by the Ohio Department of Developmental Disabilities (DODD), or a provider approved by the Ohio Office of Medical Assistance (OMA) to provide services under the Transitions Developmental Disabilities Waiver, that employs staff to deliver services to individuals and who may subcontract the delivery of services. "Agency provider" includes any County Board of Developmental Disabilities while providing specialized services.
 - c. "At-risk individual" means an individual whose health, safety or welfare is adversely affected or whose health, safety or welfare may reasonably be considered to be in danger of being adversely affected.
 - d. "Incident report" means documentation that contains details about an MUI or an Unusual Incident (UI). An incident report shall include, but is not limited to:
 - 1) Individual's name
 - 2) Individual's address
 - 3) Date of incident
 - 4) Location of incident
 - 5) Description of incident
 - 6) Type and location of injuries

Stark County Board of Developmental Disabilities

Policy 2.12 Incidents Adversely Affecting Health and Safety	Effective: 10/27/16
Chapter 2: Agency Administration	Page 4 of 21

- 7) Immediate actions taken to ensure health, safety and welfare of individual involved and any at-risk individuals
 - 8) Name of primary person involved and his or her relationship to individual
 - 9) Name(s) of witness(es)
 - 10) Statements completed by person(s) who witnessed or have personal knowledge of the incident
 - 11) Notifications given with name and title of those who were notified; time and date of notice was given
 - 12) Any known medical follow-up to the incident
 - 13) Name and signature of person completing the incident report
- e. "Incident tracking system" (ITS) means DODD's online web-based system for reporting MUIs.
- f. "Independent provider" means a self-employed person who provides services for which he or she must be certified under rule 5123:2-2-01 of the Ohio Administrative Code (OAC) or approved by the OMA. Independent providers do not employ, either directly or through contract, anyone else to provide the services for which they are responsible.
- g. "Individual" means a person with a developmental disability.
- h. "Individual served" means an individual who receives specialized services.
- i. "Major Unusual Incident" means the alleged, suspected, or actual occurrence of an incident wherein there is reason to believe the health, safety or welfare of an individual may be adversely affected or an individual may be placed at a likely risk of harm, if such individual is receiving services through the developmental disabilities service delivery system or will be receiving such services as a result of the incident. There are three categories of MUIs that correspond to three administrative investigation procedures delineated as Categories A, B, and C.
- j. "Primary person involved" (PPI) means the person alleged to have committed or to have been responsible for the physical abuse, sexual abuse, verbal abuse, exploitation, failure to report, misappropriation, neglect, prohibited sexual relations, rights code violation, or accidental or suspicious death.
- k. "Provider" means any agency provider or independent provider that provides specialized services.

Stark County Board of Developmental Disabilities

Policy 2.12 Incidents Adversely Affecting Health and Safety	Effective: 10/27/16
Chapter 2: Agency Administration	Page 5 of 21

- l. "Specialized services" means any program or service designed and operated to serve primarily individuals, including a program or service provided by an entity licensed or certified by DODD.
 - m. "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 service plan, but is not an MUI. UIs include, but are not limited to, dental injuries; falls; injuries that are not significant injuries; medication errors without a likely risk to health, safety or welfare; overnight relocation of an individual due to a fire, natural disaster, or mechanical failure; incidents involving two individuals served that are not peer-to-peer act MUIs; and rights code violations or unapproved behavior supports without a likely risk to health, safety or welfare.
3. MUI Categories
 - a. Category A
 - 1) Accidental or Suspicious Death: the death of an individual resulting from an accident or suspicious circumstances.
 - 2) Exploitation: the unlawful or improper act of using an individual or an individual's resources for monetary or personal benefit, profit, or gain.
 - 3) Failure to Report: the lack of timely reporting by a person, who is required to report pursuant to section 5123.61 of the Ohio Revised Code (ORC), and has reason to believe that an individual has suffered or faces a substantial risk of suffering a wound, injury, disability, or condition of such a nature as to reasonably indicate abuse, misappropriation, or exploitation that results in a risk to health, safety or welfare or neglect of that individual. Such information must be immediately reported to a law enforcement agency, a county board, or, in the case of an individual living in a Developmental Center, either to law enforcement or DODD. Pursuant to division (C)(1) of section 5123.61 of the ORC, such report shall be made to DODD and the County Board when the incident involves an act or an omitted act of an employee of a county board.
 - 4) Misappropriation: depriving, defrauding, or otherwise obtaining the real or personal property of an individual by any means prohibited by the ORC, including Chapters 2911. and 2913. of the ORC.

Stark County Board of Developmental Disabilities

Policy 2.12 Incidents Adversely Affecting Health and Safety	Effective: 10/27/16
Chapter 2: Agency Administration	Page 6 of 21

- 5) Neglect: failing to provide an individual with any treatment, care, goods, supervision, or services necessary to maintain the health, safety or welfare of the individual, when there is a duty to do so.
- 6) Peer-to-Peer Act: the occurrence of one of the following incidents, involving two individuals served:
 - a) Exploitation, which means the unlawful or improper act of using an individual or an individual's resources for monetary or personal benefit, profit, or gain.
 - b) Theft, which means intentionally depriving another individual of real or personal property in an amount valued at twenty dollars or more, or property of significant personal value to the individual; or improperly using an individual or an individual's resources for monetary or personal benefit, profit, or gain.
 - c) Physical act, which means an individual is targeting or firmly fixed on another individual; the act is not accidental or random. The incident results in an injury that is treated by a physician, physician assistant, or nurse practitioner. Allegations of one individual choking another or any head or neck injuries such as a bloody nose, a bloody lip, a black eye, or other injury to the eye, shall be considered MUIs. Minor injuries such as scratches or reddened areas, not involving the head or neck shall be considered UIs and shall require immediate action, a review to uncover possible causes or contributing factors, and prevention measures.
 - d) Sexual act, which means sexual conduct and/or contact for the purposes of sexual gratification without the consent of the other individual.
 - e) Verbal act, which means the use of words, gestures, or other communicative means to purposefully threaten, coerce, or intimidate the other individual when there is the opportunity and ability to carry out the threat.
- 7) Physical Abuse: the use of physical force that can reasonably be expected to result in physical harm or serious physical harm as defined in section 2901.01 of the ORC. Such force may include, but is not limited to, hitting, slapping, pushing, or throwing objects at an individual.
- 8) Prohibited Sexual Relations: an employee of any entity of the Developmental Disabilities system engaging in consensual sexual conduct or having consensual sexual contact with an individual who is not the employee's spouse, and for whom the employee was employed or under contract to

Stark County Board of Developmental Disabilities

Policy 2.12 Incidents Adversely Affecting Health and Safety	Effective: 10/27/16
Chapter 2: Agency Administration	Page 7 of 21

provide care at the time of the incident, including persons in the employee's supervisory chain of command.

- 9) Rights Code Violation: any violation of the rights enumerated in section 5123.62 of the ORC that creates a likely risk of harm to the health, safety or welfare of an individual.
- 10) Sexual Abuse: the unlawful sexual conduct or sexual contacts, as those terms are defined in section 2907.01 of the ORC, or the commission of any act prohibited by section 2907.09 of the ORC (e.g., public indecency, importuning, and voyeurism).
- 11) Verbal Abuse: using words, gestures, or other communicative means to purposefully threaten, coerce, intimidate, harass, or humiliate an individual.

b. Category B

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

Stark County Board of Developmental Disabilities

Policy 2.12 Incidents Adversely Affecting Health and Safety	Effective: 10/27/16
Chapter 2: Agency Administration	Page 8 of 21

c. Category C

- 1) Law Enforcement: any incident that results in the individual served being charged, incarcerated, or arrested.
- 2) Unapproved Behavior Support: the use of any aversive strategy or intervention prohibited by paragraph (J) of rule 5123:2-1-02 of the OAC or an aversive strategy implemented without approval by the Human Rights Committee or Behavior Support Committee or without informed consent, that results in a likely risk to the individual's health, safety or welfare. An intervention that is prohibited by paragraph (J) of rule 5123:2-1-02 of the OAC and does not pose a likely risk to health, safety or welfare shall be investigated as a UI.
- 3) Unscheduled Hospitalization: any hospital admission that is not scheduled, unless the hospital admission is due to a pre-existing condition that is specified in the ISP indicating the specific symptoms and criteria that require hospitalization.

4. Major Unusual Incident Reporting Requirements

- a. Reports regarding all MUIs involving an individual who receives round-the-clock waiver-funded services or who resides in an Intermediate Care Facility (ICF) shall be filed following the requirements of Section 5123.61 of the ORC and Section 5123:2-17-02 of the OAC, regardless of where the incident occurs. Reports regarding the following MUIs shall be filed and those requirements followed regardless of where the incident occurs:
 - 1) Accidental or Suspicious Death
 - 2) Attempted Suicide
 - 3) Exploitation
 - 4) Failure to Report
 - 5) Law Enforcement
 - 6) Misappropriation
 - 7) Missing Individual
 - 8) Neglect
 - 9) Peer-to-Peer Act
 - 10) Physical Abuse
 - 11) Prohibited Sexual Relations
 - 12) Sexual Abuse
 - 13) Verbal Abuse

Stark County Board of Developmental Disabilities

Policy 2.12 Incidents Adversely Affecting Health and Safety	Effective: 10/27/16
Chapter 2: Agency Administration	Page 9 of 21

- b. Reports regarding the following MUIs shall be filed and the aforementioned requirements followed only when the incident occurs in a program operated by a County Board or when the individual is being served by a licensed or certified provider:
 - 1) Attempted Suicide
 - 2) Medical Emergency
 - 3) Death (other than an accidental or suspicious death)
 - 4) Rights Code Violation
 - 5) Significant Injury
 - 6) Unapproved Behavior Support
 - 7) Unscheduled Hospitalization

- c. Immediately upon identification or notification of an MUI, the provider shall take all reasonable measures to ensure the health, safety and welfare of any at-risk individual. The provider and County Board shall discuss any disagreements regarding reasonable measures in order to resolve them. If the provider and County Board are unable to agree on reasonable measures to ensure the health, safety or welfare of at-risk individuals, DODD shall make the determination. Such measures shall include:
 - 1) Immediate and ongoing medical attention, as appropriate
 - 2) Removal of an employee from direct contact with any at-risk individual when the employee is alleged to have been involved in abuse or neglect until such time as the provider has reasonably determined that such removal is no longer necessary
 - 3) Any other necessary measures to protect the health, safety or welfare of at-risk individuals.

- d. Immediately upon receipt of a report or notification of an allegation, the County Board shall:
 - 1) Ensure that all reasonable measures necessary to protect the health, safety and welfare of any at-risk individual have been taken
 - 2) Determine if additional measures are needed
 - 3) Notify DODD if the circumstances require a department-directed administrative investigation as prescribed by paragraph (D)(14) of Section 5123:2-17-02 of the OAC. Such notification shall take place on the first working day the County Board becomes aware of the incident.

Stark County Board of Developmental Disabilities

Policy 2.12 Incidents Adversely Affecting Health and Safety	Effective: 10/27/16
Chapter 2: Agency Administration	Page 10 of 21

- e. All providers shall immediately, but no later than four hours after discovery of the incident, notify the County Board through means identified by the County Board of the following incidents or allegations:
- 1) Accidental or Suspicious Death
 - 2) Exploitation
 - 3) Misappropriation
 - 4) Neglect
 - 5) Physical Abuse
 - 6) Sexual Abuse
 - 7) Verbal Abuse
- Note: Any provider will immediately notify the County Board if/when the provider has received an inquiry from the media regarding a MUI
- f. All providers shall submit a written incident report to SCBDD no later than 3:00 p.m. the next working day following initial knowledge of a potential or determined MUI. Reports internal to SCBDD may be submitted through Gatekeeper per the agreed upon site-specific reporting procedures. Upon review and determination by SCBDD program management that an incident may constitute a reportable MUI, that incident report/composite will be forwarded to the Investigative Services Unit via email address: MUIreport@starkdd.org.
- g. SCBDD shall enter preliminary information regarding the incident in the ITS and in the manner prescribed by DODD by 3:00 p.m. on the working day following notification by the provider, or of becoming aware of the MUI.
- h. When a provider has placed an employee on leave, or otherwise taken protective action pending the outcome of the administrative investigation, SCBDD shall keep the provider apprised of the status of the administrative investigation so that the provider can resume normal operations as soon as possible consistent with the health, safety or welfare of any at-risk individuals. The provider shall notify SCBDD of any changes to the protective action.
- i. SCBDD maintains a system that is available twenty-four hours a day, seven days a week, to receive and respond to all reports. All providers and DODD are informed about this system.

Stark County Board of Developmental Disabilities

Policy 2.12 Incidents Adversely Affecting Health and Safety	Effective: 10/27/16
Chapter 2: Agency Administration	Page 11 of 21

- j. The provider or County Board shall immediately report to law enforcement any allegation of physical abuse, sexual abuse, verbal abuse, misappropriation, exploitation, neglect, failure to report, or peer-to-peer act which may constitute a criminal act. The provider shall document the time, date, and name of the law enforcement representative notified of the alleged criminal act. SCBDD will ensure that the notification has been made.

- k. All allegations of abuse or neglect of an individual under the age of twenty-one years shall be immediately reported to the local public children's services agency. The notification may be made by the provider or the County Board. SCBDD will ensure that the notification has been made.

- l. The provider shall make the following notifications, as applicable, when the incident or discovery of the incident occurs when such provider has responsibility for the individual. The notification shall be made on the same day the incident or discovery of the incident occurs and include immediate actions taken.
 - 1) Guardian or chosen representative or other person whom the individual has identified.
 - 2) Service and Support Administrator (SSA) serving the individual.
 - 3) Licensed or certified residential provider.
 - 4) Staff or family living at the individual's residence who have responsibility for the individual's care.
 - 5) Support broker for an individual enrolled in the Self-Empowered Life Funded Waiver.

- m. Notification Requirements
 - 1) All notifications or efforts to notify shall be documented. The County Board will ensure that all required notifications have been made.
 - 2) Notification will not be made if the person to be notified is the PPI, the spouse of the PPI, or the significant other of the PPI.
 - 3) Notification will be made to the individuals, individuals' guardians, and other persons whom the individuals have identified in a peer-to-peer act unless such notification could jeopardize the health, safety or welfare of an individual involved.

Stark County Board of Developmental Disabilities

Policy 2.12 Incidents Adversely Affecting Health and Safety	Effective: 10/27/16
Chapter 2: Agency Administration	Page 12 of 21

- 4) Notification to a person is not required when the report comes from such person or in the case of a death when the family is already aware of the death.
 - 5) In any case where law enforcement has been notified of an alleged crime, and there is reason to believe that the PPI may be employed by a provider other than the provider/employer wherein the alleged incident occurred, DODD will be notified by SCBDD so they may provide notification of the incident to any other provider, developmental center, or County Board for whom the PPI works, for the purpose of ensuring the health, safety or welfare of any at-risk individual.
5. General Administrative Investigation Requirements
- a. SCBDD shall employ at least one Investigative Agent (IA) or contract with a person or governmental entity for the services of an IA. An IA shall be certified by the department in accordance with rule 5123:2-5-07 of the OAC.
 - b. All MUIs will receive an administrative investigation and be documented in the form of an investigation report by an IA.
 - c. SCBDD may elect to follow the administrative investigation procedure for Category A for any established MUI.
 - d. Based on the facts discovered during administrative investigation of the MUI, the designated category may change. If an MUI category changes, the reason for the change shall be documented and the newly applicable category administrative investigation procedure shall be used to conduct the MUI investigation.
 - e. MUIs that involve an active criminal investigation may be closed as soon as the County Board ensures that the MUI is properly coded, the history of the PPI has been reviewed, the cause and contributing factors are determined, a finding is made, and prevention measures have been implemented. Information needed for closure of the MUI may be obtained from the criminal investigation.
 - f. County Board staff may assist the IA by gathering documents, entering information into the ITS, fulfilling Category C administrative investigation requirements, or performing other administrative or clerical duties that are not specific to the IA role.

Stark County Board of Developmental Disabilities

Policy 2.12 Incidents Adversely Affecting Health and Safety	Effective: 10/27/16
Chapter 2: Agency Administration	Page 13 of 21

- g. Except when law enforcement or the public children's services agency is conducting the investigation, the IA will conduct all interviews for MUIs, unless the IA determines the need for assistance with interviewing an individual. For an MUI occurring at an ICF, the IA may utilize interviews conducted by the ICF or conduct his/her own interviews. If the IA determines the information is reliable, the IA may utilize other information received from law enforcement, the public children's services agency, or providers.
- h. If the MUI involves an individual who resides in an ICF and the incident occurs at a program operated by the County Board, it is the responsibility of the ICF to complete an administrative investigation and assure that the administrative investigation complies with federal guidelines. The IA may utilize information from the ICF's administrative investigation to meet the requirements of the MUI rule or conduct a separate administrative investigation. Copies of the full administrative investigation will be provided to the ICF and the County Board.
- i. When an agency provider, excluding a developmental center or an ICF, conducts an internal review of an incident for which an MUI has been filed, the agency shall submit the results of its internal review of the incident, including statements and documents, to SCBDD within fourteen calendar days of the agency provider becoming aware of the incident.
- j. All employees of entities within the developmental disabilities system shall cooperate with administrative investigations conducted by entities authorized to conduct investigations. Providers and County Board staff shall respond to requests for information within the timeframe requested. The timeframes identified shall be reasonable.
- k. The IA shall complete a report of the administrative investigation and submit it for closure in the ITS within thirty working days unless DODD grants an extension. The County Board may request an extension for good cause. If an extension is granted, DODD may require submission of interim reports and may identify alternative actions to assist with the timely conclusion of the report.
- l. Investigation reports shall follow the format prescribed by DODD. The report shall include documentation of the initial allegation, a list of persons

Stark County Board of Developmental Disabilities

Policy 2.12 Incidents Adversely Affecting Health and Safety	Effective: 10/27/16
Chapter 2: Agency Administration	Page 14 of 21

interviewed, documents reviewed, a summary of each interview and document reviewed, and a findings and conclusions section, which shall include the cause and contributing factors to the incident and the facts that support the findings and conclusions.

6. Department-Directed Administrative Investigations
 - a. The department shall conduct the administrative investigation when the MUI includes an allegation against any of the following:
 - 1) The superintendent of a County Board or developmental center
 - 2) A management employee who reports directly to the Superintendent of the County Board
 - 3) An IA
 - 4) An SSA
 - 5) An MUI contact or designee employed by a County Board
 - 6) A current member of a County Board
 - 7) A person having any known relationship with any of the aforementioned persons when such relationship may present a conflict of interest or the appearance of a conflict of interest
 - 8) An employee of a County Board when it is alleged that the employee is responsible for an individual's death, has committed sexual abuse, engaged in prohibited sexual activity, or committed physical abuse or neglect resulting in emergency room treatment or hospitalization.
 - b. A department-directed administrative investigation or administrative investigation review may be conducted following the receipt of a request from the County Board if DODD determines that there is a reasonable basis for the request.
 - c. DODD may conduct a review or administrative investigation of any MUI or may request that a review or administrative investigation be conducted by another County Board, a regional council of governments, or any other governmental entity authorized to conduct an investigation.
7. Written Summaries
 - a. No later than five working days following recommendation by SCBDD or DODD via the ITS that the report be closed, the County Board will provide a written summary of the administrative investigation of each Category A or Category B

Stark County Board of Developmental Disabilities

Policy 2.12 Incidents Adversely Affecting Health and Safety	Effective: 10/27/16
Chapter 2: Agency Administration	Page 15 of 21

MUI. Such summary will include the allegations; the facts and findings, including (as applicable) whether the case was substantiated or unsubstantiated; and preventive measures implemented in response to the incident. The summary will be distributed to the following, unless the information in the written summary has already been communicated.

- 1) The individual, individual's guardian, or individual's chosen representative
 - 2) In the case of a peer-to-peer act, both individuals and their guardians
 - 3) The licensed or certified provider at the time of the incident
 - 4) The individual's SSA
 - 5) Any other person selected by the individual to coordinate services for the individual and the support broker, as applicable.
- b. In the case of an individual's death, the written summary shall be provided to the individual's family only upon request by the individual's family.
- c. The written summary shall not be provided to the PPI, the spouse of the PPI, or the significant other of the PPI.
- d. No later than five working days following the closure of a case, SCBDD shall make a reasonable attempt to notify the PPI as to whether the MUI has been substantiated, unsubstantiated due to insufficient evidence, or unsubstantiated as unfounded.
- e. If an SSA is not assigned, a County Board designee shall be responsible for ensuring the preventive measures are implemented based upon the written summary.
8. Disputed Findings
- a. An individual, individual's guardian, individual's chosen representative or other person whom the individual has identified, or provider may dispute the findings by submitting a letter of dispute and supporting documentation to the SCBDD Superintendent, or to the Director of DODD, if DODD conducted the administrative investigation. Such letter must be submitted within fifteen calendar days following receipt of the finding. An individual may receive assistance from any person selected by the individual to prepare a letter and provide supporting documentation.

Stark County Board of Developmental Disabilities

Policy 2.12 Incidents Adversely Affecting Health and Safety	Effective: 10/27/16
Chapter 2: Agency Administration	Page 16 of 21

- b. The County Board Superintendent or designee or the DODD Director or designee, as applicable, shall consider the letter of dispute, the supporting documentation, and any other relevant information and issue a determination within thirty calendar days of such submission and take action consistent with such determination, including confirming or modifying the findings or directing that more information be gathered and the findings be reconsidered.
 - c. In cases where the letter of dispute has been filed with the County Board, the disputant may dispute the final findings made by the County Board by filing those findings and any documentation contesting such findings as are disputed with the Director of DODD within fifteen calendar days of the County Board determination. The Director will issue a decision within thirty calendar days.
9. Review, prevention, and closure of MUIs
- a. SCBDD and agency providers shall implement a written procedure for the internal review of all MUIs and shall be responsible for taking all reasonable steps necessary to prevent the reoccurrence of MUIs.
 - b. The individual's team, including the County Board and provider, will collaborate on the development of preventive measures to address the causes and contributing factors to the incident. The team members shall jointly determine what constitutes reasonable steps necessary to prevent the reoccurrence of MUIs. If the individual does not have an SSA, individual team, Qualified Intellectual Disability Professional, or agency provider, a County Board designee will ensure that preventive measures as are reasonably possible are fully implemented.
 - c. The department shall review and close reports regarding the following types of MUIs:
 - 1) Accidental or Suspicious Death
 - 2) Exploitation
 - 3) Failure to Report
 - 4) Misappropriation
 - 5) Missing Individual
 - 6) Neglect
 - 7) Peer-to-Peer Act
 - 8) Physical Abuse

Stark County Board of Developmental Disabilities

Policy 2.12 Incidents Adversely Affecting Health and Safety	Effective: 10/27/16
Chapter 2: Agency Administration	Page 17 of 21

- 9) Prohibited Sexual Relations
 - 10) Rights Code Violation
 - 11) Sexual Abuse
 - 12) Significant Injury-Unknown Cause
 - 13) Unapproved Behavior Support
 - 14) Verbal Abuse
 - 15) Any MUI that is the subject of a Director's Alert
 - 16) Any MUI investigated by DODD
- d. The County Board shall review and close reports regarding the following types of MUIs:
- 1) Attempted Suicide
 - 2) Death (other than an accidental or suspicious death)
 - 3) Law Enforcement
 - 4) Medical Emergency
 - 5) Significant Injury-Known Cause
 - 6) Unscheduled Hospitalization
- e. DODD may review any case to ensure it has been properly closed and shall conduct sample reviews to ensure proper closure by the County Board. DODD may reopen any administrative investigation that does not meet the requirements of OAC. SCBDD will provide any information deemed necessary by DODD to close a case.
10. Analysis of MUI Trends and Patterns
- a. All providers, including SCBDD as a provider, shall send semi-annual and annual reports regarding MUI trends and patterns to SCBDD's Investigative Services Unit. The County Board will semi-annually review all providers for MUI trends and patterns. The semi-annual review will be cumulative for the first two quarters and include an in-depth analysis. The annual review will be cumulative for all four quarters and include an in-depth analysis.
 - b. All reviews and analyses will be completed within thirty calendar days following the end of the six-month period. The semi-annual and annual analyses shall contain the following elements:
 - 1) Date of review
 - 2) Name of person completing review

Stark County Board of Developmental Disabilities

Policy 2.12 Incidents Adversely Affecting Health and Safety	Effective: 10/27/16
Chapter 2: Agency Administration	Page 18 of 21

- 3) Time period of review
 - 4) Comparison of data for previous three years
 - 5) Explanation of data
 - 6) Data for review by MUI category type
 - 7) Specific individuals involved in established trends and patterns (i.e., five MUIs of any kind within six months, ten MUIs of any kind within a year, or other pattern identified by the individual's team)
 - 8) Specific trends by residence, region, or program
 - 9) Previously identified trends and patterns
 - 10) Action plans and preventive measures to address noted trends and patterns
- c. SCBDD will conduct the analysis and oversee follow-up actions for all entities operated by the County Boards; i.e., workshops, schools, and transportation. The County Board will send its analysis and follow-up actions to the department by August thirty-first for the semi-annual review and by February twenty-eighth for the annual review.
- d. Each agency provider shall complete and send its analysis and follow-up actions to the County Board for all programs it operates in the county by August thirty-first for the semi-annual review and by February twenty-eighth for the annual review. The County Board shall review the analyses to ensure that all issues have been reasonably addressed to prevent reoccurrence. The county board will keep the analyses and follow-up actions on file and make them available to DODD upon request.
- e. The County Board and DODD will review the analyses to ensure that all issues have been reasonably addressed to prevent reoccurrence.
- f. The County Board will ensure that trends and patterns of MUIs are included and addressed in the affected individuals' service plans.
- g. The County Board will have a committee that reviews trends and patterns of MUIs. The committee shall be made up of a reasonable representation of the County Board, providers, families, and other stakeholders deemed appropriate by the committee. The role of the committee will be to review and share the county's aggregate data to identify trends, patterns, or areas for improving the quality of life for individuals supported in the county. The committee will meet

Stark County Board of Developmental Disabilities

Policy 2.12 Incidents Adversely Affecting Health and Safety	Effective: 10/27/16
Chapter 2: Agency Administration	Page 19 of 21

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.

- h. The County Board will send the aggregate data prepared for the meeting to all participants ten calendar days in advance of the meeting.
- i. The County Board will 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.
- j. The County Board will ensure follow-up actions identified by the committee have been implemented.

11. Unusual Incidents

- a. UIs shall be reported and investigated by the provider of service.
- b. Each agency provider shall develop and implement a policy and procedure that:
 - 1) Identifies what is to be reported as a UI, which shall clarify how UIs are defined by OAC
 - 2) Requires anyone who becomes aware of a UI to report it to the person designated by the provider who can initiate proper action
 - 3) Requires the report to be made no later than twenty-four hours after the occurrence of the UI
 - 4) Requires the provider to investigate UIs, identify the cause and contributing factors when applicable, and develop preventive measures to protect the health, safety and welfare of any at-risk individuals
- c. The agency provider shall ensure that all staff are trained and knowledgeable regarding its policy and procedure
- d. If a UI occurs at a site operated by SCBDD, 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 chosen representative or other person whom the individual has identified, as applicable, at the individual's residence. The notification shall be made the same day that the incident is discovered. Independent providers shall complete an incident report, notify the

Stark County Board of Developmental Disabilities

Policy 2.12 Incidents Adversely Affecting Health and Safety	Effective: 10/27/16
Chapter 2: Agency Administration	Page 20 of 21

- individual's guardian or chosen representative or other person whom the individual has identified, as applicable, and forward the incident report to the SSA or County Board designee on the day a UI is discovered.
- e. Each agency provider and independent provider shall review all UIs as necessary, but no less than monthly, to ensure appropriate preventive measures have been implemented and trends and patterns have been identified and addressed as appropriate. The UI reports, documentation of identified trends and patterns, and documentation of corrective actions shall be made available to SCBDD and DODD upon request.
 - f. Each agency provider and independent provider shall maintain a log of all UIs. The log shall include, but not be limited to:
 - 1) The name of the individual
 - 2) A brief description of the incident
 - 3) A description of any injuries
 - 4) The date and time the incident occurred
 - 5) The location at which the incident occurred
 - 6) Preventive measures that were implemented
 - g. The agency provider and the County Board shall ensure that trends and patterns of UIs are included and addressed in each individual's service plan.
12. Oversight
- a. SCBDD will 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 MUIs have been reported, preventive measures have been developed, and that trends and patterns have been identified and addressed. The sample will be made available to DODD for review upon request.
 - b. When the SCBDD is a provider of services, DODD shall review, on a monthly basis, a representative sample of County Board logs to ensure that MUIs have been reported and that trends and patterns have been identified and addressed. The County Board will submit the specified logs to DODD upon request.

Stark County Board of Developmental Disabilities

Policy 2.12 Incidents Adversely Affecting Health and Safety	Effective: 10/27/16
Chapter 2: Agency Administration	Page 21 of 21

13. Access to Records

- a. Reports made under section 5123.61 of ORC are not public records as defined in section 149.43 of ORC. Records may be provided to parties authorized to receive them in accordance with sections 5123.613 and 5126.044 of the ORC, to any governmental entity authorized to investigate the circumstances of alleged abuse or neglect, misappropriation, or exploitation and to any party to the extent that release of a record is necessary to ensure the health, safety or welfare of an individual.
- b. SCBDD will not review, copy, or include in any report required by OAC a provider's personnel records of an employee that are confidential under state or federal statutes or rules, including medical and insurance records, workers compensation records, employment eligibility verification (I-9) forms, and social security numbers. The provider should redact any confidential information contained in a record before copies are provided to the County Board. A provider shall make all other records available upon request by the County Board or DODD.
- c. SCBDD may review and copy personnel records prepared in connection with a provider's daily operations, such as training records, timesheets, and work schedules. The provider may redact any confidential information contained in a record before the copies are provided to the County Board.

14. Training

- a. SCBDD will ensure that staff employed in direct services positions are trained on the requirements of incident management prior to direct contact with any individual. Thereafter, all staff employed in direct services positions will receive annual training on these requirements including a review of Health and Safety Alerts issued by DODD since the previous year's training.
- b. SCBDD shall ensure staff employed in positions other than direct services positions are trained on the requirements of incident management no later than ninety days from the date of hire. Thereafter, staff employed in positions other than direct services positions will receive annual training on these requirements including a review of Health and Safety Alerts issued by DODD since the previous year's training.