

**"AT A GLANCE"**  
**Agency Provider Responsibilities with MUIs**

From Rule	Requirement
<b>(D)(4) Reporting Requirements</b>	Take all reasonable measures necessary to protect the health and safety of any at-risk individuals. 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 and safety of at-risk individuals, the department shall make the determination.
<b>(D)(6)</b>	Immediately, but no later than 4 hours after discovery of the incident, notify the county board through means identified by the county board for the incidents or allegations as listed in (D)(6)(a)-(i) of the rule.
<b>(D)(7)</b>	For all major unusual incidents, all providers shall submit a written incident report to the county board contact or designee no later than three p.m. the next working day following initial knowledge of a potential or determined major unusual incident. The report shall be submitted in a format prescribed by the department. CLARIFICATION: If the county board receives notification of an MUI through their on call system and they know that this meets the definition for a potential MUI then that is their discovery date. If additional information is needed the county board should contact the provider if there is health and welfare concerns or they can gather that information and determine if the incident is an MUI when they receive the UI by 3pm the following day. The county board should never wait past 3pm the following working day. If the provider has not sent in an incident report, the county board should file with the information received from the hotline call.
<b>(E)(2) Alleged Criminal Acts</b>	Immediately report to law enforcement any allegation of exploitation, failure to report, misappropriation, neglect, peer-to-peer act, physical abuse, sexual abuse, or verbal abuse, which may constitute a <i>criminal act</i> .
<b>(F) Abused or Neglected Children</b>	Immediately report to law enforcement any allegation of exploitation, failure to report, misappropriation, neglect, peer-to-peer act, physical abuse, sexual abuse, or verbal abuse, which may constitute a <i>criminal act</i> .
<b>(G)(1) Notification Requirements</b>	Make notifications to the individuals as identified in (G)( 1)(a)-(d) of the rule, 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. <b>See (G) (2)-(6) for additional information on this process.</b>
<b>(H)(1) General Investigation Requirements</b>	Investigations shall be conducted by investigative agents certified under rule 5123:2-5-07 of the Administrative Code.
<b>(H)(5)</b>	Except when LE/CSB is conducting the investigation, the IA shall conduct all interviews for MUIs unless the investigator determines the need for assistance with interviewing an individual. The IA may utilize interviews conducted by an ICF/DD or conduct his/her own interviews.
<b>(H)(6)</b>	An intermediate care facility shall conduct an investigation that complies with applicable federal regulations, including 42 C.F.R. 483.420 (October 1, 2012), for any unusual incident or major unusual incident involving a resident of the intermediate care facility, regardless of where the unusual incident or major unusual incident occurs. The intermediate care facility shall provide a copy of its full report of an administrative investigation of a major unusual incident to the county board. The investigative agent may utilize information from the intermediate care facility's administrative investigation to meet the requirements of this rule or conduct a separate administrative investigation. The county board shall provide a copy of its full report of the administrative investigation to the intermediate care facility. The department shall resolve any conflicts that arise.
<b>(H)(7)</b>	When an agency provider, excluding an intermediate care facility, conducts an internal review of an incident for which a major unusual incident has been filed, the agency provider shall submit the results of its internal review of the incident, including statements and documents, to the county board within fourteen calendar days of the agency provider becoming aware of the incident.
<b>(H)(8)</b>	All DD employees shall cooperate with administrative investigations conducted by entities authorized to conduct investigations and respond to requests for information within the timeframe requested. The timeframes identified shall be reasonable.

<b>(K)(1) Review, Prevention &amp; Closure of MUIs</b>	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>(K)(2)</b>	The individual's team, including the agency provider, shall collaborate on the development of preventative measures to address the causes and contributing factors to the incident.
<b>(L)(1) Analysis of MUI Trends &amp; Patterns</b>	Analyze MUIs to identify trends and patterns semi-annually (for time period of Jan-June 30) and annually (Jan-Dec 31) for with the annual review being comprehensive for the year.
<b>(L)(3)</b>	Send its analysis and follow-up actions to the county board for all programs operated in the county by August 31 for the semi-annual review and by February 28 for the annual review.
<b>(M) UI Requirements</b>	Develop and implement a policy and procedure as identified in (M)(2)(a)-(d) of the rule.
<b>(M)(3)</b>	Ensure all staff are trained and knowledgeable regarding the policy and procedure.
<b>(M)(6)</b>	Review all UIs as necessary, but no less than monthly, to ensure appropriate preventative measures have been implemented and trends and patterns identified and
<b>(M)(8)</b>	Maintain a log of all UIs. The log shall include, but not be limited to, the name of the individual, a brief description of the incident, any injuries, time, date, location and
<b>(M)(9)</b>	Ensure trends and patterns of UIs are included and addressed in each individual's service plan.
<b>(O)(2) Access to Records</b>	Provide to the department, upon request, copies of personnel records that are not confidential. <b>See (O) (1)-(7) for additional information on this process.</b>
<b>(P)(1) Training</b>	Ensure staff are trained on the requirements of the rule regarding the identification and reporting of MUIs and UIs prior to unsupervised contact with any individual and in all cases. Thereafter, all employees shall receive training during each calendar year which shall include a review of health and safety alerts released since the previous calendar year's training.
<b>(P)(2)</b>	Ensure all staff responsible for administrative compliance with this rule receives training on all applicable requirements of this rule at the time of employment or no later than 90 calendar days from the time of employment and each calendar year thereafter. The training shall include the review of health and safety alerts released since the