MUI Rule DODD Workgroup

Update from 6/27/17:

Recommendations:

1. NEGLECT
2. Revise definition of Neglect (Category A)---Adding intentional and actual harm component
3. Add category such as Inattention to program services outlined in individual’s service plan (treated as a UI unless during course of provider internal review, it raises to level of Neglect above)
4. All neglect allegations (unless obvious intention and harm) will be initially investigated as #2-if once investigation reveals should be A, will change category, etc…
5. Guidance document to be released to outline examples of each and FAQs
6. LAW ENFORCEMENT NOTIFICATIONS
7. Must meet criminal act to report
8. Need to address allegation of abuse (call immediately)
9. Neglect, exploitation, failure to report, peer to peer, misappropriation (called when investigation shows that it’s considered a criminal act, therefore---does not have to be immediate upon allegation)
10. FILING MULTIPLE MUIs ON SAME INCIDENT (OR FILING IN DIFFERENT LOCATIONS FOR SAME INCIDENT)
11. Look at event based reporting (ie: incident reported, investigation opened initially based on category A-B-C, category can be changed during course of investigation)
12. One investigation packet with one prevention plan (cause contributing factors, actions, etc…) even if multiple locations, multiple categories, etc…
13. Not selecting “Category” also removes some of the stigma for staff, individuals, families, etc.. (ie: instead of you are being investigated for Neglect---there is a situation that I am looking into---) Also helps county, provider admin time/burden.
14. REFERENCE TRAUMA INFORMED CARE APPROACH
15. All IA’s, providers, law enforcement are engaging in this TIC training/culture….would like to place in the MUI rule for how things are to be approached considering individual and staff trauma informed culture. Global view of underlying causes and contributing factors—true team approach.
16. Requirement for IA’s to complete TIC training
17. PEER TO PEER
18. UNSCHEDULED HOSPITAL
19. PREVENTION OF ABUSE (proactive approaches)
20. QUESTIONS-MUI RIGHTS RESTRICTIONS, ISSUES