

## 2023 MUI Stakeholder Committee Meeting

## Monday, July 10, 2023, 1:00 pm to 2:15 pm

**Attendees:** Matt Klink, Wayne Hershey, Billie Jo David, Drew Williams, Gary Vierstra, Michele Marten, Jessica Nottingham, Mary Grzegorek, Tony Britt, Yvette Diaz (virtually), Dawn George (virtually), Heather Campbell-Wilson (virtually), Janet Barstow (virtually), Dawn Miller

- 1. Attendees went through and did introductions
- 2. Matt Klink began presentation. Role of committee is to review and share the data prepared by the county board to identify the trends and patterns. Number of MUIs increased greatly in 2022 to 14,119.

Category A MUIs

Accidental or suspicious death

Alleged Abuse – Physical – steady increase in filed but substantiated stayed relatively the same. We need to look at why we have so many unsubstantiated (Hershey), do we need more description.

Alleged Abuse – Sexual – out of 17 filed, only 1 substantiated.

Alleged Abuse – Verbal – we are seeing a consistent rise

Alleged Neglect – Shot up last year. Substantiation rate was pretty low. Last year saw a significant increase in people sleeping on shift and abandoning shift. Exploitation – 60 to 80% substantiation in the past couple of years Failure to Report –

Misappropriation – Is continuing to rise year after year, substantiation rate doesn't reflect the reports made

**Prohibited Sexual Relations** 

Rights Code Violation – we don't see a lot in this category but when we do, we substantiate nearly 100% of them

Category B MUIs

Attempted Suicide – physical attempt at suicide which results in either ER treatment, inpatient observation or admission, pretty consistent in this category – 28 each of the last two years.

18 different unique individuals and 5 of those individuals counted for just over 50% of the overall total.

82% of all these incidents resulted in specific hospitalization as opposed to just ER treatment or inpatient observation.

48% of individuals that had an attempted suicide MUI last year had a prior one in either the last year or in the years past, 16 of 18 individuals had a prior mental health diagnosis.

Medical Emergency – choking relief is always predominant reason

Non-Accidental/Non-Suspicious Death – this has stayed relatively stable over the last few years with our aging population

Missing Individual – stayed fairly consistent other than 2021, in 2022, 9 individuals had 2 or more missing individual incidents and similar to attempted suicide. 5 individuals accounted for roughly half the overall total in this category.

Peer to Peer Acts – significant increase in the past few years, location tends to be the residence followed by the day program

Significant Injury – remained consistent over the last few years, around 75 to 80, falls are the predominant reason for significant injuries, location being the residence followed by day program,

Matt asked if there were any questions. Comment: Teams that are more proactive at identifying falls as new emerging issue and addressing it can prevent it becoming a fracture and ways to support the individual

## Category C MUIs

Law Enforcement - steady decline over the last 3 years, expecting higher number this year

Unapproved Behavioral Support – sharp increase year last year, physical interventions continue to account for vast majority

Unanticipated Hospitalization – largest category by volume that we do and that is done across the state 85 of the 400 were admissions due to psychiatry reasons

Matt asked for any questions. There were none.

How Summit County Compares to Statewide Trends:

Significant Injury MUIs decreased 3% statewide but decrease of 3.75% in Summit County.

Attempted Suicide MUIs increased 21% statewide, no change Summit County.

Unanticipated Hospitalizations remain most filed MUI category. Ohio saw 5% increase, 10% increase in Summit County.

Unapproved Behavioral Support MUIs decreased 1% statewide, 52.5% increase in Summit County.

Law Enforcement MUIs increased 17% statewide, 26.8% decrease in Summit County.

Matt went over rankings in Summit County.

**Discussion Items:** 

• How can we better aid DSPs to follow supervision supports outlines in the ISP?

Supervision neglect do more than a read and sign, providers take a look at processes.

Change over with supervisors, make sure updated information is in the home, more cooperation between providers and SSAs, staffing crisis

• The number of Significant Injuries due to falls has remained consistent in the lower to mid forties each of the last three years. How can we make an impact in this area to decrease falls?

Matt: We did talk about this year but needs mentioning again.

Ardmore – looking at as an agency, staffing problems, people are not moving as much as they were, partnering with Area Agency on Agency – playing Bingo that incorporates movement, trying to work with Akron U exercise management program,

history of falls – new staff notified of trends, assisting with clothing/footwear to fit properly, survey environment

• Available staffing has continued to be cited as an issue impacting MUIs overall. Is this improving, getting worse or staying the same? How has your agency addressed this issue?

Empowering People – ebbs and flows; people quit, stop showing up; constantly trying to fill coverage, HR is trying to hire more, CEO has gone to Columbus and ask for more money for staff

Blick Clinic – day program coverage good, residential staffing is an issue, hiring home managers

You can get a job working in hospitals taking vitals and get paid much more and work 3 shifts and be done, instead of being a DSP

Ardmore - PRN relief staff (50 people) – will pick up a shift when needed

Matt gave his contact information and the information for MUI.