

MUI Analysis

Agency / Provider:

Date of Review:

Analysis was conducted by:

, (Title)
 , (Title)
 , (Title)

1) Comparison of total MUI's for Agency Operated Programs in the year's ____, ____, & ____ :

Review of Numbers for 1st Qtr.- 2nd Qtr.- Semi Annual 3rd Qtr.- 4th Qtr.- Annual

# of Individuals Served	# of MUI's

Review of Numbers for 1st Qtr.- 2nd Qtr.- Semi Annual 3rd Qtr.- 4th Qtr.- Annual

# of Individuals Served	# of MUI's

Review of Numbers for 1st Qtr.- 2nd Qtr.- Semi Annual 3rd Qtr.- 4th Qtr.- Annual

# of Individuals Served	# of MUI's

EXPLANATION OF DATA (Explain why there was a fluctuation in #'s served, and what may have contributed to the fluctuation in # of MUI's):

Comparison of (qtr/semi/annual) **MUI's categorically for Agency**
operated programs for the year's , , :

Category Breakdown First Qtr:

MUI TYPE	(year) TOTAL	(year) TOTAL	(year) TOTAL
Physical Abuse			
Sexual Abuse			
Verbal Abuse			

Attempted Suicide			
Death			
Exploitation			
Failure to Report			
Known Injury			
Law Enforcement			
Medical Emergency			
Misappropriation			
Missing Individual			
Neglect			
Peer-to-Peer			
Prohibited Sexual Relations			
Rights Code Violation			
Unapproved Behavior Support			
Unknown Injury			
Unscheduled Hospitalization			
TOTAL			

Review and compare the data (increases and decreases in categories) from year-to-year to identify trends/patterns that may be occurring.

- Include causes and contributing factors as to why these trends are occurring

EXPLANATION OF DATA:

SUBSTANTIATED MUI'S:

TYPE OF MUI	# SUBSTANTIATED (Qtr/Year)	# SUBSTANTIATED (Qtr/Year)	# SUBSTANTIATED (Qtr/Year)
(Select from drop-down menu)	(#)	(#)	(#)
(Select from drop-down menu)	(#)	(#)	(#)
(Select from drop-down menu)	(#)	(#)	(#)
(Select from drop-down menu)	(#)	(#)	(#)
(Select from drop-down menu)	(#)	(#)	(#)
(Select from drop-down menu)	(#)	(#)	(#)

(Select from drop-down menu)	(#)	(#)	(#)
(Select from drop-down menu)	(#)	(#)	(#)
(Select from drop-down menu)	(#)	(#)	(#)
TOTAL Substantiations			

Identify any trends or patterns within the timeframe you are reviewing. Identify and causes & contributing factors, and evidence discovered which substantiated the allegation. Are there similar MUI's that were substantiated? What were the similarities? What were the action plans to address this?

EXPLANATION OF DATA:

Number of PPI's Involved for the year/qtr. :

TYPE OF MUI	PPI	TOTAL
(Select from drop-down menu)	(Select from drop-down menu)	
(Select from drop-down menu)	(Select from drop-down menu)	
(Select from drop-down menu)	(Select from drop-down menu)	
(Select from drop-down menu)	(Select from drop-down menu)	
(Select from drop-down menu)	(Select from drop-down menu)	
(Select from drop-down menu)	(Select from drop-down menu)	
(Select from drop-down menu)	(Select from drop-down menu)	
(Select from drop-down menu)	(Select from drop-down menu)	
(Select from drop-down menu)	(Select from drop-down menu)	

Identify any trends or patterns involving the same PPI. If PPI is a staff person, was their training current at time of MUI? Did the PPI remain employed or were they let go? What PLAN was implemented to ensure safety of individuals (e.g. PPI suspended, PPI re-trained, PPI on probation, Increased supervision, etc...).

EXPLANATION OF DATA:

7.) Trends/Patterns noted for (Qtr. or year). Discuss causes & contributing factors, whether specific to individual(s) or systemic issue, how many incidents over specific time span, intervention methods tried, etc...:

8.) ACTION PLANS (Prevention Plans / Care Plans) developed to address the trend(s)/pattern(s) identified.

9.) Previously identified trends and action plans for . Were plans implemented? Were the plans successful?

(Brief Summary)