FINAL

	Ohio Department of Mental Retardation and Developmental Disabilities Division of Information Systems ODMR/DD INCIDENT REPORT (ITS)									
IncidentNum 2003-009-0277	GroupName Facility BUTL ALEXSON SERVICES/FAIRFIELD									
SSN	DOB		lientNum	ClientN			Gender			
					LAUREN		F			
Address1				City		State	ZipCode			
350 KOLB DRI	VĖ				RFIELD	OH	45014			
Final Due Date		cidentDa	e Inciden	tTime	DiscoveryD	ate DiscoveryTin	ne <u>CreatedDate</u>			
12/10/200		0/18/2003			10/27/200		10/28/2003			
Incident		<u></u>	-							
Category	}									
Injury - Acciden	t-0-0-0									
Incident										
Location							· · · · · · · · · · · · · · · · · · ·			
Non-County Op	erated Program	ı - Resider	ice - ICF/MF	<u> </u>						
Notifications						· 				
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Provider Agency Legal Guardian Family - Oct 18 SSA - Oct 27 20	- Oct 18 2003 2003		edDate	•		WasSubstantiated	Last Change By Cynthia S Brown			

Incident: 2003-009-0277 | Page 1 of 2 | Printed: 11/21/2003 12:37:36 PM



Statement:

The OIR was notified on 10/27/03 that Lauren had received 18 stitches to her left hand/fingers, after getting her hand caught in a door on 10/18/03. The OIR is attempting to find out why we were not notified on this. The OIR "accidently" found out about this incident while investigating another one at Fairfield Center. Patrick Campbell is checking to see why an Incident Report was not filed, or if one was, who they sent it to. Joan and I never received anything and Jimmie is out for several weeks. Lauren's stitches were a result of her getting her hand caught in a door (details are forthcoming, once Patrick locates the Incident Report). Nurse's notes, however, state that Lauren had profuse bleeding on left hand ring finger, and a laceration noted on top 1/3rd of finger front and back. Also, notes that Lauren was transported to Mercy Hospital ER. The OIR will update the State upon receipt of additional information regarding Lauren's stitces. <Cynthia S Brown Added on 10/28/2003>

Statement:

According to Patrick Campbell, Fairfield Center, no one at Fairfield Center is taking the responsibility for not filing this in a timely fashion. The OIR is setting up, yet another training on the importance of reporting and reporting in a timely fashion! The OIR is a timely fashion and injury appears to be healing and has suffered no ill effects resulting from the injury. The OIR is requesting that this case be closed. <Cynthia S Brown Added on 11/21/2003>

Immediate Action:

Lauren was taken to the nurse's station, then transported to Mercy South Hospital. <Cynthia S Brown Added on 10/28/2003>

Prevention Plan:

will be closely monitored regarding her movements, hopefully alleviating any further problems. Fairfield Center will receive, yet another training regarding reporting and reporting on a timely fashion! <Cynthia S Brown Added on 11/21/2003>

Incident: 2003-009-0277 | Page 2 of 2 | Printed: 11/21/2003 12:37:36 PM

SUMMARY COMPLETED BY INVESTIGATIVE AGENT FOR THEIR INVESTIGATION FILE

A) Allegation

On 10/27/03, this IA was informed, inadvertently, by a witness in another incident at Fairfield Center, that Lauren had accidently caught her left hand in a door, resulting in her receiving a total of eighteen stitches to her left hand/fingers.

Statement/Interview/Documentation Review

Interviews

Patrick Campbell/Program Support Manager Betty Black/LPN/Fairfield Center Rachel Buczek/Staff/Fairfield Center

Documents Reviewed

MUI Report 2003-009-0277 Nursing Notes Witness Interview/Rachel Buczek/Staff

C) Findings of Investigation

This IA initiated the investigation on 10/27/03, after being notified by a witness, Rachel Buczek, in another incident at Fairfield Center, that Lauren had caught her hand in a door on 10/18/03, requiring eighteen stitches to her left hand/fingers. This IA has been unable to determine who was responsible for getting the Incident Report to us, however, this IA has stressed to Patrick Campbell how important it is to report and to report in a timely fashion. There was documentation, however, in the nursing notes as to Lauren's injuries and transportation to the hospital for treatment.

Lauren's injury appears to be healing well, and there seems to be no known long-term effects from this injury.

D) Conclusions

It is the conclusion of this IA, that Lauren received eighteen stitches in her left hand/fingers due to getting her hand caught in a door at Fairfield Center.

The case disposition is based upon the following findings:

- 1. This IA's interviews with those individuals listed above.
- 2. Incident Report.
- 3. Nursing notes regarding Lauren's injury.

Investigative Agent

Date

Cynthia Brown

From: Subject: ITS.Support@odmrdd.state.oh.us Case Closed - Incident 2003-009-0277

Automated Notification of Case Closure: 2003-009-0277

Client: Client Number: Incident Date: 10/18/2003

Current Date: 11/24/2003 9:18:17 AM

Closed Date: 11/24/2003

Updated By: Amy K Koprivnikar

1/24/03 Patrick Creed

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BUTLER COUNTY BOARD OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES MAJOR UNUSUAL INCIDENT SYNOPSIS REPORT

TO:

Patrick Campbell

FROM:

Cynthia Brown

DATE OF INCIDENT: 10/18/03

CLIENT NAME: Laurer

LOCATION OF INCIDENT: Fairfield Center

DESCRIPTION OF INCIDENT: The OIR was notified on 10/27/03 that Lauren had received eighteen stitches to her left hand/fingers, after getting her hand caught in a door.

SYNOPSIS OF THE INCIDENT:

The OIR was informed on 10/27/03, while investigating another incident at Fairfield Center, that Lauren had gotten her hand caught in a door on 10/18/03, resulting in eighteen stitches to her left hand/fingers. Lauren was taken to the nurses station, where the nurse noted profuse bleeding on the left hand ring finger, and a laceration noted on the top 1/3rd of finger front and back. Lauren was then transported to Mercy South ER, where she received the eighteen stitches.

The OIR would never have known about this incident, had they not been investigating another incident on 10/27/03 at Fairfield Center. The OIR stressed how important it was that MUI's not only get reported, but reported in a timely fashion. No one person had assumed responsibility for not reporting this incident. If necessary, the OIR will once again provide additional training on reporting MUI's to all staff of Fairfield Center.

hand/fingers appear to be healing well and there seem to be no known long-term effects from this injury.

Please note that the individual, advocate selected by the individual, OR the legal guardian, as applicable, and the provider may submit written comments to the County Board regarding the investigation's conclusion and any preventative measures implemented in response to the incident. Please send comments to the attention of the OIR by 11/20/03 at 441 Patterson Drive Fairfield OH 45014.

SIGNED: SIGNED: 11/12/03

Cc: Sharon Frederick

File

NOW

	Ohio Department of Mental Retardation and Developmental Disabilities Division of Information Systems ODMR/DD INCIDENT REPORT (ITS)									S		
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SSA - Oct 27 2003												

Incident: 2003-009-0277 | Page 1 of 2 | Printed: 10/28/2003 4:30:19 PM

Statement:

The OIR was notified on 10/27/03 that Lauren had received 18 stitches to her left hand/fingers, after getting her hand caught in a door on 10/18/03. The OIR is attempting to find out why we were not notified on this. The OIR "accidently" found out about this incident while investigating another one at Fairfield Center. Patrick Campbell is checking to see why an Incident Report was not filed, or if one was, who they sent it to. Joan and I never received anything and Jimmie is out for several weeks. Lauren's stitches were a result of her getting her hand caught in a door (details are forthcoming, once Patrick locates the Incident Report). Nurse's notes, however, state that Lauren had profuse bleeding on left hand ring finger, and a laceration noted on top 1/3rd of finger front and back. Also, notes that Lauren was transported to Mercy Hospital ER. The OIR will update the State upon receipt of additional information regarding Lauren's stitces. <Cynthia S Brown Added on 10/28/2003>

Immediate Action:

Lauren was taken to the nurse's station, then transported to Mercy South Hospital. <Cynthia S Brown Added on 10/28/2003>

Incident: 2003-009-0277 | Page 2 of 2 | Printed: 10/28/2003 4:30:19 PM

[®]Joan O'Hair

From: Patrick Campbell [pcampbell@magcorp.com]

Sent: Tuesday, October 28, 2003 9:50 AM

To: Joan O'Hair

Subject: Laurer

Hello

Checked into Lauren's finger and...... 18 stitches....

10-18-03 Has profuse bleeding on left hand ring finger. laceration noted on top 1/3rd of finger front and back. Staff report resident caught her finger in the door.

Nursing notes all parties notified on 10-18-03... I have not found the incident report yet.

QMRP made Lauren 1:1 visual range until door can be altered.

I'm faxing nursing notes

Patrick

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Center		
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TO: Joan	FROM: Patare	H
COMPANY:	DATE:	
FAX NUMBER:	TOTAL NO. OF PAGE	35:
RE Lauren		
DURGENT GFOR REVIEW OPLEASE C	OMMRNY D PLEASE REPLY	CONFIDENTIAL
NOTES/COMMENTS:		-
12- 5+: +cl	ces	

FAIRFIELD CENTER, INC. 350 KOLB DRIVE, FAIRFIELD, OHIO 45014 PHONE (513) 874-0423, FAX (513) 874-0598

NURSE'S NOTES

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NURSE'S NOTES

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-164 (6) 14 50300 (800) 247-2242 PANGEL 14 7 84

Team Code: QA Sort Code:

Reviewed By: ____

School Dist(4): 0902 Review Date(5): 092303 Site(3): 05 LAUREN Number (6): Name (7) : SSN(8): (Date of Date of Medicaid Birth(11): Death (12): Gender(10): F Number (9): Race(13): 3 Religion(14): 5 Current Liv Arr(15): 4 1 Liv in Home/Own or Lease 4 Licensed Fac 1 Protestant 1 Indian/Alaskan 2 Asian/Pacific 2 Catholic 2 Liv with Family 5 Nursing Fac 3 Foster Care Placement 6 Other 3 White 3 Jewish 6 Other 4 Other 4 Black 5 Hispanic 7 Unknown 5 Unknown Residential Fac #(16): 0910027 Licensed Fac Name(17): FAIRFIELD CENTER City(19): FAIRFIELD Address (18): 350 KOLB DR Residence Termination Date(24): County(22): BUTL State(20): OH Zip(21): 45014 Behavior (47): 2 Dev Delay 0-5 Yrs(36): Initial Enrollment 0 No dev delay 1 Current Plan Date (25): 060994 2 No Current Plan 1 One delay Program Enrollment 2 More than one delay Vision(48): 4 Date(26): 012595 0 Under evaluation 1 No vision problem County Board Program (27): At Risk 0-5 Yrs(37): 2 Funct after correction 0 No identifiable risk 01 Early Intervention 3 Visually impaired 1 Environmental/Biological 02 Preschool 2 Established risk 4 Legally Blind 03 School 04 Supported Education 08 Children's Enrichment Hearing (49): 1 0 Under evaluation 10 Adult Assessment 1 No hearing loss 11 Adult Home Services MR Level 6 yrs and up(38): 3 2 Funct after correction 0 None 12 Adult Non-vocational 1 Mild 13 Sheltered Workshop 3 Hearing impaired 14 Workshop/Comm Training 4 Complete loss 2 Moderate 15 Comm Trng/Empl < 10 hrs 16 Comm Employment 10+ hrs 3 Severe 4 Profound Communication (50): 2 O Funct with speech 17 Retirement Ini 8818 Self-directed Supports 1 Funct with other modes Z Blank Current CB Program 2 No funct communication Substantial Functional Limitations (OEDI/COEDI) 6 yrs+ Ambulation(51): 1 Other School Prog(28): 08 0 Walks independently Self Care (39): Y 1 Walks w/device/assist Family Resources (29): N Receptive/Express Lang(40): Y 2 Uses wheelchair Mobility (41): Y Service Coordination(30): 2 Self Direction (42): Y Chronic Med Cond(52): 1 Capacity Indep Liv(43): Y Designated Srv Coord(31): 21 Learning (44): Y Prim Etio Cond(53): 080 Econ Self Sufficiency (45): Other Service Provider (32): (Age 16 and up) Second Etio Cond(54): 081 Court Appted Guard (55): 1 Health Service 0 None Full 2 Limited Provider (33): Age of Onset of Disability Court Append Guard (56): 1 Supported Living if age of onset 18-21(46): 0 None 3 APSI 1 Parent 4 Other Sérvices (34): N 2 Oth Fam Member

Service Coordinator DENTS BEER

			-		
From: Patrick Campbell [pcampbell@magcorp.com] Sent: Monday, November 10, 2003 2:20 PM	3	,			7
To: Cynthia Brown	3		•		1
Subject: Re: Lauren	25.50 - 10.00 (10.00)		₩.		
				*- 4	
Original Message From: Cynthia Brown	-,			1.	
To: 'Patrick Campbell' Sent: Monday, November 10, 2003 1:04 PM Subject: / Lauren	And the second s	· . :.	- 100 - 11 - 11	, ,	
Hey Patrick			4	•	
I need info on the above regarding:			e y	.:	
there anything in writing? was 1/1 on that date, howe several times during his shift. Please update. Thanks! following plan. What is the status of injury (9 st	was disciplined	, Writter	warnir	ig for i	not
What is the status of Lauren's injury (eight any talk of therapy/rehabilitation for Lauren's hand? Please due to the injury but she is receiving therapy to keep hawithout complications is doing well.	update. Currently	she doe	s not n	eed th	erapy
that is the status of injury (five stiftem wheelchair, most likely from seizure as seizure act neurologist. Injury is healed.	iches) from 10/29/03 ivity has increased	3? Plea: I. Nursi:	se upda 1 g is re i	te. Tha ferring	anksi Fa to a ne
What is the status of injury (six sinis seizures been changed? Please update. Thanks! No the seizures are controlled very well under current plan.	itches) from 11/5/03 ley have not/	l? Has∈ has selz	ure 1-3	nedic x a yea	ations fo ar his
**I'm trying to ply catch-up since I will be out of town from 1	i/12/03 to 11/18/03.	Sorry to	bomba	ırd you	, but
THANKS!!!!					
Cyndl					1

CONTRACT #0900010

BUTLER COUNTY BOARD OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES

CASE MANAGEMENT SERVICES

- 1) LOCATION CODE
- A. Hospital
- B. In Office
- C. Residential Fac/Home
- D. Place of Employ/Day Prog/School
- E. Transport of Client
- F. Other

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- 2) CONTACT CODE
- G. With Individual
- H. With Individual/Phone
- I. With Essential Other
- J. With Essential Other/Phone
- K. Written

- 3) SERVICE CODE
- L. Needs Assessment
- M. Crisis Intervention
- N. Information/Referral
- O. U.I.R.
- P. Service Monitoring
- Q. Service Coordinating
- 4) SERV NEEDS CODE
- R. Housing/Placement
- S. Interpersonal
- T. Monitoring
- U. Comprehensive Evaluation
- V. U.I.R. Follow-up
- W. Crisis Resolution
- X. Other
- Y. Team Meeting

SERVICE	PERIOD: 10/	01/03 - 1	0/31	/03			PRIMARY DIAG CO	DE: 03190		
NAME:	LAURE	N E (1599	1)				MEDICAID #			
DOB:							MUI SPECIALIST:	Remarkon	O'Hi	DATE: (0) 31/03
DATE	START	END	1.	2	3	4	UNITS	CASE/PROGRESS NOTES		INITIALS

10/28/03 10:40:00 11:15:00 B K O V

2 Rec. fax from Pat Campbell of FC re: Lauren's hand. This incident was discovered by the OIR while doing an investigation at FC on 10/27/03. Lauren rec. 18 stitches in her hand (see incident report). This info. was given to Cyndi Brown to file w/state.

RJO

CONTRACT #0900010

BUTLER COUNTY BOARD OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES

CASE MANAGEMENT SERVICES

1	LOCATION	CODE

- A. Hospital
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- K. Written

- 3) SERVICE CODE
- L. Needs Assessment
- M. Crisis Intervention
- N. Information/Referral
- O. U.I.R.
- P. Service Monitoring
- Q. Service Coordinating
- 4) SERV NEEDS CODE
- R. Housing/Placement
- S. Interpersonal
- T. Monitoring
- U. Comprehensive Evaluation
- V. U.I.R. Follow-up
- W. Crisis Resolution
- X. Other
- Y. Team Meeting

SERVICE PERIOD: 10/01/03 - 10/31/03

PRIMARY DIAG CODE: 03190

LAUREN E (1599)

MEDICAID

MUI INVESTIGATOR:

DATE

START

3 4 UNITS

CASE/PROGRESS NOTES

INITIALS

10/27/03 10:30:00 11:00:00 B K O V

2 Filed Lauren's injury with the State (Lauren had gotten her hand caught in CSB a door, requiring eighteen stitches).

-2 Me.