

Wood County Board of Developmental Disabilities

PROCEDURE

Procedure #: 02-ALL-ALL-0911 (SS) **Subject:** Investigative Agent and Provider Relations Collaboration

Effective Date: 02-26-2024 **Last Revision:**

Person Responsible: Director of Health Supports and Provider Relations Service and Support Administration Manager

Approvals/Date:
Brent Ober 2/28/24
Jane Hayward 2/26/24
 Superintendent, WCBDD Date Department Director/Coordinator Date

Purpose: To collaborate between the WCBDD Investigative Agents and the Provider Relations Team for the provision of recommended training with HCBS Providers and subsequent follow-up in order to support the health and safety of Individuals served as well as identifying Provider specific and systemic training topics and potential need for Special Compliance Reviews to occur.	
1.	Investigative Agents identify a provider in need of specific training regarding the findings of a MUI or UIR follow up.
2.	Investigative Agents will email the Provider Relations Director and Provider Relations email with what specific training needs to occur, who needs the training and when the training needs to be completed by. All written requests will be added to the Provider Relations SharePoint site.
3.	Provider Relations will schedule and complete the training with the specific provider by the date indicated by the Investigative Agents. If additional time is needed by Provider relations to create and complete the training by the prevention plan due date, this will be communicated and agreed upon by the involved parties. An extension may be requested by IA for the MUI based on this need.
4.	Provider Relations will email Investigative Agents when provider training is complete and forward attendance sheets showing that the requested training was completed.
5.	Once training is completed, Investigative Agents will state in the prevention plan within a MUI report or UIR follow up that the training was completed.
6.	IA/PR Collaboration Team will meet to discuss if a special review or another action is needed if one or more of the following occur: <ul style="list-style-type: none"> a. A prevention plan is not completed by the provider. b. A provider is not following the MUI or UIR rule. c. Trends and patterns are identified. d. Any other health or safety concern identified. e. Additional findings discovered within MUI Summary.
7.	The Provider Relations team will keep records of the training, decision on moving forward with a Special Review and for system training in the Provider Relations SharePoint in a folder labeled "IA/PR collaboration" in a provider specific sub-folder.
8.	If ongoing concerns and/or issues arise, a team decision will be made to move the concerns and documentation above on to ODODD Office of Compliance for next steps.

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