

**ALABAMA DEPARTMENT OF MENTAL HEALTH
DIVISION OF INTELLECTUAL DISABILITIES**

COMMUNITY INCIDENT TYPE CODES, TITLES & DESCRIPTIONS

TYPE CODE	INCIDENT TYPE TITLE & DESCRIPTION
01	PHYSICAL ABUSE: Any assault by someone other than another individual being served, upon an individual; includes but is not limited to hitting, kicking, pinching, slapping, or otherwise striking a individual or using excessive force regardless of whether an injury results. Assault as defined by this policy implies intent.
03	SEXUAL ABUSE: Sexual Abuse: Any sexual conduct with an individual by someone other than another individual being served with the intent to gratify the sexual desire of himself/herself or the individual. Sexual abuse includes, but is not limited to, sexual intercourse with an individual; deviate sexual intercourse or contact; and any form of sexual contact to include any touching of the sexual intimate parts. Sexual abuse also includes any incitement by someone other than another individual being served to engage in any form of sexual activity with another individual or other person.
04	VERBAL ABUSE: Verbal conduct by someone other than another individual being served that demeans an individual or could reasonably be expected to cause shame or ridicule, humiliation, embarrassment or emotional distress. Verbal abuse includes but is not limited to threatening an individual; using abusive, obscene or derogatory language to an individual; or teasing or taunting an individual in a manner to expose the individual to ridicule.
34	NEGLECT: The failure to carry out a duty through carelessness, inattention, or disregard of duty whereby the individual is exposed to harm or risk of harm, and includes but is not limited to: (a) failing to appropriately supervise individuals or otherwise leaving individual areas unattended; (b) failing to ensure the individual's basic needs for safety, nutrition, medical care and personal attention are met; (c) failing to provide treatment in accordance with the treatment plan; (d) utilizing treatment techniques, e.g., restraints, seclusion, etc. in violation of departmental policy and procedures, whether or not injury results.
02	MISTREATMENT: Any act or threat of intimidation, harassment or similar act and includes but is not limited to active verbal aggression or intimidation; use of physical or non-verbal gestures as a means of intimidation; withholding of or the threat of withholding physical necessities or personal possessions as a means of intimidation for the control of the individual; making false statements as a means of confusing or frightening or badgering an individual.
12	EXPLOITATION: Utilizing the position of employment to take advantage of an individual for personal benefit and includes but is not limited to improperly requesting individuals to perform employee's work responsibilities or otherwise perform services or tasks for the employee; requesting, taking or receiving money, gifts, or other personal possessions from individuals; utilizing individuals to engage in conduct with other individuals that would be prohibited if performed by an employee.

43	MODERATE INJURY: An injury, either explained or unexplained, requiring medical treatment that is not considered major. For example, a small cut that requires suturing (five or less sutures) or an IV infiltrates and needs to be reinserted. Bruises and contusions are considered moderate if they require treatment and sprains as well as suspected bone injury are considered moderate if an x-ray is ordered and there is no fracture.
44	MAJOR INJURY: A serious injury, either explained or unexplained, requiring medical treatment, including any fracture, head injury, or wound requiring more than five sutures.
70	CHOKING: Gagging or choking on food, liquid, or foreign object or material that requires the Heimlich maneuver or evaluation by medical personnel.
13	FALL: Tripping, stumbling, and or collapsing which results in a sudden and involuntary drop to a lower surface or the ground that results in a moderate or major injury where medical treatment is required.
40	SEIZURE: An unexpected or uncharacteristic (type, duration) seizure whether or not an injury occurs that requires medical treatment.
95	UNSCHEDULED HOSPITAL ADMISSION: Any other medical occurrence that cannot be characterized by any medical emergency category above that requires an unscheduled hospital admission.
98	OTHER: Any other occurrence that requires the notification of agencies such as Police, Fire Department, or DHR or an occurrence that could reflect negatively on the image of the DMH-DID.
51	MEDICATION ERROR (Severity Level 1). A medication error occurs when a recipient receives an incorrect drug, drug dose, dose form, quantity, route, concentration, or rate of administration. A medication error is also defined as some form of variance of the administration of a drug on a schedule other than intended. Therefore, a missed dose or a dose administered one hour before or after the scheduled time constitutes a medication error. Includes incidents in which the individual experienced no or minimal adverse consequences and no treatment or intervention other than monitoring or observation was required.
52	MEDICATION ERROR (Severity Level 2). A medication error occurs when a recipient receives an incorrect drug, drug dose, dose form, quantity, route, concentration, or rate of administration. A medication error is also defined as some form of variance of the administration of a drug on a schedule other than intended. Therefore, a missed dose or a dose administered one hour before or after the scheduled time constitutes a medication error. Includes incidents in which the individual experienced short term, reversible adverse consequences and treatment(s), and/or intervention(s) was/were needed in addition to monitoring and observation.
53	MEDICATION ERROR (Severity Level 3). A medication error occurs when a recipient receives an incorrect drug, drug dose, dose form, quantity, route, concentration, or rate of administration. A medication error is also defined as some form of variance of the administration of a drug on a schedule other than intended. Therefore, a missed dose or a dose administered one hour before or after the scheduled time constitutes a medication error. Includes incidents in which the individual experienced life-threatening and/or permanent adverse consequences.

54	DOCUMENTATION ERROR: A documentation error occurs when a MAR is not initialed after medication assistance is provided to an individual. Evidence of a documentation error is denoted by blank space(s) on the MAR following the scheduled administration time of the medication(s).
09	MISSING/ELOPED INDIVIDUAL: Any time an individual is found to be missing from the home or from work and cannot be located within 30 minutes, the provider staff must immediately report to police and RCS. The report shall include the suspected time of departure, where the individual possibly went, what the individual was wearing, a description of the individual's behavior/attitude prior to disappearance, and what actions have been taken to locate the individual.
08	DEATH: All mortalities in any setting are to be reported immediately by the provider or person notified of the mortality to RCS. RCS is to report to the Division of Intellectual Disabilities immediately upon notification of any mortality. An Initial Mortality Report and a Comprehensive Mortality Review will be required. If the death occurred while the person was not in the provider's care or if the person lives in a relative's home, it is understood that certain information may not be readily available.
50	SEVERE BEHAVIOR PROBLEM: Behavior problems such as physical aggression resulting in injury, self-injurious behavior requiring medical attention, suicide threats or attempts, or property damage resulting in injury or significant destruction shall be reported to RCS by the provider with information on how the situation was/is being addressed. Incidents resulting from such problems may or may not require action follow-up.
58	NATURAL DISASTER: (i.e., tornado, flood, wind damage, hurricane). Provider must be familiar with disaster procedures in the home and be prepared to evacuate to a shelter if needed. Notify RCS after evacuation is completed and safety of individuals is ensured.
15	FIRE: Flames resulting from the combination of heat, fuel, and oxygen or the unplanned, inappropriate or hazardous burning of a combustible substance where injuries and/or significant structural damages occur.
38	PHYSICAL ASSAULT: Any assault by an individual being served upon another individual being served. Includes, but is not limited to, an individual hitting, kicking, slapping, throwing objects at, or otherwise striking another person which caused or may have caused injury. A physical assault results from planned, intentional behavior and/or from agitation or other behavior where there is specific intent to inflict harm (or potential harm) to another individual.
35	SEXUAL ASSAULT: Any touching of the sexual or intimate parts of an individual being served by another individual being served to include intercourse and/or deviant sexual intercourse, involving an individual: (1) under the age of sixteen, or (2) who is coerced, or (3) does not otherwise have the capacity to consent (capacity may be either mental or physical, or the individual may be mentally incapacitated) as assessed by the individual's team.
67	MANUAL RESTRAINT: The use of physical holding which is not part of an approved behavior support plan to involuntarily restrain the movement of the whole or a portion of an individual's body as a means of controlling his/her physical activities in order to protect him/her or others from injury.

68	MECHANICAL RESTRAINT: The use of commercial devices which are not part of an approved behavior support plan to involuntarily restrain the movement of the whole or a portion of an individual's body as a means of controlling his/her physical activities in order to protect him/her or others from injury.
69	CHEMICAL RESTRAINT: The use of medication that is not a standard treatment for the individual's medical or psychiatric condition and is used to control behavior or restrict the individual's freedom of movement. Medications used for the individual's positive benefit as an integrated part of an individual's therapeutic plan of care and specific situation and representing standard treatment for the recipient's medical or psychiatric condition does not meet this restraint definition.
97	NOT SUBSTANTIATED BY INVESTIGATION OR ACTION FOLLOW-UP: This code/title is only be used if the investigation/action follow-up could not substantiate that any incident ever took place. Do not select this code/title simply to denote that the investigation/action follow-up determined the incident to be something other than what it was reported to be. Incident type reported and incident type substantiated does not have to be the same.