

MHSU Mapping Document
Effective 10-1-2024

Alabama Event Type	Therap Event Type	Therap Event Sub-Type	Therap Sub-Event Category	Additional	Notification Level	AL Definition	ADMH Notification Timeline*
Confidentiality/Privacy Breach	Other	Confidentiality/Privacy Breach			High	SU Only: Any violation of the confidentiality or privacy of protected recipient information relative to the Alcohol and Other Drug Confidentiality Rule within 42 C.F.R Part 2 and Part 8, or the Health Insurance Portability and Accountability Act Privacy Rule, within 45 C.F.R. Parts 160 and 164.	24 Hours
Death	Death	Cause:			High	Cessation of all vital body functions - High: Death resulting from suicide, Physical assault from another person, Accident, Reason exists to believe death is not result of natural causes, Opioid Treatment Program recipient.	24 Hours
Discretionary Report	Other	Discretionary	Description: (Text Box)		High or Medium, per Procedures	High: Incidents that are judged by the Executive Director or designee to be severe in nature, scope, or consequences to the recipient, the provider, or to DMH, in addition to those defined above, should be reported to the Director of Community Programs, as soon as possible, but no later than 24 hours of the provider's knowledge of the occurrence, and also entered in the DMH approved electronic reporting system within 24 hours. Medium: Incidents judged by Executive Director or designee that adversely affects, or has the potential to be harmful or hazardous to the health, safety, or well being of a recipient at a provider location for any reason, and does not fall into a defined incident category.	24 Hours or Within 7 Days - Dependent on ED Discretion
Elopement	Other	AWOL/Missing Person			High if any child/adolescent, adult on Temp Visit from state facility, under outpatient civil commitment order to residential program, under inpatient civil commitment order to Designated Mental Health Facility (DMHF), Forensic recipient under Conditional Release order	Recipient is not in a permissible location based on privilege status or is not accounted for when expected to be present.	24 Hours
Exploitation	Other	Exploitation		Choose Exploitation: Yes/Choose Type	High	Utilizing the position of employment to take advantage of a recipient for personal benefit and includes but is not limited to improperly requesting recipients 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 recipients; utilizing recipients to engage in conduct with other recipients that would be prohibited if performed by an employee.	24 Hours

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Hospitalization	Other	Hospital			High	Recipient is formally admitted as an inpatient to the hospital and assigned to a bed on a unit outside of the emergency room. This includes hospitalization for medical and/or psychiatric reasons. Adult MI: Admitted from locked unit Child/Adol MI: Admitted from residential unit Adult/Child/Adol SU: Admitted from Substance Use residential	24 Hours
Investigation	GER Resolution					Incidents requiring investigation include: (1) All allegations of Abuse including, Physical, Sexual, Verbal, Mistreatment, Neglect, and Exploitation (2) All allegations of Non-Consensual Sexual Contact (3) Other incidents in which DMH requests an investigation. Investigations must be completed by agency staff who have received the DMH approved Special Incident Investigation Training.	15 Days
Law Enforcement Involvement	Other	Law Enforcement Involvement			High	Assistance/Intervention is required from Law Enforcement and a Report/Case ID is issued as a result of that involvement.	24 Hours
Legal/Criminal Activity	Other	Possible Criminal Activity/Misconduct			High	SU Only: Any event involving recipient(s), agency, and/or staff that necessitates the intervention of law enforcement officials.	24 Hours
Major Injury: Accident	Injury	Select Type: Select Cause:	Injury Severity: Severe		High	A serious injury, including any fracture, diagnosed head injury, or wound requiring 6 sutures/staples or more or wound adhesive of 1 inch or greater, and 3rd and 4th degree burns, resulting from an accident. (Severity Level 3 or greater on NRI SEVERITY OF INJURY SCALE)	24 Hours
Major Injury: Assault	Injury	Select Type: Cause: Assault	Injury Severity: Severe		High	A serious injury, including any fracture, diagnosed head injury, or wound requiring 6 sutures/staples or more or wound adhesive of 1 inch or greater, and 3rd and 4th degree burns, resulting from an assault received from another recipient. (Severity Level 3 or greater on NRI SEVERITY OF INJURY SCALE)	24 Hours
Major Injury: Self Inflicted	Injury	Select Type: Cause: Self Injurious Behavior	Injury Severity: Severe		High	A serious injury, including any fracture, diagnosed head injury, or wound requiring 6 sutures/staples or more or wound adhesive of 1 inch or greater, and 3rd and 4th degree burns, resulting from a self-inflicted act. (Severity Level 3 or greater on NRI SEVERITY OF INJURY SCALE)	24 Hours

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Major Injury: Unknown/Unexplained	Injury	Select Type: Undetermined Cause:	Injury Severity: Severe		High	A serious injury, including any fracture, diagnosed head injury, or wound requiring 6 sutures/staples or more or wound adhesive of 1 inch or greater, and 3rd and 4th degree burns, and the cause is unknown or unexplained. (Severity Level 3 or greater on NRI SEVERITY OF INJURY SCALE)	24 Hours
Media Event	Other	Media Event			High	Media is involved in any unplanned manner, regardless of location, and references a recipient, provider, provider employee, or ADMH. Media includes TV, radio, internet, newspaper, and all social media platforms.	24 Hours
Medication Error: Level 1	Medication Error	Choose Cause	Severity: 1		Medium	Includes wrong medication, wrong person, wrong dose, wrong time, wrong route, missed dose, not given for right purpose, documentation error; recipient experienced no or minimal adverse consequences and no treatment or intervention other than monitoring or observation was required.	Within 7 Days
Medication Error: Level 2	Medication Error	Choose Cause	Severity: 2		Medium	Includes wrong medication, wrong person, wrong dose, wrong time, wrong route, missed dose, not given for right purpose, documentation error; recipient experienced short term, reversible adverse consequences and treatment(s) and/or intervention(s) in addition to monitoring and observation was/were required. Emergency Room (ER) visit required as a result of medication error.	Within 7 Days
Medication Error: Level 3	Medication Error	Choose Cause	Severity: 3		High	Includes wrong medication, wrong person, wrong dose, wrong time, wrong route, missed dose, not given for right purpose, documentation error; recipient experienced life-threatening and/or permanent adverse consequences. If the recipient requires hospitalization as the result of a medication error, the error is categorized as a Level 3 medication error. Hospitalization required as a result of medication error.	24 Hours
Mistreatment	Other	Mistreatment			High	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 recipient; making false statements as a means of confusing or frightening or badgering a recipient.	24 Hours

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Naloxone (Narcan) Administered	Other	Naloxone (Narcan) Administered	Select: Number of doses administered (1-4) ER Visit Due to Overdose: Select Yes/No Hospitalization Due to Overdose: Select Yes/No		High	Naloxone was administered by program staff, peer, or medical personnel to program recipient on provider premises or while under provider supervision.	24 Hours
Neglect	Other	Neglect		Choose Neglect: Yes/Choose Type: Neglect by Responsible Provider	High	The failure to carry out a duty through reckless conduct, carelessness, inattention, or disregard of duty whereby the recipient is exposed to harm or risk of harm, and includes but is not limited to: Failing to appropriately supervise recipients or otherwise leaving recipient area unattended; Failing to ensure the recipient's basic needs for safety, nutrition, medical care and personal attention are met; Failing to provide treatment in accordance with the treatment plan; Utilizing treatment techniques, e.g., restraints, seclusion, etc. in violation of departmental policy and procedures, whether or not injury results.	24 Hours
Opioid Overdose	Other	Opioid Overdose	Select: Confirmed/Suspected ER Visit Due to Overdose: Select Yes/No Hospitalization Due to Overdose: Select Yes/No		High	Suspected or confirmed opioid overdose of program recipient that occurs on provider premises or under provider supervision.	24 Hours
Physical Abuse	Other	Abuse		Choose Abuse: Yes/Choose Type: Physical	High	Any assault by an employee upon a recipient and includes but not limited to hitting, kicking, pinching, slapping, or otherwise striking a recipient or using excessive force regardless of whether an injury results. Assault as defined by this policy implies intent.	24 Hours

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Relocation	Other	Relocation		Residential Settings Only	High	Recipients are moved from the identified treatment setting and are relocated to an alternate site for reasons, including but not limited to, fire, flood, weather related conditions, utility or plumbing failure, hazardous materials event, structural damage, pest infestation, etc. This applies to recipients in residential settings only.	24 Hours
Restraint	Restraint Related to Behavior OR Restraint Other	Choose Restraint Type:			Medium	A physical restraint is any manual method or physical or mechanical device, material or equipment that immobilizes or reduces the ability of a recipient to move his or her arms, legs, body or head freely.	Within 7 Days
Seclusion	Restraint Other	Restraint Type: Seclusion			Medium	Seclusion is the involuntary confinement of a recipient alone in a room or an area where the recipient is physically prevented from leaving. Seclusion may only be used for the management of violent or self destructive behavior.	Within 7 Days
Sexual Abuse	Other	Abuse		Choose Abuse: Yes/Choose Type: Sexual	High	Any sexual conduct with the recipient by an employee on or off duty. Sexual abuse includes but is not limited to sexual intercourse with a recipient; deviate sexual intercourse or contact; and any form of sexual contact.	24 Hours
Sexual Contact	Other	Sexual Contact	Type: Consensual/Non-Consensual		High if Non-Consensual/Medium if Consensual	High Non-Consensual Sexual Contact: Any non-consensual sexual contact between two recipients to include any touching of the sexual or intimate parts of a person, to include intercourse. Sexual contact is considered non-consensual when at least one of the parties so indicates, when one or both recipients are considered incapable of giving consent, or when either party is under the age of 16 years. Medium Consensual Sexual Contact: Any consensual sexual contact that includes touching of the sexual or intimate parts of a person, done for the purpose of gratifying the sexual desires of either party; to include consensual intercourse that occurs between two recipients. Please see Appendix B.	24 Hours or Within 7 days - Dependent if consensual or non-consensual
Suicide Attempt	Other	Suicide	Type: Attempt		High	An act committed by a recipient in an attempt to cause their own death. A suicide attempt is limited to the actual occurrence of an act and does not include verbal suicidal threats by a recipient receiving services.	24 Hours

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Verbal Abuse	Other	Abuse		Choose Abuse: Yes/Choose Type: Verbal	High	Verbal conduct by an employee that demeans a recipient or could reasonably be expected to cause shame or ridicule, humiliation, embarrassment or emotional distress. Verbal abuse includes but is not limited to threatening a recipient; using abusive, obscene or derogatory language to a recipient; or teasing or taunting a recipient in a manner to expose the recipient to ridicule.	24 Hours