

St. Clair County Community Mental Health Authority
OFFICE OF RECIPIENT RIGHTS
COMPLAINT RESOLUTION AGGREGATE DATA REPORT

Reporting Period: FY2023 – Q4
07/01/2023 through 09/30/2023

COMPLAINT NUMBER	CATEGORY NAME	PROVIDER TYPE	DATE RECEIVED	REMEDIAL ACTION	DATE COMPLETED	SUMMARY OF COMPLAINT
5454	Dignity & Respect (7084)	04	06/02/2023	NA	08/31/2023 < 90 Days	PREVIOUSLY PENDING Complaint filed by a staff member alleging a staff member spoke to a recipient in a disrespectful manner. 7084 – NOT SUBSTANTIATED
5459	Dignity & Respect (7084)	04	06/08/2023	03	09/06/2023 < 90 Days	PREVIOUSLY PENDING Complaint filed by the Office of Recipient Rights due to information obtained during a consultation alleging a staff member spoke to a recipient in a disrespectful manner. 7084 – SUBSTANTIATED
5460	Services Suited to Condition (7081)	15	06/09/2023	03	09/07/2023 < 90 Days	PREVIOUSLY PENDING Complaint filed by an anonymous source alleging a staff member utilized their telephone while in the driver’s seat while stopped at a stop light. 7081 – SUBSTANTIATED

KEY:

Provider Type (PT):

- | | | |
|----------------------|-----------------------------|-----------------------------------|
| 01 Outpatient | 06 Day Program MI | 11 Case Management |
| 02 Residential MI | 07 Day Program DD | 12 Psychosocial Rehab (Clubhouse) |
| 03 Residential DD | 08 Workshop (Prevocational) | 13 Partial Hospitalization |
| 04 Mixed Residential | 09 Supported Employment | 14 SIP |
| 05 Inpatient | 10 ACT | 15 Other |

Remedial Action Code:

- | | | |
|-----------------------|---|---|
| 01 Verbal Counseling | 06 Staff Transfer | 10 Policy Revision/Development |
| 02 Written Counseling | 07 Training | 11 Environmental Repair/Enhancement |
| 03 Written Reprimand | 08 Employment Termination | 12 Plan of Service Revision |
| 04 Suspension | *8 Employee left agency, but allegation substantiated | 13 Recipient Transferred to Another Provider/Site |
| 05 Demotion | 09 Contract Action | 14 Other |
| | | NA Remedial action not applicable |

COMPLAINT NUMBER	CATEGORY NAME	PROVIDER TYPE	DATE RECEIVED	REMEDIAL ACTION	DATE COMPLETED	SUMMARY OF COMPLAINT
5465	Services Suited to Condition (7081)	15	06/14/2023	03 07	08/15/2023 < 90 Days	PREVIOUSLY PENDING REMEDIAL ACTION Complaint filed by a staff member alleging a staff member billed for services they did not provide. 7081 – SUBSTANTIATED
5480	Communication via Mail (7263) Services Suited to Condition (7081)	04	06/28/2023	07	08/30/2023 < 60 Days	PREVIOUSLY PENDING Complaint filed by a staff member alleging a staff member opened a recipient's mail without permission and did not prepare dinner for the recipient or assist the recipient with bathing. 7263 – NOT SUBSTANTIATED 7081 – NOT SUBSTANTIATED
5485	Abuse: Class III (7223)	04	06/26/2023	NA	08/29/2023 < 90 Days	PREVIOUSLY PENDING Complaint filed by an anonymous source alleging a staff member threw water at a recipient's face. 7223 – NOT SUBSTANTIATED
5491	Services Suited to Condition (7081) Abuse: Class II – Exploitation (7225)	04	06/29/2023	03	08/04/2023 < 60 Days	PREVIOUSLY PENDING Complaint filed by a staff member alleging a staff member slept during their work shift and stole items from the group home. 7081 – SUBSTANTIATED 7225 – NOT SUBSTANTIATED

KEY:

Provider Type (PT):

01 Outpatient	06 Day Program MI	11 Case Management
02 Residential MI	07 Day Program DD	12 Psychosocial Rehab (Clubhouse)
03 Residential DD	08 Workshop (Prevocational)	13 Partial Hospitalization
04 Mixed Residential	09 Supported Employment	14 SIP
05 Inpatient	10 ACT	15 Other

Remedial Action Code:

01 Verbal Counseling	06 Staff Transfer	10 Policy Revision/Development
02 Written Counseling	07 Training	11 Environmental Repair/Enhancement
03 Written Reprimand	08 Employment Termination	12 Plan of Service Revision
04 Suspension	*8 Employee left agency, but allegation substantiated	13 Recipient Transferred to Another Provider/Site
05 Demotion	09 Contract Action	14 Other
		NA Remedial action not applicable

COMPLAINT NUMBER	CATEGORY NAME	PROVIDER TYPE	DATE RECEIVED	REMEDIAL ACTION	DATE COMPLETED	SUMMARY OF COMPLAINT
5494	Abuse: Class III (7223)	04	07/02/2023	NA	08/15/2023 < 60 Days	Complaint filed by a staff member alleging a staff member used derogatory language when speaking to a recipient. 7223 – NOT SUBSTANTIATED
5497	Abuse: Class III (7223)	04	07/06/2023	03 07	08/23/2023 < 60 Days	Complaint filed by a staff member alleging a staff member yelled at a recipient and used degrading language. 7223 – SUBSTANTIATED
5498	Dignity & Respect (7084)	04	07/06/2023	NA	08/23/2023 < 60 Days	Complaint filed by an anonymous source alleging a staff member spoke about a recipient in a disrespectful manner in the presence of the recipient. 7084 – NOT SUBSTANTIATED
5499	Outside Provider Jurisdiction (0001)	15	07/06/2023	NA	07/13/2023 < 30 Days	Complaint filed by a staff member alleging the guardian of a recipient was disrespectful to their ward/recipient. As the allegation involved a guardian, a non-paid party, the Office of Recipient Rights does not have jurisdiction over the matter. 0001 – OUTSIDE PROVIDER JURISDICTION
5500	Dignity & Respect (7084)	04	07/06/2023	01 07	08/31/2023 < 60 Days	Complaint filed by an anonymous source alleging a staff member spoke to a recipient in a disrespectful manner. 7084 – SUBSTANTIATED

KEY:

Provider Type (PT):

01 Outpatient	06 Day Program MI	11 Case Management
02 Residential MI	07 Day Program DD	12 Psychosocial Rehab (Clubhouse)
03 Residential DD	08 Workshop (Prevocational)	13 Partial Hospitalization
04 Mixed Residential	09 Supported Employment	14 SIP
05 Inpatient	10 ACT	15 Other

Remedial Action Code:

01 Verbal Counseling	06 Staff Transfer	10 Policy Revision/Development
02 Written Counseling	07 Training	11 Environmental Repair/Enhancement
03 Written Reprimand	08 Employment Termination	12 Plan of Service Revision
04 Suspension	*8 Employee left agency, but allegation substantiated	13 Recipient Transferred to Another Provider/Site
05 Demotion	09 Contract Action	14 Other
		NA Remedial action not applicable

COMPLAINT NUMBER	CATEGORY NAME	PROVIDER TYPE	DATE RECEIVED	REMEDIAL ACTION	DATE COMPLETED	SUMMARY OF COMPLAINT
5522	Dignity & Respect (7084)	04	07/19/2023	NA	09/08/2023 < 60 Days	Complaint filed by an anonymous source alleging a staff member refused to permit a recipient to use a regular size glass of water when taking their medications. 7084 – NOT SUBSTANTIATED
5525	Dignity & Respect (7084) Services Suited to Condition (7080)	04	07/14/2023	NA	09/07/2023 < 60 Days	Complaint filed by a staff member alleging a staff member spoke to a recipient in a disrespectful manner and asked a recipient to engage in activities in non-compliance with the recipient's Individual Plan of Services. 7084 – NOT SUBSTANTIATED 7081 – NOT SUBSTANTIATED
5528	Neglect: Class III (72271)	04	07/17/2023	08	09/14/2023 < 60 Days	Complaint filed by a staff member alleging a staff member left their work shift, leaving the staff to resident ratio at 1:6 when a 2:6 ratio was required to maintain the health and safety of the residents. 72271 – SUBSTANTIATED
5529	Dignity & Respect (7084) Abuse: Class II – Unreasonable Force (72222)	04	07/25/2023	NA	09/20/2023 < 60 Days	Complaint filed by a Recipient alleging a staff member talked to them like a child and stated to the Recipient their parent could “kick your ass.” In addition, the Recipient alleged a staff member pushed on their stomach. 7084 – NOT SUBSTANTIATED 72222 – NOT SUBSTANTIATED

KEY:

Provider Type (PT):

01 Outpatient	06 Day Program MI	11 Case Management
02 Residential MI	07 Day Program DD	12 Psychosocial Rehab (Clubhouse)
03 Residential DD	08 Workshop (Prevocational)	13 Partial Hospitalization
04 Mixed Residential	09 Supported Employment	14 SIP
05 Inpatient	10 ACT	15 Other

Remedial Action Code:

01 Verbal Counseling	06 Staff Transfer	10 Policy Revision/Development
02 Written Counseling	07 Training	11 Environmental Repair/Enhancement
03 Written Reprimand	08 Employment Termination	12 Plan of Service Revision
04 Suspension	*8 Employee left agency, but allegation substantiated	13 Recipient Transferred to Another Provider/Site
05 Demotion	09 Contract Action	14 Other
		NA Remedial action not applicable

COMPLAINT NUMBER	CATEGORY NAME	PROVIDER TYPE	DATE RECEIVED	REMEDIAL ACTION	DATE COMPLETED	SUMMARY OF COMPLAINT
5530	Abuse: Class II – Unreasonable Force (7222) Abuse: Class III (7223)	15	07/28/2023	03	08/28/2023 < 60 Days	Complaint filed by the Office of Recipient Rights due to information obtained from an Incident Report. 7222 – NOT SUBSTANTIATED 7223 – SUBSTANTIATED
5531	Abuse: Class III (7223)	01	07/24/2023	NA	08/30/2023 < 60 Days	Complaint filed by a staff member alleging a staff member called a recipient a “rat” and flipped off the recipient. 7223 – NOT SUBSTANTIATED
5533	Services Suited to Condition (7081)	04	07/24/2023	03	09/11/2023 < 60 Days	Complaint filed by a staff member alleging a staff member was in non-compliance with a physical transfer requirement. 7081 – SUBSTANTIATED
5534	Neglect: Class III (72271)	15	07/31/2023	*8	09/05/2023 < 60 Days	Complaint filed by a staff member alleging a staff member left a recipient unattended when the recipient requires 24/7 support in their own home. 72271 – SUBSTANTIATED
5545	Abuse: Class III (7223)	04	07/26/2023	08	09/12/2023 < 60 Days	Complaint filed by a staff member alleging a staff member spoke to a recipient in a disrespectful manner. 7223 – SUBSTANTIATED

KEY:

Provider Type (PT):

01 Outpatient	06 Day Program MI	11 Case Management
02 Residential MI	07 Day Program DD	12 Psychosocial Rehab (Clubhouse)
03 Residential DD	08 Workshop (Prevocational)	13 Partial Hospitalization
04 Mixed Residential	09 Supported Employment	14 SIP
05 Inpatient	10 ACT	15 Other

Remedial Action Code:

01 Verbal Counseling	06 Staff Transfer	10 Policy Revision/Development
02 Written Counseling	07 Training	11 Environmental Repair/Enhancement
03 Written Reprimand	08 Employment Termination	12 Plan of Service Revision
04 Suspension	*8 Employee left agency, but allegation substantiated	13 Recipient Transferred to Another Provider/Site
05 Demotion	09 Contract Action	14 Other
		NA Remedial action not applicable

COMPLAINT NUMBER	CATEGORY NAME	PROVIDER TYPE	DATE RECEIVED	REMEDIAL ACTION	DATE COMPLETED	SUMMARY OF COMPLAINT
5546	Dignity and Respect (7084)	04	07/28/2023	03	09/15/2023 < 60 Days	Complaint filed by a staff member alleging two staff members put their thumb on their noses and said, "Not it," when the recipient needed to use the restroom. 7084 – SUBSTANTIATED
5547	Dignity & Respect (7084)	04	08/01/2023	NA	09/25/2023 < 60 Days	Complaint filed by a recipient alleging a staff member cut the recipient's hair when the recipient preferred having their hair cut by a barber. 7084 – NOT SUBSTANTIATED
5548	Dignity and Respect (7084)	04	08/09/2023	03 06	10/03/2023 < 60 Days	Complaint filed by a staff member alleging a staff member "scared" the recipient and was disrespectful. 7084 – SUBSTANTIATED
5550	Services Suited to Condition (7081)	04	08/11/2023	04 06	09/19/2023 < 60 Days	Complaint filed by the Office of Recipient Rights due to information obtained from a staff member alleging a staff member was in non-compliance with a recipient's Individual Plan of Services. 7081 – SUBSTANTIATED
5553	Dignity and Respect (7084)	15	08/07/2023	NA	09/28/2023 < 60 Days	Complaint filed by the recipient alleging a staff member said the recipient was lying. 7084 – NOT SUBSTANTIATED

KEY:

Provider Type (PT):

01 Outpatient	06 Day Program MI	11 Case Management
02 Residential MI	07 Day Program DD	12 Psychosocial Rehab (Clubhouse)
03 Residential DD	08 Workshop (Prevocational)	13 Partial Hospitalization
04 Mixed Residential	09 Supported Employment	14 SIP
05 Inpatient	10 ACT	15 Other

Remedial Action Code:

01 Verbal Counseling	06 Staff Transfer	10 Policy Revision/Development
02 Written Counseling	07 Training	11 Environmental Repair/Enhancement
03 Written Reprimand	08 Employment Termination	12 Plan of Service Revision
04 Suspension	*8 Employee left agency, but allegation substantiated	13 Recipient Transferred to Another Provider/Site
05 Demotion	09 Contract Action	14 Other
		NA Remedial action not applicable

COMPLAINT NUMBER	CATEGORY NAME	PROVIDER TYPE	DATE RECEIVED	REMEDIAL ACTION	DATE COMPLETED	SUMMARY OF COMPLAINT
5554	Services Suited to Condition (7081)	07	08/07/2023	08	11/05/2023 < 60 Days	Complaint filed by the recipient alleging a staff member permitted the recipient to use the staff's personal cell phone to communicate with the staff's sister. 7081 – SUBSTANTIATED
5555	Abuse: Class III (7223)	04	08/07/2023	03	11/05/2023 < 90 Days	Complaint filed by a staff member alleging a staff member used language or other means of communication to degrade the recipient. 7223 – SUBSTANTIATED
5557	Abuse: Class II – Unreasonable Force (72222) Abuse: Class III (7223)	05	08/18/2023	N/A	10/09/2023 < 60 Days	Complaint filed by a staff member alleging a staff member bent the recipient's finger back, and also verbally abused the recipient. 72222 – NOT SUBSTANTIATED 7223 – NOT SUBSTANTIATED
5571	Family Rights (7111) Services Suited to Condition (7081)	04	08/15/2023	03	10/12/2023 < 60 Days	Complaints filed by the guardian alleging a staff member did not treat the guardian with dignity and respect, and that a staff member did not following the recipient's toileting schedule. 7111 – NOT SUBSTANTIATED 7081 – SUBSTANTIATED
5574	Services Suited to Condition (7081)	09	08/18/2023	N/A	10/19/2023 < 60 Days	Complaint filed by a staff member alleging a staff member made decisions without the involvement of the entire treatment team and the recipient. 7081 – NOT SUBSTANTIATED

KEY:

Provider Type (PT):

01 Outpatient	06 Day Program MI	11 Case Management
02 Residential MI	07 Day Program DD	12 Psychosocial Rehab (Clubhouse)
03 Residential DD	08 Workshop (Prevocational)	13 Partial Hospitalization
04 Mixed Residential	09 Supported Employment	14 SIP
05 Inpatient	10 ACT	15 Other

Remedial Action Code:

01 Verbal Counseling	06 Staff Transfer	10 Policy Revision/Development
02 Written Counseling	07 Training	11 Environmental Repair/Enhancement
03 Written Reprimand	08 Employment Termination	12 Plan of Service Revision
04 Suspension	*8 Employee left agency, but allegation substantiated	13 Recipient Transferred to Another Provider/Site
05 Demotion	09 Contract Action	14 Other
		NA Remedial action not applicable

COMPLAINT NUMBER	CATEGORY NAME	PROVIDER TYPE	DATE RECEIVED	REMEDIAL ACTION	DATE COMPLETED	SUMMARY OF COMPLAINT
5580	Dignity and Respect (7084)	04	08/28/2023	N/A	10/16/2023 < 60 Days	Compliant filed by the recipient alleging a staff member spoke in a disrespectful manner. 7084 – NOT SUBSTANTIATED
5581	Services Suited to Condition (7081)	04	08/31/2023	*8	10/27/2023 < 60 Days	Compliant filed by a staff member alleging a staff member ignored the recipient in non-compliance with the Individual Plan of Service. 7081 – SUBSTANTIATED
5584	Abuse: Class III (7223)	04	08/29/2023	NA	11/08/2023 < 60 Days	Complaint filed by the recipient alleging a staff member used profanity, and made inappropriate comments, in the presence of, and towards the recipient. 7223 – NOT SUBSTANTIATED
5585	Neglect: Class III (72271)	07	08/31/2023	03	10/27/2023 < 60 Days	Compliant filed by the Office of Recipient Rights due to information obtained from an Incident Report. Per the report, a recipient was left unattended in a program van. 72271 – SUBSTANTIATED
5586	Confidentiality (7481)	11	08/31/2023	PENDING	PENDING	Complaint filed by an anonymous source alleging a staff member disclosed confidential information about a recipient to a third party without written prior consent. 7481 – PENDING

KEY:

Provider Type (PT):

01 Outpatient	06 Day Program MI	11 Case Management
02 Residential MI	07 Day Program DD	12 Psychosocial Rehab (Clubhouse)
03 Residential DD	08 Workshop (Prevocational)	13 Partial Hospitalization
04 Mixed Residential	09 Supported Employment	14 SIP
05 Inpatient	10 ACT	15 Other

Remedial Action Code:

01 Verbal Counseling	06 Staff Transfer	10 Policy Revision/Development
02 Written Counseling	07 Training	11 Environmental Repair/Enhancement
03 Written Reprimand	08 Employment Termination	12 Plan of Service Revision
04 Suspension	*8 Employee left agency, but allegation substantiated	13 Recipient Transferred to Another Provider/Site
05 Demotion	09 Contract Action	14 Other
		NA Remedial action not applicable

COMPLAINT NUMBER	CATEGORY NAME	PROVIDER TYPE	DATE RECEIVED	REMEDIAL ACTION	DATE COMPLETED	SUMMARY OF COMPLAINT
5588	Neglect: Class III (72271) Abuse: Class III (7223)	04	09/07/2023	*8	10/24/2023 < 60 Days	Compliant filed by a staff member alleging a staff member left the recipient at the hospital unattended, and used profanity in the presence of the recipient. 72271 – SUBSTANTIATED 7223 – SUBSTANTIATED
5593	Abuse: II – Exploitation (72225) Services Suited to Condition (7081)	04	09/07/2023	03	10/17/2023 < 60 Days	Complaint filed by a staff member alleging a staff member misused a recipient's funds, and did not document the resident's funds on the LARA approved form in non-compliance with SCCCMHA policy. 72225 – NOT SUBSTANTIATED 7081 – SUBSTANTIATED
5600	Services Suited to Condition (7081)	04	09/14/2023	NA	10/25/2023 < 60 Days	Complaint filed by a staff member alleging a group home staff member did not purchase adequate food for the residents of the group home. 7081 – NOT SUBSTANTIATED
5601	Abuse: Class II – Unreasonable Force (72222) Services Suited to Condition (7081)	07	09/15/2023	01	10/30/2023 < 60 Days	Complaint filed by a staff member alleging a staff member picked up a recipient utilizing an unapproved physical management technique and moved the recipient to another location. 72222 – NOT SUBSTANTIATED 7081 – SUBSTANTIATED

KEY:

Provider Type (PT):

01 Outpatient	06 Day Program MI	11 Case Management
02 Residential MI	07 Day Program DD	12 Psychosocial Rehab (Clubhouse)
03 Residential DD	08 Workshop (Prevocational)	13 Partial Hospitalization
04 Mixed Residential	09 Supported Employment	14 SIP
05 Inpatient	10 ACT	15 Other

Remedial Action Code:

01 Verbal Counseling	06 Staff Transfer	10 Policy Revision/Development
02 Written Counseling	07 Training	11 Environmental Repair/Enhancement
03 Written Reprimand	08 Employment Termination	12 Plan of Service Revision
04 Suspension	*8 Employee left agency, but allegation substantiated	13 Recipient Transferred to Another Provider/Site
05 Demotion	09 Contract Action	14 Other
		NA Remedial action not applicable

COMPLAINT NUMBER	CATEGORY NAME	PROVIDER TYPE	DATE RECEIVED	REMEDIAL ACTION	DATE COMPLETED	SUMMARY OF COMPLAINT
5602	Dignity and Respect (7084)	04	09/15/2023	01 03 07	11/08/2023 < 60 Days	Complaint filed by an anonymous source alleging a staff member bullied a recipient. 7084 – SUBSTANTIATED
5603	Confidentiality (7481)	04	09/25/2023	03	10/11/2023 < 60 Days	Complaint filed by a staff member alleging a staff member disclosed confidential information about a recipient to a third party without prior written consent. 7481 – NOT SUBSTANTIATED
5614	Dignity and Respect (7084)	11	09/27/2023	NA	11/02/2023 < 60 Days	Complaint filed by a staff member alleging a staff member did not allow the recipient a choice of their program. 7084 – NOT SUBSTANTIATED
5615	Dignity and Respect (7084)	07	09/28/2023	03	11/22/2023 < 60 Days	Complaint filed by a staff member alleging a staff member used profanity when speaking with a recipient. 7084 – SUBSTANTIATED
5621	Services Suited to Condition (7081) Abuse: III (7223) Dignity and Respect (7084)	04	09/25/2023	PENDING	11/16/2023 < 60 Days	Complaint filed by a staff member alleging a staff member completed personal errands while in the community with the recipient, used profanity in the presence of the recipient, and changed the television channel to a program the staff member enjoyed when the recipient was watching a television program. 7081 – SUBSTANTIATED 7223 – NOT SUBSTANTIATED 7084 – SUBSTANTIATED

KEY:

Provider Type (PT):

01 Outpatient	06 Day Program MI	11 Case Management
02 Residential MI	07 Day Program DD	12 Psychosocial Rehab (Clubhouse)
03 Residential DD	08 Workshop (Prevocational)	13 Partial Hospitalization
04 Mixed Residential	09 Supported Employment	14 SIP
05 Inpatient	10 ACT	15 Other

Remedial Action Code:

01 Verbal Counseling	06 Staff Transfer	10 Policy Revision/Development
02 Written Counseling	07 Training	11 Environmental Repair/Enhancement
03 Written Reprimand	08 Employment Termination	12 Plan of Service Revision
04 Suspension	*8 Employee left agency, but allegation substantiated	13 Recipient Transferred to Another Provider/Site
05 Demotion	09 Contract Action	14 Other
		NA Remedial action not applicable

COMPLAINT RESOLUTION SYSTEM SUMMARY:

From July 1, 2023, through September 30, 2023 (FY2023 – Q4), the Office of Recipient Rights (ORR) received/recorded 38 complaints consisting of 48 allegations. The ORR also completed seven previously pending complaints consisting of nine allegations.

ALLEGATION OUTCOMES THIS REPORTING PERIOD (57 total):

- a. Not Substantiated Allegations: 28 total
- b. No Right Involved Allegations: 0 total
- c. Outside Provider Jurisdiction Allegations: 1 total
- d. Pending Allegations: 1 total
- e. Substantiated Allegations: 27 total
 - 1. Abuse: Class III (5)
 - 2. Dignity & Respect (7)
 - 3. Neglect: Class III (4)
 - 4. Services Suited to Condition (11)

COMPLETION TIMEFRAMES	COMPLAINTS COMPLETED/ TOTAL COMPLAINTS COMPLETED THIS REPORTING PERIOD	COMPLETION PERCENTAGE
30 days or less	1/44	2%
60 days or less	37/44	84%
90 days or less	6/44	14%
Fiscal Year 2023, Q4 Completion Rate within 60-Days of Complaint Receipt:		86%

The goal for fiscal year 2023 was 80% completion within 60–days of receipt of each complaint. The final completion rate was 76%.

**To Note: The Mental Health Code requirement is 100% completion within 90-days of receipt of each complaint.*

Q1: 73%	Q2: 97%	Q3: 46%	Q4: 86%	TOTAL: 76%
----------------	----------------	----------------	----------------	-------------------

KEY:

Provider Type (PT):

01 Outpatient	06 Day Program MI	11 Case Management
02 Residential MI	07 Day Program DD	12 Psychosocial Rehab (Clubhouse)
03 Residential DD	08 Workshop (Prevocational)	13 Partial Hospitalization
04 Mixed Residential	09 Supported Employment	14 SIP
05 Inpatient	10 ACT	15 Other

Remedial Action Code:

01 Verbal Counseling	06 Staff Transfer	10 Policy Revision/Development
02 Written Counseling	07 Training	11 Environmental Repair/Enhancement
03 Written Reprimand	08 Employment Termination	12 Plan of Service Revision
04 Suspension	*8 Employee left agency, but allegation substantiated	13 Recipient Transferred to Another Provider/Site
05 Demotion	09 Contract Action	14 Other
		NA Remedial action not applicable