

NORTHCARE NETWORK

POLICY TITLE: Behavior Treatment Review	CATEGORY: Clinical Practices	
EFFECTIVE DATE: 5/5/04	BOARD APPROVAL DATE: 3/7/12	
REVIEW DATE: 1/30/23	REVISION(S) TO POLICY STATEMENT: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	OTHER REVISION(S): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
RESPONSIBLE PARTY: Clinical Practices Coordinator	CEO APPROVAL DATE: 2/7/23 Megan Rooney, Interim CEO	

APPLIES TO

NorthCare Network Personnel
Member CMHSPs

POLICY

It is the policy of NorthCare Network that Member CMSHPs shall use a specially constituted committee to review and approve or disapprove any plans that propose to use restrictive or intrusive techniques with individuals served by NorthCare Network. It is NorthCare Network's intention that any restrictive or intrusive program be used only as a last resort to protect the health and safety of consumers and others. NorthCare Network is committed to providing the necessary support and assistance to enhance the use of positive supports in the care of all individuals receiving services in our network.

PURPOSE

To ensure the Member Community Mental Health Service Providers (CMHSPs) of NorthCare Network adopt and abide by the MDHHS Technical Requirement for Behavior Treatment Plan Review Committees and applicable state and federal regulations regarding the treatment of individuals with challenging behaviors.

DEFINITIONS

N/A

REFERENCES

- 1997 Federal Balanced Budget Act At 42 CFR 438.100
- Mcl 330.1712, Michigan Mental Health Code
- Mcl 330.1740, Michigan Mental Health Code
- Mcl 330.1742, Michigan Mental Health Code
- MDHHS Administrative Rule 330.7199(2)(G)
- MDHHS/PIHP Contract
- Medicaid Provider Manual
- MDHHS Technical Requirement For Behavior Treatment Plan
- MDHHS Prevention Guide

HISTORY

REVISION DATE: 8/5/09, 3/7/12, 1/28/14, 3/3/15, 8/24/17, 9/11/19, 5/18/21, 3/4/22
REVIEW DATE: 1/13/11, 3/13/13, 1/28/14, 3/5/14, 3/3/15, 1/27/16, 11/16/16, 8/24/17, 6/27/18, 4/1/19, 9/11/19, 7/15/20, 5/18/21, 3/4/22, 1/30/23
CEO APPROVAL DATE: 3/13/13, 3/5/14, 3/3/15, 2/9/16, 12/6/16, 9/12/17, 7/3/18, 5/6/19, 8/4/20, 6/1/21, 4/5/22, 2/7/23
BOARD APPROVAL DATE: 11/2/05, 8/5/09, 3/7/12

PROCEDURES

A. NorthCare Network Responsibilities:

NorthCare Network adopts the MDHHS/PIHP Contract Technical Requirement for Behavior Treatment Plan in its entirety. NorthCare Network endorses the MDHHS Guide to Prevention and Positive Behavior Supports in a Culture of Gentleness. NorthCare Network monitors adherence to this policy through the following activities:

1. The NorthCare Network BTC Committee and Clinical Practices Quality Improvement Committee is responsible for the oversight and monitoring of BTC standards issued by MDHHS. NorthCare Network works with MDHHS, the Member CMHSPs, families, and contract providers to obtain the necessary training to assure a culture of gentleness, positive behavioral supports, and other individual-specific non-violent interventions. NorthCare Network will coordinate activities between MDHHS and the Member CMHSPs to report and review critical incidents and emergency physical interventions to assure best practices are being utilized when working with the most vulnerable individuals we serve.
2. Focused record reviews conducted by NorthCare Network staff when indicated.
3. Analysis by the NorthCare and CMHSP Peer Review Teams of regional risk event reporting that includes but is not limited to data regarding 911 calls and ER visits that occur during an emergency physical intervention.
4. Review of satisfaction survey results. Surveys are sent every other year.

B. Member CMHSP Responsibilities:

The review of behavior treatment planning is the responsibility of Member CMHSPs. Member CMHSPs are responsible to develop:

1. Policies and procedures for intervening with an individual receiving public mental health services who exhibits seriously aggressive, self-injurious or other behaviors that place the individual or others at risk of physical harm. These policies and procedures shall include protocols for using positive behavioral supports and the least intrusive and restrictive interventions. The Member CMHSP assures the person-centered planning process is used to determine whether a comprehensive assessment should be done to rule out physical, medical, and/or environmental (e.g., trauma, interpersonal relationships) conditions that might be the cause of the behaviors.

2. Each Member CMHSP will establish a Behavior Treatment Committee (BTC), to review and approve or disapprove any plans that propose restrictive or intrusive interventions. The BTC conducts its business according to the MDHHS Technical Requirement. This includes all required documentation and proper implementation of any approved plan.
3. Each Committee must establish a mechanism for the expedited review of proposed behavior treatment plans in emergent situations. "Expedited" means the plan is reviewed and approved in a short time frame such as 24 or 48 hours.
4. The Member CMHSP is responsible for reporting incidents of emergency physical interventions and/or law enforcement involvement for all consumers to the BTC for review. This data is reported in uniform regional format to the PIHP. The BTC is responsible for initiating quality improvement efforts if there is a continued pattern of physical interventions to manage challenging behaviors. The local BTC has oversight responsibility for revisiting the treatment plan and if appropriate, modifying accordingly. Additionally, a quarterly report from the BTC will be reviewed according to the Member CMHSP Quality Improvement Plan. At a minimum, the quarterly report will be reviewed during regularly scheduled BTC meetings.
5. The BTC is responsible for the evaluation of the effectiveness of the behavior plans by stakeholders including the guardians, family members and staff. This evaluation will occur as determined by the BTC and at a minimum every other year. Survey results will be submitted to NorthCare.