

Community Mental Health Partnership of Southeastern Michigan/PIHP	<i>Policy and Procedure Training Policy</i>
Committee/Department: Compliance/Network Management	Local Policy Number (if used)
Implementation Date 10/24/2023	Regional Approval Date 09/27/2023

Reviewed by:	Recommendation Date:
ROC	08/09/2023
CMH Board:	Approval Date:
Lenawee	08/31/2023
Livingston	08/29/2023
Monroe	09/27/2023
Washtenaw	08/25/2023

I. PURPOSE

To ensure providers within the region meet training requirements in accordance with all regulatory entities. that all the necessary training resources based on functions and responsibilities are made available in order to provide quality service to consumers/individuals served in accord with all regulatory bodies.

II. REVISION HISTORY

DATE	MODIFICATION
01-28-2011	
09/27/2023	Updated to address all provider types

III. APPLICATION

This policy applies to the individuals or groups identified with a checkmark in the table below.

<input checked="" type="checkbox"/> CMHPSM PIHP Staff, Board Members, Interns & Volunteers
<input checked="" type="checkbox"/> Regional Partner CMHSP Staff, Board Members, Interns & Volunteers
Service Providers of the CMHPSM and/or Regional CMHSP Partners:
<input checked="" type="checkbox"/> Mental Health / Intellectual or Developmental Disability Service Providers
<input checked="" type="checkbox"/> SUD Treatment Providers <input type="checkbox"/> SUD Prevention Providers
<input type="checkbox"/> Other as listed:

IV. POLICY

The CMHPSM, CMHPSM CMHSP partners, and all sub contractual providers shall ensure that staff meet training requirements relevant to their provider qualifications and job functions. It is the policy of the Community Mental Health Partnership of Southeastern Michigan (CMHPSM) to have training resources available in order for providers and staff to meet regional agreements and state and federal regulatory, contractual and accreditation requirements.

V. DEFINITIONS

Employer of Record: the individual in self-directed services who is the legal employer. An individual who is self-directing will be considered the employer of record or a managing employer unless the individual has a guardian, in which case the guardian is considered the employer of record.

Qualified Provider: A qualified provider is an individual or agency that meets the federal and state requirements in their contract to provide mental health services and supports.

Responsible Entity: Any organization or agency within or in a contractual relationship with the CMHPSM or CMHSP, that directly hires staff or independent practitioner.

Self-Direction or Self Directed Services: Self-direction is an alternative method for obtaining supports and services. It is the act of selecting, directing and managing one's services and supports, including the hiring and management of staff to provide their services. Individuals who self-direct their services are able to decide how to spend their CMH services budget with support, as desired.

VI. STANDARDS

- A. The CMHPSM shall have consistent guidelines that the PIHP and each CMHSP will use for the content, implementation and tracking of training for their staff, volunteers, students and board members.
- B. Where applicable, more than one version of each training topic may be developed to meet the needs of different staff groups, e.g. administrative vs. clinical staff.
- C. Where possible or available, responsible entities will use the training resources provided by the CMHPSM or vetted trainings in the state Improving MI Practices platform ([link](#)).
- D. Entities that develop local trainings will ensure they meet the PIHP, state and federal requirements, and complete the vetting process as outlined in this policy if a current vetted training program does not currently exist for the local training.
- E. Responsible entities will ensure local trainings meet state requirements by following either of the following procedures:
 - a. Use a training on the state Improving MI Practices platform that has been vetted by the MI Statewide Training Guidelines Workgroup (STGW). [link](#)
 - b. Submit the training to the regional entity with which they contract, to request review and approval of the use of the training to meet the requirements of this policy.
- F. Staff, volunteers, students and board members may attend trainings offered by any CMHPSM regional partner in order to meet time frame requirements.
- G. The CMHSPs and PIHP may adjust the timeframes for the initial training to be more conservative/earlier than but shall not exceed the required timeframe.
- H. The entity responsible to ensure their staff are trained shall be also responsible to ensure they are following the current training requirements.

- I. The CMHPSM Clinical Practice Committee shall oversee this policy, including holding the authority to delegate aspects of training requirements to relevant regional committees or workgroup as applicable to ensure content experts are used in training development and/or monitoring.
- J. Trainers of in-person trainings are responsible for distributing and collecting course evaluations and using that data for performance improvement purposes.
- K. Each responsible entity will track the implementation of required trainings for all staff, volunteers, students in the following areas:
 - Completion of initial training per time frames.
 - Completion of refresher training per time frames.
 - Completion of any attestations or quizzes and scores
 - Sign off of supervisor or trainer in cases where in-person/virtual training is provided by a trainer.
 - Identification of individual staff that are out of compliance, and supervisory oversight.
- L. Each responsible entity that has a board of directors will develop a plan to ensure that all board members have received the appropriate trainings, according to local practice.
- M. Wherever possible CMHSPM and the CMHSPs will accept reciprocity of completed trainings that have been vetted and approved by the MDHHS Statewide Training Guidelines Work-group (STGW).

Training Requirements for CMHSP Directly Hired Staff

- N. All CMHSPs and CMHSP staff shall ensure they meet the training requirements for their specific professional licensure or credentials where applicable.
- O. Case managers working with consumers/individuals served/ with an intellectual/developmental disability must be a Qualified Intellectual Disability Professional (QDIP) or supervised by a supervisor with a QDIP if the case manager does not yet meet QDIP qualifications.
- P. Case managers working with consumers/individuals served with a mental illness diagnosis must be a Qualified Mental Health Professional (QMHP) or supervised by a supervisor with a QMHP if the case manager does not yet meet QMHP qualifications.
- Q. All CMHSPs shall ensure staff are trained and documentation of training is maintained as in order to meet credentialing and recredentialing requirements. Below is the minimum basic required training for CMHSP staff providing clinical services. Specific programs, services, or service types may require additional training:

Training	Applies To:	Initial Training Timeframes	Refresher Timeframes
Recipient Rights	All staff Executive team Student Interns Volunteers	30 days from hire	Every 2 years
Person Centered Planning (PCP) 1.training for facilitators or 2.training for non-facilitators	All staff Executive team Student Interns Volunteers	30 days from hire	Annually for clinical staff or facilitators. Other staff at the discretion of the CMHSP

Due Process (Grievance & Appeals) 1. Training for clinical staff or 2. Training for non – clinical staff	All staff Executive team Student Interns Volunteers	90 days from hire	2 years for clinical staff. Other staff at the discretion of the CMHSP
Cultural Competency	All staff Executive team Student Interns Volunteers	90 days from hire	As needed (based on job performance /supervisor determination)
Limited English Proficiency	All staff Executive team Student Interns Volunteers	90 days from hire	As needed (based on job performance /supervisor determination)
Comprehensive Health & Safety (includes universal precautions/blood borne pathogens, infection control, workplace safety)	All staff Executive team Student Interns Volunteers	60 days from hire	Annually
Confidentiality (HIPAA Privacy and Security, 42CFR Part 2)	All staff Executive team Student Interns Volunteers	30 days from hire	Annually
Corporate Compliance (including Medicaid Fraud Abuse and Waster)	All staff Executive team Student Interns Volunteers	90 days from hire	Annually
Ethics	All staff Executive team	1 year	As needed (based on job performance /supervisor determination)
Customer Service/Anti Stigma	Customer Services Staff Recommended for all staff	1 year	Yearly for Customer Services staff
PI– Quality Improvement / Learning Organization	All staff Executive team	90 days from hire	As needed (based on job performance /supervisor determination)

Population/Program Specific Required training for CMHSP Staff

Training	Applies To:	Initial Training Timeframes	Refresher Timeframes
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Child/Adolescent SED Specific Training	Clinical staff working w/children, in SED-W program	24 Hours - Annually	Annually
Co-Occurring Disorders	Clinical staff	1 year	As needed (based on job performance /supervisor determination)
Parent Management Training – Oregon	Staff working with PMTO children and families	As needed	As needed (based on job performance /supervisor determination)
Multi-Family Group / Family Psycho education	Staff working with Psycho Ed family groups	As needed	2 years
Assertive Community Treatment (ACT)	ACT staff	When hired?	As needed (based on job performance /supervisor determination)
Supported Employment	Job Coaches	When hired?	As needed (based on job performance /supervisor determination)
Peer Supports Certificate Training	Peer Support Staff	When hired?	As needed (based on job performance /supervisor determination)
Children’s Waiver Program Category of Care Training (CWP only)	Staff working within the CWP	Prior to completing CWP COC assessments without supervisor with CWP COC training	Annually? One time?

Training Requirements for SUD Treatment Providers

- R. All SUD staff shall ensure they meet the training requirements for their specific professional licensure or credentials.
- S. All SUD providers shall ensure staff are trained and documentation of training is maintained as in order to meet credentialing and recredentialing requirements.

Training Requirement	Initial Requirements	Renewal Requirements	Resource
SUD Recipient Rights	Prior to providing service	Annually	https://www.improvingmipractices.org/ under Focus Areas, Substance Use Disorders (SUD), Recipient Rights –

			SA
Medicaid Integrity/ Corporate Compliance	Within 90 days of hire	Every 2 years	https://www.improvingmipractices.org/ under Focus Areas, Workplace Essentials (WE)
Confidentiality (HIPAA Privacy and Security, 42CFR Part 2)	Within 30 days of hire	Annually	
Cultural Competency	Within 90 days of hire	Every 2 years	https://www.improvingmipractices.org/ under Focus Areas, Workplace Essentials (WE)
Limited English Proficiency	Within 90 days of hire	Every 2 years	https://www.improvingmipractices.org/ under Focus Areas, Workplace Essentials (WE)
Level 1 Communicable Diseases	Prior to providing service	Annually	https://www.improvingmipractices.org/ under Focus Areas, Substance Use Disorders (SUD)
Grievances and Appeals <i>See Training 1 and training 2 descriptions on website</i>	Within 90 days of hire	Every 2 years	CMHPSM website (See below) https://www.cmhpsm.org/sudtraining PowerPoint presentation and Attestation
Fetal Alcohol Syndrome Screening – <i>Women’s Specialty Services (WSS) Providers Only</i>	Within 90 days of hire	As needed	<i>There is not a state specific training for this. Provider are expected to train their staff on screening process and use of the screening tool, to ensure they know how to complete an FASD Prescreen, and document that staff were trained. For more information see:</i> https://www.michigan.gov/documents/mdch/FASD_Prescreen_form_Feb-10_314457_7.pdf https://www.michigan.gov/mdhhs/0,5885,7-339-73971_4911_4912_21220---,00.html

Behavioral Health CMHSP Contractual Providers

This includes direct care providers working as individuals or for an organization, or for consumers/individuals served with self-directed arrangements.

T. All staff shall:

- Be at least 18 years of age
- Able to prevent transmission of communicable disease
- Able to communicate effectively to follow IPOS requirements, beneficiary-specific emergency procedures, and to report on activities performed
- Be in good standing with the law (i.e., not a fugitive from justice, a convicted felon who is either under jurisdiction or whose felony relates to the kind of duty to be performed, or an illegal alien)

- U. All contractual providers or employers of record of self-directed staff shall ensure they meet the training requirements for their specific professional licensure or credentials where applicable.
- V. All contractual providers shall ensure staff are trained and documentation of training is maintained as in order to meet credentialing and recredentialing requirements.
- W. All employers of record of self-directed staff shall ensure staff are trained and documentation of training is maintained.

Staff Training Requirements R = Required IR = Individually Required by consumer/individual's IPOS HR = Highly Recommended	Administrative & Non-Service Staff	Aide Level Staff: CLS, Respite, Skill Building & Sup. Emp.	Aide Level: Licensed Residential	ABA Behavior Technician Staff	Clubhouse and Drop-In Staff	Licensed Clinical Practitioners*	Initial Requirement	Renewal of Requirement
Basic First-Aid & MDHHS Approved In-Person CPR		R	R	R	R	R	Prior to Service Delivery	Per Training Body
Medication Administration Initial		IR	R	IR			Prior to Service Delivery	N/A, unless lapsed
Medication Administration Refresher		IR	R	IR			Prior to Service Delivery	Annual
Individualized Training on each Consumer/Individual's CMH IPOS		R	R	R		R	Prior to Service Delivery	Upon every new or revised IPOS
Universal Precautions / Blood-borne Infectious Disease Training		R	R	R	R	R	Prior to Service Delivery	Annual
Person Centered Planning	R	R	R	R	R	R	Within 30 days of hire	Annual
Recipient Rights/Confidentiality Day One Orientation	R	R	R	R	R	R	Within 30 days of hire & prior to service delivery.	N/A, eligible only once
Recipient Rights/Confidentiality	R	R	R	R	R	R	Within 90 days of hire (in-person)	Annual (online or in-person)
Registered Behavior Technician Task List				R			Prior to Service Delivery	N/A, unless notified
LEP Training	R	R	R	R	R	R	Within 60 days of hire	Biennial (Every 2 Years)
Cultural Competency	R	R	R	R	R	R	Within 60 days of hire	Biennial (Every 2 Years)
Due Process, Grievance and Appeals	R	R	R	R	R	R	Within 90 days of hire	Biennial (Every 2 Years)
Medicaid Integrity (HIPAA,HITECH)	R	R	R	R	R	R	Within 90 days of hire	N/A, unless notified
Non-aversive techniques training documented in Behavior Treatment Plan		IR	IR	IR	IR	IR	Prior to Service Delivery	Per Training Body
Licensed Residential Training Bundle: 1. Working with People with DD/MI 2. Role of Direct Care Workers 3. Emergency Preparedness 4. Nutrition 5. Health			R				Within 180 days of hire	N/A, required only once
Staff Qualification Requirements R = Required IR = Individually Required by consumer/individual's IPOS HR = Highly Recommended	Administrative & Non-Service Staff	Aide Level Staff: CLS, Respite, Skill Building & Sup. Emp.	Aide Level: Licensed Residential	ABA Behavior Technician Staff	Clubhouse and Drop-In Staff	Licensed Clinical Practitioners*	Initial Requirement	Renewal of Requirement
Staff is 18 years of age or older		R	R	R	R	R	Prior to Hire	N/A

Staff Training Requirements R = Required IR = Individually Required by consumer/individual's IPOS HR = Highly Recommended	Administrative & Non-Service Staff	Aide Level Staff: CLS, Respite, Skill Building & Sup. Emp.	Aide Level: Licensed Residential	ABA Behavior Technician Staff	Clubhouse and Drop-In Staff	Licensed Clinical Practitioners*	Initial Requirement Date	Renewal of Requirement
Criminal Background Check	HR	R	R	R	R	R	Prior to Hire Date	Annual
Recipient Rights Background Check	R	R	R	R	R	R	Prior to Hire Date	N/A
Motor Vehicle Driving Record Check (If transporting CMH consumers/individual(s) served)	IR	IR	IR	IR	IR	IR	Prior to Service Delivery	Annual
Additional SED Waiver Covered Services Staff Requirement: Tuberculosis Test results documenting staff is clear from TB.		R	R	R		R	Prior to Service Delivery	Biennial (Every 2 Years)
Additional SED Waiver Covered Services Staff Requirement: Child & Adolescent Mental Health Training is required for all LIP's who work with children w/serious emotional disturbance: Content must focus on the identification, diagnosis, and treatment of mental health issues specific to children. May include seminars, conferences, in-house trainings, independent study/reading. Verification should include training dates, descriptions, and hours attended. Trainings should be approved by supervising staff.				R				Annually (24 Hour Annual Requirement)
Additional Habilitation Services Waiver (HSW) Perform emergency procedures as evidenced by completion of emergency procedures training course, or other method determined by the PIHP to demonstrate competence.		R	R					

VII. REFERENCES

Reference:	Check if applies:	Standard Numbers:
42 CFR Parts 400 et al. (Balanced Budget Act)	X	
45 CFR Parts 160 & 164 (HIPAA)	X	

Michigan Mental Health Code Act 258 of 1974	X	
Joint Commission- Behavioral Health Standards	X	
MDHHS Medicaid Contract	X	
Michigan Medicaid Provider Manual	X	
MDHHS Behavioral Health Code Charts and Provider Qualifications	X	
Public Health Act 125	X	

VIII. PROCEDURES

None