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### **Policy**

It is the policy of Bay-Arenac Behavioral Health Authority (BABHA) to establish minimum training requirements and to provide ongoing education specific to areas of responsibility to promote skill development, support desired competencies and comply with regulatory requirements.

### **Purpose**

This policy and procedure was established to define minimum training requirements for people engaged by BABHA to perform duties or provide services.

### **Education Applies to:**

☑ All BABHA Staff
Selected BABHA Staff, as follows:
All Contracted Providers: Policy Only Policy and Procedure
Selected Contracted Providers, as follows: Licensed Independent Practitioners, , Specialized
Residential Providers, and others as identified in BABH Provider Training Requirement grids.
Policy Only Policy and Procedure
Other:

### **Definitions**

Clinical Staff: Staff who work directly with people who receive clinical services. Includes direct support staff.

Non-clinical Staff: Staff who do not work directly with people who receive clinical services.

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#### **Procedure**

## Minimum Training Requirements for BABHA Staff

- 1. <u>All BABHA Staff</u> will be trained in the following core areas:
  - A. The Philosophical Framework, which provides overviews of the key concepts and principles under which we operate, including but not limited to, the following:

Legend: I=Initial only A=Initial and Annual 2=Initial & every 2 years

- Mission, vision, and values (I)
- Review of organizational chart (I)
- Review of regional affiliation map and collaborative values (I)
- Cultural Competence/Limited English Proficiency (LEP) (A)
- Customer Service and Client as Customer (A)
- Person/Family-Centered Planning overview (A)
- Self-Determination (A)
- Health Integration (I)
- Health Care Coordination (I)
- Inclusion (I)
- Jail Diversion (I all staff; A clinical staff)
- Recovery Oriented System of Care (A)
- Supported Employment (I)
- Housing (I)
- School to Community Transition (I)
- Evidence Based Practice Expectations (overview training):
  - Family Psycho-education (I)
  - Parent Management Training (PMTO) (I)
  - Co-occurring Disorders (COD) (A)
  - Integrated Dual Diagnosis Treatment (IDDT) (I all staff; A clinical staff)
  - Trauma-Informed Care (A)

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- Trauma-Focused Cognitive Behavioral Therapy (CBT) (I)
- Assertive Community Treatment (ACT) (I)
- Motivational Interviewing (I)
- B. Appeals and Grievance (A)
- C. Corporate Compliance, inclusive of HIPAA privacy/security requirements (A)
- D. Ethics (A)
- E. Effective Workplace Communication (A)
- F. Performance Improvement (A)
- G. Information Systems/Security Awareness (A)
- H. Recipient Rights (A)
- I. Emergency Preparedness and Safety (Environment of Care) Procedures (A)
- J. Accommodations for Services Americans with Disabilities (ADA) Act (I)
- K. Bloodborne Pathogens, inclusive of Hepatitis B and Tuberculosis (A)
- L. Emergency Services Overview (I)
- M. Infection Control (A)
- N. Workplace Violence (I)
- O. Workplace Harassment (A)
- P. Ergonomics (A)
- Q. Anti-Stigma (A)
- R. Suicide Risk Assessment and Prevention (I all staff; A clinical staff)
- S. Overview of Mental Illness/Developmental Disabilities (non-clinical and direct care staff) (I non-clinical and direct care staff)
- T. Active Shooter (A)
- U. Safety in the Community (I all staff; A clinical and direct care staff)
- V. Working Effectively with Gender and Sexual Minorities (I)
- W. Implicit Bias (A)
- X. COVID-19 (A)

Supervisory staff will provide training for individual employees regarding department or program specific procedures and protocols. Site Safety representatives at each program/department will train individual employees regarding safety and emergency procedures

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for their respective physical plants (See BABHA Agency Manual, Policies and Procedures, C07-S03-T02 - Orientation).

- 2. Clinical Staff will receive mandatory additional training in the following areas:
  - A. Person-Centered Planning techniques (A)
  - B. Consumer appeal and grievance provisions (A)
  - C. Case management/supports coordination core elements, specific to the population served (A)
  - D. Assessment and Management of Pain (A)
  - E. Emotional and Psychological Trauma (Trauma Informed Care) (A)
  - F. Advance Directives (A)
  - G. Crisis Prevention/Non-Violent Crisis Intervention (CPI) (excluding advanced physical components) initial and every 3 years or as needed for clinical and select non-clinical staff (required annually for Horizon Home and North Bay staff). A 30-day grace period past the due date applies.
  - H. Crisis Prevention/Non-Violent Crisis Intervention including advanced Physical Components (CPI) (A Horizon Home staff
  - I. Habilitation Supports Waiver (HSW) (A HSW clinical staff)
  - J. Supports Intensity Scale (I adult DD clinical staff)
  - K. Best Practices in Suicide Screening and Assessment (A ES/Access staff)

Clinical staff working with children will complete a minimum of twenty-four (24) clock hours of continuing education on issues specific to children in a calendar year

Clinical staff working in the Assertive Community Treatment (ACT) program will complete ongoing training related to the ACT model and associated intervention techniques. This includes all positions within ACT, such as peer support specialists, nurses, psychiatrist, etc.

Clinical staff (including all clinicians and clinical supervisors, nurses, all Access Center, Horizon Home and North Bay staff providing direct support and peer specialists) will

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complete training in suicide assessment and prevention each calendar year. This training will include online education during Staff Development Days.

Case management staff complete ongoing training in case management interventions, program requirements, and community resources.

Staff training regarding advanced physical intervention skills is specific to the person being served. Staff may need to be trained in these skills if there is a reasonable expectation that they may need to use them to keep people safe. These skills are to be used as a last resort. Staff should respond using the least restrictive response and always use the skills they have been trained to use.

All clinical staff, as well as selected non-clinical staff, will receive training in disengagement and the level 1 and 2 standing hold and transport skills to protect themselves and others. Staff should respond within the scope of their training.

#### 3. Selected Non-Clinical Employees

Employees who routinely have contact with persons served may be required to complete the Crisis Prevention/Non-Violent Crisis Intervention course (CPI Version). Recertification updates are required every 3 years or as needed. A 30-day grace period past the due date applies. Selection of non-clinical employees is at the discretion of department heads.

#### 4. Category A Employees

Employees performing duties that involve exposure or reasonably anticipated exposure to blood or other potentially infectious materials (defined as Category A Employees - see BABHA Policy and Procedure C14-S01-T01) will receive enhanced training regarding Tuberculosis and Bloodborne Pathogens. CPR and First Aid certifications and recertifications are also required; however, BABHA nursing staff are exempted from the requirement for First Aid certification. The MIOSHA Part 554 (Bloodborne Infectious

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Diseases) standards will be reviewed with Category A employees within 10 business days of the employee's first working day.

- 5. <u>Horizon Home and North Bay Staff</u> will receive training in the Group Home Curriculum (GHC) and meet all minimum training requirements per the licensing rules for Adult Foster Care and Specialized Residential Group Homes. The minimum training requirements are:
  - A. First Aid
  - B. CPR
  - C. Personal Care Supervision and Protection
  - D. Recipient Rights
  - E. Safety and Fire Prevention
  - F. Prevention and Containment of Communicable Diseases
  - G. Working with People in a Culture of Gentleness
  - Horizon Home staff shall not work alone until trained in the following: Recipient Rights, Basic Health, Basic Medications and medication administration check-offs, CPR/First Aid, CPI Crisis Prevention/Non-Violent Crisis Intervention, Cultural Competence/LEP, Introduction to Residential Services, Environmental Emergencies/Fire Safety, Working with People in a Culture of Gentleness, the individual plan of service (IPOS), homespecific emergency procedures and are current with all updates as applicable. New Employee Orientation must be completed within thirty calendar days of hire date. Additional on-line courses must be completed within sixty calendar days of hire date. On their first day of employment, all staff will receive the Mandatory New Employee Training Checklist, specific to their category of employment. This Checklist will provide information pertaining to training that must be completed before providing care and treatment services as well as information on mandatory and ongoing training requirements.
- 6. <u>Staff with licensure, certification and/or registration</u> required for their job at BABHA are required to maintain such credentials, including obtaining any continuing education hours

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(CEs) that may be required. BABHA will obtain CE contact hour approval for BABHA training offerings to the extent feasible and appropriate.

#### Failure to Comply

Failure to meet the mandatory training requirements established herein, or as directed by the supervisor, may result in disciplinary action. The employee will be sent one reminder notice. If the employee fails to respond (complete the required training) within the time frame set forth, (unless unable to do so for reasons outside of the employee's control) the employee may receive disciplinary action. Step increases shall be withheld until such time as the employee completes his/her required training. Earned time off (ETO) will not be approved for employees with outstanding training. Previously scheduled and approved leave time may be cancelled by the supervisor until such time as the employee complies with mandatory training requirements.

#### Supervisor Responsibility

Supervisors are responsible for reviewing employee training records to ensure that new employee orientation training and additional mandatory trainings have been completed. Verification of these trainings is recorded on the Mandatory New Employee Training Checklist (see BABHA, Agency Manual, Policies and Procedures, C07-S03-T02 - Orientation) with signed copies forwarded to the Human Resources Department and the Staff Development Center within 95 calendar days of the employee's orientation date. Online training is tracked via the supervisor reports on the learning management system. Completion of additional mandatory trainings are verified at the time of the employee's annual evaluation and documented on the Employee Professional Development Plan form.

### **Additional Training**

Staff will be offered and/or required to take training in the following areas based upon their skill set, the competency requirements for their position, and the availability of training:

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- 1. Desktop and network software applications, including but not limited to Outlook, electronic health records, electronic prescribing systems, electronic billing systems, etc.
- 2. Customer service
- 3. The Crisis Prevention/Non-Violent Crisis Intervention course (CPI). Any employee may request this training, but it is contingent upon their direct supervisor's approval and the availability of training seats.

In addition, staff will be educated regarding new and revised BABHA policies, procedures, and plans as the documents are published, subsequent to the Chief Executive Officer's and/or Board's approval as appropriate.

#### **Provider Network Training**

Training of contracted provider employees is the responsibility of their employer. BABHA expectations for such training are defined in the Provider Training Requirement tables. BABHA may offer specialized training to contracted provider organizations that is necessary or required for participation in the public mental health service delivery system or is specific to BABHA policies and procedures.

Residential providers are expected to meet staff educational requirements defined by the Michigan Department of Health and Human Services through its published GHC (for more information see BABHA Agency Manual Policy and Procedure C07-S03-T04 - Group Home Curriculum). Working with People in a Culture of Gentleness training is required.

Licensed independent practitioners (LIP's), casual employees, temporary employees, temporary personnel, and contractors/consultants, will be provided with orientation covering safety, privacy/security, recipient rights and similar safety/risk issues relevant to their BABHA work location and assignments (see BABHA Agency Manual policy and procedure C07-S03-T02 Orientation). Such individuals are expected to be qualified and competent to perform the tasks for which they have been engaged, prior to providing services for BABHA.

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The provider network will be informed of the BABHA policies, procedures, and plans which they must comply with through the issuance of the BABHA Provider Manual and communications from the BABHA Contract Management staff.

#### Other

The acceptability of equivalent training received prior to employment by or contracting with BABHA, including grandfathering of existing BABHA staff or contractors regarding specific training requirements, will be determined on a case-by-case basis. Such decisions will be made by the relevant program manager, department director, or the Staff Development Center, depending on the training topic and who typically conducts such training.

The minimum training required by BABHA will be offered through agency-wide trainings and department or program level trainings. In some cases, the requirements will be met through clinical supervision or by attendance at external conferences, seminars, and workshops.

The BABHA Staff Development Training Plan defines educational priorities and outlines training strategies for achieving training objectives.

### **Attachments**

N/A

#### **Related Forms**

Mandatory New Employee Training Checklist Nurses - Category A (Staff Development Resources on Intranet)

Mandatory New Employee Training Checklist - Horizon Home/North Bay - Category A (Staff Development Resources on Intranet)

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Mandatory New Employee Training Checklist - Category B (Staff Development Resources on Intranet)

Mandatory Training Checklist – Licensed Independent Practitioners [Prescribers/Psychologists] (Staff Development Resources on Intranet)

Mandatory Training Checklist – Temporary Non-Clinical Staff (Staff Development Resources on Intranet)

### **Related Materials**

N/A

### References and/or Legal Authority

Michigan Mental Health Code

Balanced Budget Act of 1997

MIOSHA Standard 554, Rule 16

Michigan Department of Licensing and Regulatory Affairs

Michigan Department of Health and Human Services Best Practice Guideline for Person Centered Planning

Michigan Department of Health and Human Services Medicaid Provider Manual

Mid-State Health Network CMHSP Minimum Training Requirements Table (Exhibit E)

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SUBMISSION FORM							
AUTHOR/ REVIEWER	APPROVING BODY/COMMITTEE/ SUPERVISOR	APPROVAL/REVIEW DATE	ACTION (Deletion, New, No Changes, Replacement or Revision)	REASON FOR ACTION  - If replacement list policy to be replaced			
M. Wolber	J. Pinter	02/06/08	Revision	SPMI & DD classes added to list of minimum training requirements			
M. Wolber	J. Pinter	11/20/08	Revision	Revisions made to incorporate Horizon Home information and update training requirements			
R. Finta	J. Pinter	01/06/09	Revision	Revised to include necessary documentation of Horizon Home Staff Approved for Work form			
Marlene Wolber	Janis Pinter	4/2709	Revision	Revised to update training requirements and include Philosophical Framework in minimum training requirements			
G. Wise/M. Wolber	Janis Pinter	12/17/09	Revision	Updated to include new requirements for CPI trg. and Mandatory New Emp. Checklists			
G. Wise	J. Pinter	05/26/10	Revision	Updated to include suicide assessment/prevention training and training on electronic systems			
G. Wise	J. Pinter	08/16/10	Revision	. Updated to specify HH training requirements and remove accommodations			
M Wolber/M. Bartlett	J. Pinter	08/30/10	Revision	Updated to include 10 day review requirement for designated Category A Employees			
P. Carlson	J. Pinter/R. Smith	02/23/11	Revision	Updated to specify that Horizon Home staff must complete all training before working a shift			
M. Wolber/M. Bartlett	R. Smith	06/08/11	Revision	Updated to exclude BABH nurses from First Aid training requirement for Category A staff			
M. Bartlett	MMPRC	08/16/11	Revision	Updated to include a designee to train suicide prevention			
L. Zagorski	R. Smith	08/01/13	Revision	Updated to include Anti-Stigma training and Culture of Gentleness			
R. Smith, T. Dilley	R. Smith	05/11/16	No Changes	Triennial review – 5/11/16			

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Topic: 1	Minimum Training Requirements					
	<b>Supersedes Date:</b>	Approval Date:				
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	Proc: 2-5-2020, 7-22-19, 3-	Proc: 3-23-2022				
	4-19, 5-7-18, 7-3-17, 5-11-16,		Board Chairperson Signature			
	8-1-13, 8-16-11,6-8-11, 2-23-					
	11, 8-30-10, 5-26-10, 8-16-					
	10, 8-26-09, 4-27-09, 1-23-					
	09, 1-06-09, 11-20-08, 2-6-					
	08, 6-19-07, 5-18-06, 8-17-		Chief Executive Officer Signature			
	04, 8-21-03					
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T. Dilley	R. Smith	07/13/17	Revision	Updated to current practice – changed the naming convention for CPI, added Gentle Teaching as a required training and changed the requirement for HH staff from "fully trained" before working alone to the requirement of meeting minimum training requirements before working alone. – 11/8/16 & 7/13/17
T. Dilley	R. Smith	05/17/18	Revision	Added Mid-State Health Network Training Requirements Table (Exhibit E) as a reference. Added additional required training topics. Corrected the name of CPI. 5/7/18
T. Dilley	R. Smith	3-14-19	Revision	Updated language related to CPI and corrected information related to physical management and behavior treatment plans
T. Dilley	R. Smith	7/22/19	Tri-ennial review	Updated to current practice. Added frequency requirements.
T. Dilley	R. Smith	2/5/2020	Revision	Changed frequency requirement for CPI from Initial and every 2 years to Initial and every 3 years for professional clinical and non-clinical staff. Revised HH minimum training to work alone definition.
T. Dilley	J. Lasceski	3/23/22	Revision	Triennial Review – Updated to current practice