

**ATTACHMENT 'X'**

**MSHN Regional Minimum CMHSP/SUD Training Requirements**

Source Document Key: 1. <a href="#">Balanced Budget Act</a> 2. <a href="#">Health Insurance Portability and Accountability Act (HIPAA)</a> 3. <a href="#">Deficit Reduction Act</a> 4. <a href="#">Michigan Department of Health &amp; Human Services (MDHHS)</a> 5. <a href="#">Michigan Administrative Code</a> 6. <a href="#">Michigan Mental Health Code</a> 7. <a href="#">Occupational Safety &amp; Health Administration (OSHA)</a> 8. <a href="#">Code of Federal Regulations</a> 9. <a href="#">MSHN SUD Provider Manual</a>	CMH-employed Administration Group	Crisis Intervention/ Access	Other Professional Service (OT,PT, Dietary, Psychological Testing)	Medical Professional	Residential Supervisors/QI/Licensee	AFC Licensed Direct Care Staff	Aide level staff providing service in the community or in unlicensed settings	Aide Level staff providing services in Self-Directed arrangement-unlicensed setting	Students/ Volunteers/ Temporary workers	Primary Service Providers <small>(Case Managers, Supports Coordination, Home Based Staff, MST, Wraparound)</small>	Individual/ Group Therapist	Clubhouse/ Drop-In/ Peer Supports	CMH-employed Transporters	ACT	Autism Service Providers		Substance Use Disorder					
															Behavior Technicians	BCABA BCBA LLP QBHP QLP	Treatment	Prevention	Recovery			
																				Requirements	Source	Renewal Key: 1 = Initially A = Initially & Annually 2 = Initially & every 2 years
Assertive Community Treatment (ACT)	180 days of hire for work in ACT	4												I								
Advance Directives	90 days of hire	1, 4		I		I								I						I		
<a href="#">Appeals &amp; Grievances</a>	90 days of hire	1, 4, 6	A	A	A	A	A			A	A	A	A	I	A			A	A			
Corporate & Regulatory Compliance	90 days of hire	1, 3	A	A	A	A	A	A	A		A	A	A	A	A	A	A	A	A	A	A	
CPR & First Aid	30 days of hire	4, 5, 8						2*	2 - first aid only*	2 - first aid only*							first aid only					
Cultural Competency & Diversity	1 year of hire	4	A	A	A	A	A	A	A			A	A	A	A	A	A	A	A	A	A	
DECA	Prior to conducting assessments	4		2										2	2							
Environmental Safety/Emergency Procedures	1 year of hire	4, 5, 6	I	I	I	I	I	I****	I****	I****	I	I	I	I	I	I	I	I	I	I	I	
Health Management - (Blood Borne Pathogens/Infection Control)	30 days of hire	4, 5, 6, 7	I	A	A	A	A	A	A	I	A	A	A	A	A	A	A	A	A	A**	A**	A**
HIPAA Privacy & Security	30 days of hire	2, 4, 5, 8	A	A	A	A	A	A	A		A	A	A	A	A	A	A	A	A	A	A	
IDDT/COD	90 days of hire	4		I (COD)								I (COD)	I (COD)			A- if provides IDDT						
Limited English Proficiency (LEP)	90 days of hire	1, 4	A	A	A	A	A	A	A		A	A	A	A	A	A	A	A	A	A	A	
Medication Administration	90 days of hire	5						I	I - if passing meds													
MichiCANS	Prior to conducting assessments	4		A^								A	A									
Non-Physical Intervention (Verbal De-escalation)	90 days of hire	8		I				I	I			I	I	I		I	I	I				
Person-Centered Planning	30 days of hire	4, 6, 8	I	A	A	A	A	A	A		A	A	A	A	I	A	A	A				
Recipient Rights	30 days of hire	4, 5, 8	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	
Self Determination	90 days of hire	4		A								A	A									
Trauma Informed Care	90 days of hire	4	I	I	I	I	I	I	I		I	I	I	I	I	I	I	I	I		I	
LOCUS (MI Adults)	90 days of hire	4		I^								I	I			I						
SUD Standardized Tool (GAIN I-Core or ASAM)	120 days of hire	4																		I***		

\*\* SUD training to include Prevention of Communicable Diseases

\*\*\* Applies only to clinicians conducting assessments (H0001); Standardized tool to be determined and announced.

\*\*\*\*Staff providing services for individuals receiving waiver services (1915i. CWP, HSW, SEDW) must have initial and ongoing ES/EP training every three years.

^Crisis staff required to have training if providing Access Services, Intake Services, Ongoing care and assessment, Wraparound or person-centered planning.

→ Customer Service staff must receive training as defined in MDHHS PIHP Customer Service Standards. SUD Treatment must complete training for BSAAS TP#5 (Welcoming)

→ Additional training requirements may not be included on this training grid such as program specific training, service specific training, and position qualification related training as outlined in the MI Medicaid Provider Manual, MDHHS BH Code chart and Qualifications chart, and MDHHS policies and procedures.

This is a set of MSHN minimum training requirements and is not all inclusive to each individual CMHSP/SUD Provider. Any county, accreditation, evidence-based practice, or CMHSP specific training will be additionally documented by each CMHSP in their respective subcontracts. Not all requirements for accredited services (by CARF, etc.) are indicated.