Title: Training Requirements for HBH Employees and Contract Providers Procedure

Prepared By: Executive Director

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Purpose:

To define the agency's training goals and the minimum training requirements for employees and contract providers.

Scope:

The procedure applies to all employees (including full-time and part-time employees), contract providers (including Administrative, Clinical, Residential, and Vocational contract providers), as well as volunteers, students, and/or interns of Huron Behavioral Health (HBH).

Information:

1. The HBH Human Resource (HR) Manager and other key staff provide initial orientation to new employees to familiarize them with HBH philosophies, objectives, programs, services, and populations served (see New Employee Orientation Procedure TR.2.02). As part of the orientation process, a training checklist (90-126) defines the new employee orientation and training requirements.

2. HBH makes a good faith effort to provide all employees and contract providers with the necessary training in order to perform their job duties and to meet contractual requirements, as applicable. On-going training is required to ensure that the employee and contract provider skills are renewed and maintained on an ongoing basis in order to provide the best possible care and outcomes for the consumer.

3. In accordance with the Mid-State Health Network (MSHN), who serves as the Pre-paid Inpatient Health Plan (PIHP) of which HBH is a member, responsibilities for staff training have been delegated to HBH. MSHN monitors HBH and other affiliate members for uniformity, reciprocity, and compliance to MSHN network training policies. MSHN establishes minimum training requirements. HBH may elect to require and conduct additional trainings for employees and contract providers as long as the minimum MSHN requirements are achieved.

4. HBH provides the opportunity for clinical employees to fulfill their continuing education requirements for the various professions via internal on-line courses and external conferences, workshops, etc. HBH employees (and some contract providers) have access to an on-line/internet training system (Relias), for clinical training courses as well as additional elective courses for personal and/or career enhancement. This allows employees (and some contract providers) to obtain their required trainings at their convenience and receive credit for the hours successfully completed.

5. In-service training for program-specific needs, such as Medicaid Provider Manual guidelines, monitoring, linking, advocacy, plan development, assessing, re-assessing, and monitoring consumers occurs during supervision and regular staff meetings. Additional trainings include mandated reporter training pursuant to relevant professional standards and as required by law, interventions that address socio-economic factors in service delivery, understanding bias and discrimination, basic health and medical needs of the population being served, proper documentation techniques. Staff also receive refresher trainings on the Electronic Medical Record (EMR) system, training in public assistance programs, eligibility requirements and benefits, as well as the available community resources. This training can occur at staff meetings, all-programs meetings, as well as specific trainings to align with Michigan Department of Health and Human Services (MDHHS) contractual requirements and in conjunction with other community service agency providers (see also Michigan Medicaid Provider Manual core elements).

6. HBH Supervisors review each of their employee's training records for compliance as part of the annual performance evaluation/appraisal process. During this process, areas of need are identified and addressed as performance goals for the employee, including any external training needed to enhance the employee's skills and job capabilities (see also "Employee Annual Evaluation Procedure" HR.2.05).

7. Training materials are developed annually (for the calendar year). Training materials are reviewed and updated on an annual basis and new trainings are developed as needed.

8. **There are no exceptions to mandatory trainings**. As circumstances, needs, services, governing body requirements, and/or legislative or contractual requirements are imposed, additional mandatory training

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requirements may be added at any time. Supervisors may also require additional trainings pertaining to specific program or service needs.

9. Supervisors should make every effort to have their employees utilize the on-line and in-house trainings to the maximum degree possible before seeking more expensive alternative (off-site) trainings. Occasionally internal or on-line training is not available to accommodate specific training needs, and trainings may then be sought outside of the agency with training credit obtained for that training.

10. Contract providers who do not meet the training requirements are required to complete a plan of correction.

Procedure:

A. Types of Required Educational Platforms:

HBH has identified/determined two (2) types of educational platforms/opportunities for employees and contract providers which are categorized as follows:

1. **Training Courses/Classes** – these generally focus on a specific "Training Topic" as defined by the topics in the "Training Topic" column in the table below (see section "B"). Most courses/classes have a test at the end of the course to assure competency after the course has been completed.

2. **Policy/Informational Updates** – these typically focus on new and revised policies and procedures which define HBH's organizational philosophies, internal systems, and operational requirements, etc. (see section "C" below). These are generally assigned to employees and contract providers through HBH's on-line Relias system. There is typically a one-question attestation requirement after reading/reviewing the document. Policy/Informational topics may include, but are not limited to:

   - Recipient Rights
   - Corporate Compliance
   - Environmental/Safety/Emergency procedures
   - Quality/Performance Improvement
   - Service Delivery and Access to Services
   - Human Resource updates
   - Finance requirements

B. Courses/Classes:

1. Training courses/classes are generally assigned in accordance with the knowledge and skill-based needs of a particular category of work and/or their required job activities. Topics are assigned to provide training in the areas that are the most valuable/pertinent to each specific category. For example, individuals who work directly with consumers may be required to have different trainings from an individual who never interacts with consumers (such as a behind-the-scene office worker).

2. Trainings may be conducted in a classroom environment, through Relias on-line courses, off-site seminars or courses, or a combination thereof.

3. The table below defines the categories, the required trainings, the timeframes, and type of training that will typically be conducted (e.g., classroom or other method) per the key below:

   - OL = On Line (typically through the Relias system)
   - CR = Class Room
   - OS = Off Site
   - SM = Staff Meetings (the supervisor is typically responsible for these trainings)

4. The key below specifies who (regulatory, contract, legislative, etc.) is requiring the trainings and is captured in the first column in the table below as follows:

1 = Balanced Budget Act	5= Michigan Administrative Code
2= Health Insurance Portability & Accountability Act (HIPAA)	6= Michigan Mental Health Code
3= Deficit Reduction Act	7= Occupational Safety & Health Administration (OSHA)
4= Michigan Department of Health & Human Services (MDHHS)	8= Code of federal Regulations

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Source requiring Training	Training Topic	Type of Training	Timeframe	Administrative Employees	Medical Professionals (on-site)	Clinical & ES Employees	Clerical Support Employees	Community Links/ Supported Employment Employees	Flashpoint	Maintenance & Janitorial Employees	Contractual - Administrative	Contractual - Residential	Contractual - Vocational	Contractual - Clinical	Contractual - Transporters	Autism Service Providers BCBA, LLP, QBHP, QLP & Technicians	Peer Supports	Substance Use Disorder Treatment - Clinical
	New Employee Orientation	CR	Within 30 days of hire	I	I	I	I	I	I	I	I			I			I	I
1,4,5,6,8	Recipient Rights, Grievance & Appeals, Advance Directives, Abuse & Neglect Reporting	CR & OL	RR- 30 days of hire. All others 90 days of hire.	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
1,2,3,4,5,8	Corporate & Regulatory Compliance & HIPAA Training (including Privacy & Security)	OL	30 days of hire	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
5,6,7	Standard Precautions/Infection Control/Blood-Borne Pathogens/TB	OL	Within 30 days of hire	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
1,4	Cultural Competence & Diversity/Limited English Proficiency (LEP)	OL	Within 90 days of hire	A	A	A	A	A		A	A	A	A	A	A	A	A	A
4,6,8	Person Centered Planning & IPOS/ Self Determination & Self-Directed Services/ Independent Facilitation	OL	Within 30 days of hire	A	A	A	A	A		A	A	A	A	A	A	A	A	A
5,6	Environmental Safety, Emergencies/ Fire Safety / Hazardous Materials & Safety Data Sheets, Employee Safety Handbook/Dr. Strong/Field Safety	CR & OL	Within 90 days of hire	A	A	A	A	A	A	A	A	A	A	I			A	A
5	CPR/First Aid	CR	Within 30 days of hire		2^			2				2			2	2		
4,8	Non-Violent Crisis Intervention (Verbal De-Escalation, and Culture of Gentleness (Dr. Strong Team required to take annually *)	CR & OL	Within 90 days of hire	I!	2!	2!	2!	2!	2!	I!	I!	A	2!	2!	2!	A	2!	I!
	Human Resource (HR) Policy/Procedure Updates/Employee Handbook Updates	CR & OL	As needed/ required after initial	I	I	I	I	I	I								I	I
5	Medication Administration (only if passing meds)	SM	Within 90 days of hire			R		R				R	R	R		R		
	Program-Specific Medicaid Guidelines Refresher Training (Supervisor completes in staff meetings)	SM	Within 90 days of hire		A	A	A	A						A				
	Emergency Services (ES) / Suicide Risk Assessment / Jail Diversion	SM	Within 90 days of hire			A		I						A	I	I	I	I
4	Trauma Informed System of Care (TISC)	OL	Within 90 days of hire	I		I		I			I			I	I	I	I	I
	Children-specific training (24 hours annually) –all staff who provide treatment to children	CR & OL	As needed/ required		A	A								A		A		
4	IDDT – COD Training	CR & OL	Within 90 days of hire	I	I	I	I	I	A	I	I			A				
4	CAFAS/PECFAS Rater Training (If working with Children)	OS	Within 90 days of hire			2												
	Mandated Reporter Training (DHS) This is also in 2nd row	OL	Within 30 days of hire	A	A	A	A	A	A	A	A	A	A	A			A	A
4	ACT 101(Initially for ACT Team Members only) & ACTA (annually for ACT staff only)	OS	180 days of hire & then annually (ACT only)			A												
4	LOCUS (if serving MI Adults) & SIS (if serving I/DD)					I												

I = INITIALLY   A= INITIALLY & ANNUALLY   2 = INITIALLY & EVERY TWO YEARS   3 = INITIALLY & EVERY THREE YEARS

R = At Consumer's Request   * = This training is done with printed training matter and is not done on-line

! = Verbal De-Escalation WITHOUT Physical Intervention   2^ = Nurses ONLY

C. Policy/Informational Updates:

1. HBH has a formal/controlled documentation system which addresses topics that may impact employee or contract provider jobs. To inform and educate employees on any new or changed systems/processes, employees are routinely assigned policies and procedures in the Relias on-line system. When these job-specific assignments are made, employees and contract providers are typically given one (1) month to read the document on-line. The employee must also confirm that they have read and understand the document by taking an exam/attestation question at the end of the course. The results are recorded and retained in Relias.

2. Staff that is directly involved in the development and revision of the organizational policy or procedure will not be assigned to read the document in Relias. In this situation, records of the policy/procedure being read is evidenced by the signatures on the policy/procedure cover page and can be obtained from the Controlled Documentation Manager or the Training Manager (or designee).

D. Categories of Employees and Contract Providers:

1. HBH has determined several categories of employees and contract providers in order to determine the appropriate and necessary training requirements for individuals. In the table above (see section "B") these categories are given further clarification as follows:

   a. *Administrative Employees:* this includes the Executive Director, Clinical Director, Chief Finance Officer, Finance employees, Compliance Manager, Quality/Performance Manager, IS Manager, Human Resource Manager, Recipient Rights Officer, and all Supervisors and Managers.

   b. *Medical Professionals (on-site):* this category includes the Medical Director, Psychiatrists, Nurse Practitioners, and Registered Nurses working on-site (this does not include tele-psychiatry participants)

   c. *Clinical Employees:* this includes all Out-patient Therapists, Case Managers, Supports Coordinators, Emergency Services workers, and any other employees whose primary function is providing clinical interventions and services.

   d. *Clerical Support Employees:* this refers to all clerical support, switchboard operators, scanning clerks, and any other staff who support the administrative and clinical operations.

   e. *Community Links/ Supported Employment Employees:* this includes all employees who provide community living supports and any other direct services to consumers through Community Links/Supported Employment services and supports.

   f. *Flashpoint:* this includes the case managers/supports coordinators who work exclusively with Flashpoint individuals.

   g. *Maintenance & Janitorial Employees:* this includes the Facilities Manager and janitors (full and part time).

   h. *Contractual – Administrative:* this includes contractual Outreach, Controlled Documentation, Community Liaison, and any other administrative functions which report directly to an administrative employee.

   i. *Contractual – Residential:* this includes Home Managers, Home Owners, direct care staff working in contracted residential homes in which residents of the homes are also receiving additional HBH clinical services.

   j. *Contractual – Vocational:* this includes staff working with HBH consumers in a vocational/employment capacity (examples include but are not limited to: Thumb Industries, Goodwill, etc.)

   k. *Contractual - Clinical:* this includes nurses who are contracted to conduct OBRA assessments, contracted psychologists conducting psychological assessments, etc.

   l. *Contractual - Transporters:* this includes contracted individuals who transport consumers in agency vehicles to in-patient hospitals, crisis residential homes, and other locations such as detox facility or substance use residential facility.

m. _Autism Service Providers (BCaBA, BCBA, LLP, QBHP, QLP) & Autism Service Providers Technicians:_ this includes contracted providers that are providing Applied Behavioral Analysis (ABA) services such as the aide level staff providing the direct ABA services, staff completing assessments and treatment plans as well as those overseeing and supervising the provision of the ABA services (for example Thumb Area Psychological Services/TAPS, Positive Behavior Supports (PBS) Corporation, etc.).

n. _Substance Use Disorder Treatment:_ this includes and any contracted provider working with individuals with Substance Use Disorders providing therapy, residential treatment or detox services.

2. The listing above is not intended to be an all-inclusive list of every possible employee or contract provider, as positions and responsibilities are subject to change. If a position needs clarification for training requirements, contact the Training Manager or the Clinical Director for guidance.

E. Additional Areas of Specialized Training Requirements:

1. There are several groups of clinical professionals and program staff who are required to take a minimum number of hours of specific training in order to meet certain requirements and/or certifications, as follows:

   a. All clinical employees (and contract providers) who work with children (this includes emergency services workers) are required to complete a minimum of twenty-four (24) hours of annual training specific to the treatment of children in accordance with MDHHS guidelines. This can relate to infant, toddler, adolescent, and youth training topics which can be accomplished through seminars, classes, printed materials, audio materials, video training materials, on-line courses, and staff meetings with a focus on a particular child-related topic (this must be documented in staff meeting minutes), etc. Also, all employees who work with children are required to have CAFAS (Children & Adolescent Functional Assessment Scale) training initially and booster training every two (2) years to become and maintain their certification as a CAFAS Rater. Clinical employees who work with children ages 3-7 may also receive training in administering the PECFAS (Preschool and Early Childhood Functional Assessment Scale) Tool.

   b. OBRA/Geriatric clinical employees and contract providers must receive an additional eight (8) hours of specialized older-adults training in addition to the training defined in the training matrix (this is usually accomplished through conferences, seminars, on-line courses, and in-house trainings) in areas such as:

      - Needs of older adults (i.e. mental, social, physical, economic, emotional)
      - Recognition of problems in older adults (i.e. substance use disorders, emergency/crisis situations)
      - Communication skills with older adults
      - Community resources available to older adults

   c. Assertive Community Treatment (ACT) Team Members must also receive initial ACT 101 training sponsored by MDHHS. This includes supervisors, physicians, nurses, social workers, peer support specialists, etc., who participate on the ACT Team.

   d. Contracted specialized residential homes staff must complete an MDHHS-approved toolbox or specialized residential training and also receive initial and annual training in consumer-specific aspects of a resident's Individual Plan of Service (IPOS) (using the "IPOS-Specific Training and Agreement Form for Personal Care Staff" 90-004).

   e. Wraparound facilitators must complete a three (3) day Wraparound facilitator training provided by MDHHS within ninety (90) days of hire/assignment and minimally, an additional two (2) Wraparound trainings per calendar year. The Wraparound Supervisor must also complete a three (3) day MDHHS Wraparound facilitator training and one (1) additional MDHHS supervisor training during the first year of supervising. The Wraparound Supervisor must also complete two (2) MDHHS Wraparound trainings annually, one of which must be a Wraparound supervisor training.

   f. All staff who is new to providing supported employment services must participate in a minimum of ten (10) hours of employment-related trainings within the first six (6) months they begin providing this service. Thereafter, staff is required to continue their professional development by participating in a minimum of ten (10) hours of employment-related training annually. These trainings are typically related to supported employment concepts, practices, strategies, and philosophies, etc. The required trainings can be acquired in any combination of conferences or workshops, in-house classroom training, webinars, on-line courses, or

phone-call conferences. On-going training is provided to Supported Employment employees in the form of conferences, seminars, in-house trainings, and research, which are approved by the supervisor and include topics such as:

- Disabilities
- Self-Determination
- Assistive Technology
- Micro-enterprises
- Updates on social security benefits
- Vocational developments
- Evidence Based Supported Employment
- Recovery
- Habilitation and Rehabilitation
- Habilitation Supports Waiver

g. In accordance with the Medicaid Provider Manual, staff who provide direct care to consumers in conjunction with a planned service as directed in the consumer's Individual Plan of Service (IPOS), must receive IPOS-specific training regarding the consumer's needs. This includes consumers who are receiving services in the following programs:

- Home and Community Based Services (HCBS)
- Children's Waiver Program (CWP)
- Waiver for Children with Serious Emotional Disturbance (SEDW)
- Habilitation Supports Waiver (HSW)

This training is typically provided by the Case Manager/Supports Coordinator (CSM/SC) to assure that staff is competent to implement the IPOS prior to providing services to the consumer. IPOS training must be completed at the time of a new IPOS, with the annual IPOS, when there is an addendum to the IPOS, or whenever there is a new direct care provider, or when there is a behavior treatment plan. Evidence of IPOS-specific training must be documented on the "IPOS-Specific Training and Agreement Form for Personal Care Staff" (90-004) and must identify:

- Who was trained
- Content of the training
- Who the trainer was (including their title)
- When (specific date) the training was provided
- A legible signature of the staff who received the training

h. Volunteers, Interns, Students, & Temporary Workers will receive initial orientation and initial trainings per the category or program they are working in or as determined by their supervisor.

F. External Trainings:

1. Because HBH is a publicly funded entity with limited resources and fiscal responsibility to the public, great care should be taken by employees and contract providers to utilize all available internal and on-line trainings before any external and more costly training is requested. Supervisors are responsible for monitoring their employee's external training expenses. Employees wishing to take training outside of HBH, must first evaluate and then provide evidence that no internal or on-line courses are available to satisfy the employee's training needs.

2. If there are not any suitable internal or on-line courses available, the employee must complete a "Request for Workshops, Conferences, and Off-Site Trainings Form" (90-088) and submit it to their supervisor for approval.

3. Upon approval, the employee will receive a "Training/Conference Approval Form and Training Record" (90-151) as authorization that they may proceed with the external training.

4. After completion of the training, it is the employee's responsibility to obtain training evidence (such as a training certificate) and provide a copy to the Training Manager (or designee) for his/her training records. Training records are maintained in the Relias database system as well as hard copies of training certificates.

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G. On-Going Supervision:

Program Supervisors are required to provide basic training to their program's employees at the time of hire and on an on-going basis regarding:

- MDHHS (protocols, best-practice guidelines, contractual requirements, etc.), MSHN (policies, standards, and contractual requirements), COA (standards and reporting requirements), and HBH (processes, practices, protocols, etc.).
- HBH controlled documentation system (policies, procedures, instructions, forms, etc.)
- Coordination of care with primary care providers, medical & social service delivery systems, etc.
- Medical Necessity, Medicaid Guidelines, Level of Care, etc.
- Person-centered planning philosophies and monitoring compliance to the plan
- Required case record documentation (such as progress notes, periodic reviews, transfers/referrals, case closings, etc.).
- Electronic Medical Record (EMR) system
- Findings from internal and external audits and responsibilities for corrective action follow-up
- Required reporting of suspected Abuse & Neglect, Duty to Warn, Reportable Criminal Behavior, etc.
- Recipient Rights, treatment of consumers, and protection of rights
- HIPAA Privacy and Security regulations and confidentiality of consumer information

See also "Supervision Procedure" (HR.2.14) and "Clinical Supervision Policy" (HR.1.02)

H. Training Committee:

1. HBH has established a Training Committee with the following purpose and responsibilities:

   - Meet at least twice per year (additionally as necessary)
   - Develop and maintain the written policies and procedures regarding HBH employee training
   - Evaluate employee training needs and develop appropriate trainings to meet those needs

   See also "Training Committee Procedure" (TR.2.05)

Definitions/Acronyms:

ACT – Assertive Community Treatment
CAFAS – Children & Adolescent Functional Assessment Scale
COA – Council on Accreditation
CPR – Cardio-Pulmonary Resuscitation
CLS – Community Living Supports
CSM/SC – Case Manager/Supports Coordinator
CWP – Children's Waiver Program
DHS – Department of Human Services (previously referred to as FIA – Family Independence Agency)
EMR – Electronic Medical Record
HBH – Huron Behavioral Health
HCBS – Home & Community Based Services
HIPAA – Health Insurance Portability & Accountability Act (of 1996)
HR – Human Resources
HSW – Habilitation Supports Waiver
IPOS – Individual Plan of Service
LEP – Limited English Proficiency
MDHHS – Michigan Department of Health and Human Services
MSHN – Mid-State Health Network
OBRA – Omnibus Budget Reconciliation Act
OSHA – Occupational Safety & Health Administration
PECFAS - Pre-School and Early Childhood Functional Assessment Scale
PIHP – Pre-paid Inpatient Health Plan
SEDW - Waiver for Children with Serious Emotional Disturbance

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Forms:

90-004 IPOS-Specific Training and Agreement Form for Personal Care Staff
90-088 Request for Workshops, Conferences, and Off-Site Trainings Form
90-151 Training/Conference Approval Form and Training Record

Records:

- Training records are retained by the Training Manager (or designee) for the active year plus seven (7) years
- Some training records (e.g., new employee orientation, bloodborne pathogens, etc.) are retained in the employees personnel file for the active term of employment plus seven (7) years.

Reference(s) and/or Legal Authority

HR.1.02 Clinical Supervision Policy
HR.2.05 Employee Annual Evaluation Procedure
HR.2.14 Supervision Procedure
TR.1.01 HBH Training Policy
TR.2.02 Orientation of New Employees Procedure
TR.2.05 Training Committee Procedure
MDHHS Guidelines
Medicaid Provider Manual @ http://www.mdch.state.mi.us/dch-medicaid/manuals/MedicaidProviderManual.pdf
COA Standards
MSHN policy "Quality Management" adopted 11/22/13

Change History:

Change Letter	Date of Change(s)	Changes
AA	02/20/19	Total rewrite of procedure. All change history removed. See Controlled Documentation Manager for list of changes and/or previous revisions of this procedure.
BB	04/30/19	In "Procedure" section added E.1.f
CC	02/28/21	In "Procedure" section training grid row #6 changed "Person Centered Planning (PCP)/ Self Determination/ Independent Facilitation" to "Person Centered Planning & IPOS/ Self-Determination & Self-Directed Services/Independent Facilitation".
DD	03/11/21	In "Information" section added "mandatory reporting pursuant to relevant……trainings on the EMR".
EE	04/10/21	In "Procedure" section added E.1.g, in "Acronyms" section added "ACT", "CSM/SC", "HCBS", "HSW", "IPOS", & "SEDW".
FF	08/06/21	In "Procedure" section training table, removed "ACT 101" training from Contractual – Clinical column, added reference to HR.2.05 Employee Annual Evaluation Procedure" (2 places), made numerous minor wording/grammatical changes/corrections throughout procedure without changing sentence content.
GG	02/04/22	Made several changes to the grid on page 3 and added additional key identified as "!" to denote Verbal De-Escalation without physical intervention" & removed "CPR/First Aid" from all categories except CL, Residential, Transporters, & Autism to better align with MSHN training grid requirements.
HH	04/10/22	In training grid added "2^" to "CPR/First Aid" row under "Medical Professionals (on-site)" column.
II	02/10/24	Made numerous minor wording/grammatical changes/corrections throughout procedure without changing sentence content.