

COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEASTERN MICHIGAN/PIHP	<i>Policy and Procedure</i> Employee Competency & Credentialing Policy
Committee/Department: Network Management Committee	Local Policy Number (if used)
Implementation Date 11/10/2021	Regional Approval Date 10/28/2021

Reviewed by:	Recommendation Date:
ROC	09/08/2021
CMH Board:	Approval Date:
Lenawee	10/28/2021
Livingston	10/26/2021
Monroe	10/27/2021
Washtenaw	09/27/2021

I. PURPOSE

To ensure that staff competencies are at a high level through ongoing assessment of their capacity to provide safe, effective, high-quality mental health and substance use disorder (SUD) care to Community Mental Health Partnership of Southeast Michigan (CMHPSM) consumers/individuals served.

II. REVISION HISTORY

DATE	MODIFICATION
2014	Revised to reflect the new regional entity.
10/27/2021	3-year review

III. APPLICATION

This policy applies to all CMHSP staff of the CMHPSM.

IV. POLICY

All employees will be competent to perform the responsibilities duties assigned to them.

V. DEFINITIONS

Community Mental Health Partnership Of Southeast Michigan (CMHPSM): The Regional Entity that serves as the Prepaid Inpatient Health Plan (PIHP) for Lenawee, Livingston, Monroe and Washtenaw for mental health, intellectual/developmental disabilities, and substance use disorder services.

Community Mental Health Services Program (CMHSP): A program operated under chapter 2 of the Mental Health Code as a county community mental health agency, a community mental health authority, or a community mental health organization.

Competence: The knowledge, skills, and abilities a person possesses to perform tasks correctly and effectively.

Credentials Review: The process of obtaining, verifying, and assessing the qualifications of a practitioner to provide the mental health services based on established criteria.

Integrated Care: Bringing together inputs, delivery, management, and organization of services related to diagnosis, treatment, care, rehabilitation, and health promotion. Integration is a means to improve services in relation to access, quality, user satisfaction and efficiency (World Health Organization).

Primary Source Verification: The source from which the applicant obtained written documentation of licensure, education, or other qualifications. Primary source includes federal and state licensing boards, letters from professional schools and letters from postgraduate education or postdoctoral programs for completion of training, or designated equivalent sources

Regional Entity: The entity established under section 204b of the Michigan Mental Health Code to provide specialty services and supports.

VI. STANDARDS

1. Competence shall be assessed at time of hire and at least annually.
2. The CMHSP/SUD Core Service Provider shall have a process to assign clinical responsibilities that includes review of licensure, certification, and/or registration.
3. Before assigning initial clinical responsibilities, the CMHSP/SUD Core Service Provider shall verify the identity of staff seeking clinical responsibilities by viewing a valid picture identification issued by a state or federal agency (for example, a driver's license or passport).
4. Initial competencies will be verified during the hiring process, via interviews, review of education, and the orientation process. Training needs will be identified, as applicable.
5. Before assigning initial, renewed, or revised clinical responsibilities for employees whose jobs require state licensure/certification/registration, the CMHSP/SUD Core Service Provider shall:
 - Use primary sources when documenting the training specific to the clinical responsibilities requested.
 - For all employees, whose jobs require a baccalaureate degree or higher, confirmation of degree will be obtained and verified from the primary source.
 - Assure staff being reviewed for clinical competencies do not have issues with licensure, certification, sanctions, or criminal activity that would affect their ability to perform their clinical responsibilities
6. The CMHSP/SUD Core Service Provider shall establish program/service-specific criteria for each clinical responsibility. These criteria include the following:
 - Current licensure and/or certification as appropriate, verified with the primary source
 - Successful completion of training
 - Peer or faculty recommendation

- Evidence of the ability to perform the assigned clinical responsibilities
7. The CMHSP/SUD Core Service Provider shall ensure that staff with the educational background, experience, or knowledge related to the skills being reviewed assess competence.
 8. Employees shall receive supervision, including clinical supervision as appropriate to their position, on a regular basis.
 9. Supervisors shall assess the competency of employees through supervision, observation, and performance evaluation. Performance evaluations for clinical staff who are supervised by another discipline will include peer review by their own discipline.
 10. On-going competencies will be monitored through supervision and documented on annual performance evaluations.
 11. Clinical staff competencies will be documented on the Employee Competencies Checklist (Exhibit A).
 12. Nonclinical staff competencies will be documented through performance evaluations based on employee job descriptions.
 13. All employees are expected to display cultural sensitivity and awareness of the role of culture in the delivery of services
 14. All employees are expected to have competence in integrated healthcare.
 15. All employees are expected to have competence in applicable principles and practices of recovery and recovery-oriented systems of care.
 16. All employees are expected to meet the applicable provider requirements of the Medicaid Provider Manual.
 17. Programs which employ the use of glucometer, breathalyzer or other waived tests will ensure and document employee competency on those tests during orientation and annual performance reviews.
 18. Before assigning renewed or revised clinical responsibilities to staff who are permitted by law and the organization to practice independently, the CMHSP/SUD Core Service Provider need to assure the following occurs:
 - Reviews information from any of the organization's performance improvement activities pertaining to professional performance, judgment, and clinical or technical skills.
 - Evaluates the results of any peer review of the individual's clinical performance.
 - Reviews any clinical performance in the organization that is outside acceptable standards.
 - Evaluates the staff member's written statement that no health problems exist that could affect his or her ability to perform the requested clinical responsibilities, including consideration of the applicability of the Americans with Disabilities Act and/or the Rehabilitation Act of 1974.
 - Evaluates any challenges to licensure or registration.
 - Evaluates any voluntary and involuntary relinquishment of license or registration.
 - Evaluates any voluntary or involuntary limitation, reduction, or loss of clinical responsibilities
 - Evaluates any professional liability actions that resulted in a final judgment against the staff member.
 - Queries the National Practitioner Data Bank (NPDB) at the time of initial assigning of clinical responsibilities, as well as at least every two years thereafter for information on physicians and dentists who are assigned clinical responsibilities.

- Evaluates whether the requested clinical responsibilities are consistent with the population(s) served by the organization.
- Evaluates whether the requested clinical responsibilities are consistent with the program or site-specific care, treatment, or services provided.
- Confirms the staff member's adherence to organization policies, procedures, rules, and regulations.

VII. EXHIBITS

A. Employee Competency Checklist

VIII. REFERENCES

Reference:	Check if applies:	Standard Numbers:
MICHIGAN PIHP/CMHSP PROVIDER QUALIFICATIONS PER MEDICAID SERVICES & HCPCS/CPT CODES	X	
Joint Commission- Behavioral Health Standards	X	HR.3.10; HR.4.10
CMHPSM PIHP/CSSN Monitoring of Delegated Functions	x	CSSN Review; Contract Language
Culturally and Linguistically Appropriate Services Policy	X	

COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN

Employee Name: _____ Date: _____

Part I – Population-Specific Competencies

- 1. Children with intellectual/developmental disability
 - Demonstration of knowledge of the following:
 - Childhood & adolescent development
 - Specific conditions/syndromes associated with intellectual/developmental disabilities
 - Resources and supports available to persons with intellectual/developmental disabilities & families
 - Principles of Person-Centered Planning/Family-Centered Planning
 - Special education/school system
 - Integrated Healthcare

- 2. Adults with intellectual/developmental disability
 - Demonstration of knowledge of the following:
 - Human development across the lifespan
 - Specific conditions/syndromes associated with intellectual/developmental disabilities
 - Resources and supports available to persons with intellectual/developmental disabilities & families
 - Principles of Person-Centered Planning
 - Special education/school system
 - Integrated Healthcare

- 3. Children with serious emotional disturbance
 - Demonstration of knowledge of the following:
 - Childhood & adolescent development
 - Emotional disorders/mental illnesses of childhood & adolescence
 - Family Dynamics
 - Parenting skills/strategies
 - Human service system for children (Court, Schools, Spec. Ed., Child Welfare, etc.)
 - Principles of Person-Centered Planning/Family-Centered Planning
 - Stages of change
 - Motivational Interviewing
 - Integrated Healthcare

- 4. Adults with serious & persistent mental illness
 - Demonstration of knowledge of the following:
 - Signs & symptoms of major mental illness
 - Acute symptoms of mental illness
 - Medications used to treat symptoms of mental illness & common side effects
 - Supports/resources available in the community for persons with SPMI & their families
 - Principles of Person-Centered Planning & Recovery Model
 - Stages of change

- Motivational Interviewing
 - Integrated Healthcare
5. Older adults with serious & persistent mental illness
- Demonstration of knowledge of the following:
- Mental illness unique to the elderly population
 - Special needs of the elderly
 - Medication issues/concerns unique to older adults with SPMI
 - Community resources available to older adults with SPMI & their families
 - Principles of Person-Centered Planning & Recovery Model
 - Stages of change
 - Motivational Interviewing
 - Integrated Healthcare

6. Co-Occurring Disorders: mental illness and substance abuse
- Demonstration of knowledge of the following:
- Theories of addiction and recovery
 - Stages of change
 - Motivational Interviewing
 - Signs & symptoms of substance abuse
 - Signs & symptoms of major mental illness
 - Issues unique to co-occurring mental illness & substance abuse
 - Medication used to treat mental illness, side effects, interaction with street drugs/alcohol
 - Community resources & supports available to persons with mental illness & substance abuse and their families
 - Integrated Healthcare

Part II – Competencies Needed to Deny, Reduce, Suspend or Terminate Services

- Emergency Services (Inpatient, Crisis Residential and Partial Hospital) for the following populations:

<input type="checkbox"/> DD-C	<input type="checkbox"/> DD-A	<input type="checkbox"/> SED	<input type="checkbox"/> MI-A	<input type="checkbox"/> MI-OA	<input type="checkbox"/> Co-Occ	<input type="checkbox"/> Sub. Ab
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Demonstration of knowledge of the following:

- Evaluation of Mental Health Service Needs
- Evaluation of Substance Abuse Service Needs
- Treatment Planning Process (Crisis Planning, Diversion Planning)
- Service Authorization Process
- Service Eligibility Criteria
- CMH and Community Services, Supports and Other Resources
- Treatment (Crisis Intervention, Inpatient, Crisis Residential, Other Alternative Services)

- Non-Emergency Services (all other) for the following populations:

<input type="checkbox"/> DD-C	<input type="checkbox"/> DD-A	<input type="checkbox"/> SED	<input type="checkbox"/> MI-A	<input type="checkbox"/> MI-OA	<input type="checkbox"/> Co-Occ	<input type="checkbox"/> Sub. Ab
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Demonstration of knowledge of the following:

- Evaluation of Mental Health Service Needs
- Evaluation of Substance Abuse Service Needs
- Treatment Planning Process
- Service Authorization Process
- Service Eligibility Criteria
- CMH and Community Services, Supports and Other Resources
- Treatment

Part III – Competency Assessment Methods

After-Hire

New-Hire

- | | |
|--|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> Annual Staff Evaluation <input type="checkbox"/> Clinical Case Record Review <input type="checkbox"/> Peer Review <input type="checkbox"/> Observation <input type="checkbox"/> Supervision Discussions <input type="checkbox"/> Consultation with other supervisors/directors | <ul style="list-style-type: none"> <input type="checkbox"/> Resume <input type="checkbox"/> Primary Source <input type="checkbox"/> Interview Results <input type="checkbox"/> Reference Check <input type="checkbox"/> Other: _____ <input type="checkbox"/> Consumer Feedback |
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Part IV – Training Needs & Plan

_____ Supervisor's signature	_____ Date
_____ Employee's signature	_____ Date