

**Community Mental Health Affiliation
of Mid-Michigan**

PROCEDURE #: 2.8	Page 1 of 2	SUBJECT: Health and Safety
Related Policy(ies) #: 2.0		SUBJECT: Clinical Policy
Issuing Director: Director of Affiliation Operations		Original Effective Date: 06/08/09

REVISED DATE

06/09/10

Review Date(s)

10/27/11					

I. PURPOSE:

To ensure that services are provided in a manner that considers the health and safety of consumers, family, providers and other stakeholders and when health and safety concerns are identified that those concerns are acknowledged and action taken as appropriate.

II. STANDARDS:

- A. AFP Section 2.7: Health and Safety
- B. PIHP Managed Care Contract, Attachment P.3.4.1.1(6)(a): Person-Centered Plan
- C. AR Section 3(9), of ACT 218 P.A. 1979 as amended: Assessment Plan

III. DEFINITION(S): (if applicable)

A. Beneficiary:

A person who is eligible for Medicaid and who is receiving or may be eligible to receive mental health services through a PIHP/CMHSP.

IV. PROCEDURES:

A. Beneficiary Health and Safety

1. Each beneficiary will, with his/her clinician, explore potential health and safety concerns during intake, prior to each subsequent person-centered plan and/or as needed. This includes safety in home and community settings.
2. Health and safety concerns will be addressed in the plan of service while taking into account individual preferences and competency.
3. As a result of health and safety concerns or court-ordered treatment, individual choices may be limited. However, as much as possible each beneficiary will be provided an opportunity to make choices.
4. The plan will include coordination and integration of services with primary care providers.

B. Each CMHSP/CA shall have a process for addressing and monitoring safety issues within its service sites.

1. Each CMHSP/CA shall have a process to assess for and monitor health and safety for consumers, staff and other stakeholders within its service sites.
2. Health and Safety issues will be reported via incident reports and for immediate dangers, reported by phone to 911 and/or management as appropriate.

3. A response system to emergencies shall be developed and staff trained for the following events including, but not limited to:
 - a. Fire
 - b. Tornadoes/severe storms
 - c. Power outages
 - d. Medical emergencies
 4. Drills shall be conducted and responses documented.
 5. The agency will ensure that appropriate action was taken for each incident to prevent reoccurrence.
 6. Data shall be monitored, reviewed and reported through a quality assurance process.
- C. Each CMHSP/CA shall have a written infection control plan which addresses:
1. Monitoring for and responding to infectious disease as required by local health departments, applicable laws or rules, and requirements by accrediting bodies.
 2. Handling of sharps and other hazardous wastes.
 3. Disease prevention including hand washing and universal precautions.
 4. Appropriate cleaning and maintenance procedures.
- D. Each CMHSP/CA shall have information included within their policies/procedures for medications covering the following:
1. Prescribing
 2. Dispensing
 3. Administering
 4. Documenting
 5. Monitoring
 6. Training
 7. Responding to side effects/adverse effects.

V. APPLICATION:

This procedure applies to all CMHAMM CMHSPs/CAs and providers.

VI. MONITOR AND REVIEW:

The PIHP Director of Quality and Customer Service and the Director of Affiliation Operations will review this procedure annually with input from the Affiliation Quality Improvement Workgroup and Affiliation Compliance Committee.

VII. RELATED POLICIES AND PROCEDURES:

CMHAMM Policy #2.0 Clinical Policy