

Community Mental Health Affiliation of Mid-Michigan
PIHP Behavior Treatment Committee
Meeting Minutes
October 06, 2011

Community Mental Health Authority of
Clinton-Eaton-Ingham Counties
812 E. Jolly Rd.
Lansing, Michigan

Facilitator: Kim Zimmerman

ATTENDANCE: Mary Clissold (CEI); Marian Wagner-Moccio (CEI) ; Julie Dowling (Ionia); Amy Kurtti (Newaygo); Cheryl Parker (Newaygo); Sukhvender Nijjer (CEI); Sue Poindexter (Gratiot); Robert Rubin (Gratiot); Cheryl Kobernik (Centra Wellness) and Kim Zimmerman (Affiliation)

ABSENT: Pat Miller (CEI) and Jan Morningstar (Centra Wellness)

GUESTS: Jason Moon (CEI IS department)

CALL TO ORDER: The meeting was called to order at 3:00 PM by Kim Zimmerman, facilitator.

**STANDARDIZATION OF
AFFILIATION BTC**

FORMS: Jason Moon of the CEI IS department was present today for the continued review of the mock up of Affiliation Behavior Treatment Committee forms.

The draft of the Positive Support Plan was reviewed again today for any further needed changes/revisions.

Positive Support Plan: Non - Restrictive Tab (starts on page 1)

- Baseline Data Section (page 3)
 - The “frequency per/” will be a text box to enter information
 - The “Interval” box will be a drop down box with the options for “hour,” “week,” “month,” and “other”
 - A text box is being added in this section titled “Describe Other Interval”
 - This will be a box to enter text to describe what is meant when “other” is checked

- This text box will be located directly under chart for baseline data
 - Next to the “Narrative” text box, there will be a description in parentheses that states “Describe any information specific to baseline data”
- Potential Triggers Section (page 5)
 - After “potential triggers” add the following text in parenthesis “list any events, variable, interactions, etc. that may impact behavior”
- Proactive Measures Section (page 5)
 - After text box titled “Building a Relationship” add the following text in parenthesis “identify ways to assist individual to feel safe, accepted, and engaged with others”
 - After text box titled “Modifying the Environment” add the following text in parenthesis “Describe type of environment that promotes success”
 - After the text box titled “Teaching Specific Skills” add in parenthesis “Replacement behaviors such as problem solving, relaxation, choice making, etc.)
 - Turn this section into a grid instead of a text box
 - The grid will have two columns: one titled “Skill” and the other titled “Technique”
 - There will be the ability to add multiple lines under each column where text can be entered
- Safety Strategies Section (page 5)
 - Add hint text in parenthesis that states “Staff response towards unsafe behaviors”

Positive Support Plan: Restrictive Tab (starts on page 6)

- Before the first text box titled “Challenging Behaviors” add a statement that says: “Non-Restrictive safety strategies must be used prior to implementing strategies listed in the restrictive plan.”

- The text box that is titled: “The Support Team will review this plan no less than annually to evaluate options other than restrictive or intrusive measures that may be effective in meeting the individual’s goals”
 - This will be changed to: “Options other than restrictive or intrusive measures that may be effective in meeting the individual’s goals must be reviewed as part of the PCP process no less than annually”
 - The text box for this will be eliminated and this will become a statement located on document
- Signature tab (page 7)
 - Add a prompt about consent being returned from guardian (this will not print with the forms, but could be used to run a report to track consents)
 - Text boxes will be added for information on who to return the consent form to
 - There will be 4 text boxes: one for name, one for address, one for city, and one for zip code

The draft of the Behavior Treatment Plan Review Form was reviewed today for any needed changes/revisions.

- This form will be located as a tab on the positive support plan
- The title of the form will be changed to be “Behavior Treatment Committee Plan Review”
- The information for name, case #, date of plan, author of plan will all pull from the information on the support plan....this will not have to be entered manually on this form
- “Plan Implemented @ Home” will be removed from the form
- “Plan implemented @ Day Treatment” will be removed from the form
- Question #1 will be changed from “Is the Treatment Plan free of” to read “Does the plan contain”
- Next to question #1, there will be a statement that says “if yes is checked, then the plan will be denied by the committee”
- For questions #2 - #5, there will be statement that says “if no is checked, then the plan will be denied by the committee”
- Need to add a place for the Committee to recommend an amendment be completed
- Need to add a place for the Committee to recommend discontinuation of the plan (a Yes or No check box)

Next Steps:

- Each CMHSP is to send me copies of their form used for special consent prior to the next meeting date
- Kim will send out PIHP Data Spreadsheet to each CMHSP to report 4th quarter FY 11 data...to be reviewed at next meeting

During the next meeting, the following will be reviewed. Please come prepared to discuss any recommendations you may have for each form.

- Revised Positive Support Plan Document
- Restrictive Plan Document
- BTC Review Form
- BTC Periodic/1/4ly Review Form
 - Mary will work on this with volunteers to develop a draft to send out to the group for review

NEXT MEETING: The next meeting will be November 02, 2011
3:00 PM to 5:00 PM
Room G-10-D

ADJOURNMENT: The meeting adjourned at 5:00 PM.

Respectfully submitted,

Kim Zimmerman
Affiliation Compliance Administrator

Debra Heinze
Affiliation Secretary