

WEBVTT

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00:00:00.000 --> 00:00:06.419

Being everyone I am so glad to open up your Monday morning with, uh.

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00:00:06.419 --> 00:00:17.579

Guideline 85, and I, before we get started on the actual presentation, I want to introduce my associates and let them chime in. Of course, we've got.

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00:00:17.579 --> 00:00:23.609

Lucas Evans, the chief behavior analyst, joining us this morning and being part of the presentation.

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00:00:23.609 --> 00:00:28.890

Good morning. Everyone good to be here and we've got, um.

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00:00:30.000 --> 00:00:37.890

I believe my Latham might be on not sure.

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00:00:37.890 --> 00:00:43.890

She may have some challenges unmuting this morning.

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00:00:43.890 --> 00:00:48.990

But, um, my other associates are the intensive systems consultants.

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00:00:48.990 --> 00:00:53.039

K, Hamlet and a raw talent.

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00:00:54.689 --> 00:00:59.340

Good morning. Good morning.

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00:01:00.420 --> 00:01:08.730

And so, with that, we'll kind of get started I want to give a little bit of background, of course guideline.

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00:01:08.730 --> 00:01:20.849

Comes out of the original directive of, um, 84.300 and then out of the CSR 9 CSR 45.

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Dash 3.090 so.

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00:01:24.900 --> 00:01:31.439

And the directive has been around since October of 2016 and.

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00:01:31.439 --> 00:01:36.060

The director became a CSR in March of 2020.

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00:01:36.060 --> 00:01:40.620

So, this is kind of an extension of all of those to, um.

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00:01:40.620 --> 00:01:45.150

Provide everyone, uh, support and guidance as to.

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00:01:45.150 --> 00:01:48.810

How the process is to work, so.

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00:01:48.810 --> 00:01:55.079

With that, or or goal this morning is to, um.

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00:01:55.079 --> 00:02:01.530

Outline the guideline to identify reporting and notification requirements.

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00:02:01.530 --> 00:02:05.489

The steps in the process that is what happens in when.

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00:02:05.489 --> 00:02:17.639

What the follow up looks like and then actually the process of how this will fit into connection. So I'm really excited about that area also.

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00:02:17.639 --> 00:02:21.810

Read it can I add something? Sure please do Lucas.

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00:02:21.810 --> 00:02:31.830

So, just for folks, so there's help if you need it. So, this presentation today is not really about what is the prohibitive practice and what isn't.

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00:02:32.664 --> 00:02:45.474

We'll talk a little bit about that, but mostly this is just about what we do about prohibitive practices when they're suspected or discovered there

is another webinar that we recently did that kind of talked about the specific kinds of prohibitive practices.

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00:02:45.955 --> 00:02:47.754

These are a list of.

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00:02:48.330 --> 00:02:57.479

Strategies that have been kind of prohibited for a very long time. They're not really new and we, when we send them the epq or the follow up document from this.

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00:02:57.479 --> 00:03:09.539

Presentation will link that previous webinar in case. People want to learn more about what is and isn't up rebutted practice, um, more in depth. And today again, just is focusing on what we do when we find them.

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00:03:10.650 --> 00:03:20.789

Great thanks for that. Clarification. Lucas and, um, yeah, some of the original, um, information about the, the CSR is also.

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00:03:20.789 --> 00:03:28.800

Um, out there from when Dr Rogers did the original, um, information about the CSR.

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00:03:28.800 --> 00:03:37.800

So, um, why does the guideline exist? Well, of course, it exists for consistent and systematic responses when.

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00:03:37.800 --> 00:03:42.120

There are prohibited procedures, suspected or discovered and.

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00:03:42.120 --> 00:03:56.935

You know, this ensures the health and welfare and rights of the individual, because that's a a really important part. Of course, the, the whole idea of prohibitive practices is under that section of rights of the individual in the.

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00:03:58.110 --> 00:04:08.490

It also ensures the quality of life without coercion, seclusion, or other practices that infringes on people's rights. And I know that, um.

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00:04:08.490 --> 00:04:15.030

You know, it's always a, a challenge sometimes. Is that a prohibited practice or not? And I think.

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00:04:15.030 --> 00:04:19.680

You know, the guideline will help us to really identify.

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00:04:19.680 --> 00:04:24.720

The opportunity of the process, not necessarily.

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00:04:24.720 --> 00:04:29.488

Um, the prohibited practices specifically.

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00:04:30.658 --> 00:04:38.968

So, I I know this is an eye chart, but this is really the flow of things as to what happens and when.

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00:04:38.968 --> 00:04:45.028

And, of course, this will be available for everyone to kind of follow through.

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00:04:45.028 --> 00:04:56.338

And understand ultimately what happens and when, and I wanted to give a guideline, or we wanted to give kind of an idea of how things flow.

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00:04:56.338 --> 00:04:59.968

In the process, and when things happen.

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00:05:03.088 --> 00:05:07.978

There won't be a quiz on this, of course, afterwards. But if you want 1, we can give you 1.

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00:05:07.978 --> 00:05:20.158

Um, so who is it address to? Well, it's addressed to everyone, you know, the guideline is out there for anyone within the division, or within.

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00:05:20.158 --> 00:05:24.238

The operations of what we do to report.

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00:05:24.238 --> 00:05:27.269

What is the process? Of course.

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00:05:27.269 --> 00:05:30.389

You know, when something is suspected.

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00:05:30.389 --> 00:05:33.629

Or, when something is identified.

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00:05:33.629 --> 00:05:43.079

Then there should be immediate notification either by phone or writing and I know we've all confronted kind of like, is that, or is that not.

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00:05:43.079 --> 00:05:47.488

Even if you're not sure it should be reported.

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00:05:49.619 --> 00:05:57.509

Just to expand on that a little bit. So the guidelines specifically outlines what division staff will do when.

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00:05:57.509 --> 00:06:08.488

Prohibitive practices, suspected or discovered however, just as a reminder and I'm sure we're all aware. Every, every person that's associated with our.

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00:06:08.488 --> 00:06:23.303

System is obligated to notify or come forward when they find things that don't look correct so that the kind of mandated reporter aspect is universal to everyone but the guidelines specifically talks about what the division we'll do once

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00:06:23.303 --> 00:06:24.144

something has happened.

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00:06:24.144 --> 00:06:25.314

So, it, it.

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00:06:25.619 --> 00:06:32.639

It applies to the behavior of the division what are what states staff will do when these things occur but.

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00:06:32.639 --> 00:06:40.588

It also includes that piece of everybody having a stake and pointing out when somebody's.

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00:06:40.588 --> 00:06:46.319

Rights aren't being honored, or there's some sort of concerning practice happening.

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00:06:49.678 --> 00:07:00.059

Great. Thanks so much Lucas. So, who was notified? Well, the supervisor, um.

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00:07:00.059 --> 00:07:03.809

Chief behavior, analyst and regional office directors.

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00:07:03.809 --> 00:07:11.728

What information of course, it, it's the identifying information. The thing that the person has discovered.

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00:07:11.728 --> 00:07:19.139

Identifying the name of the provider, um, whether it's a residential provider or a program provider.

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00:07:19.139 --> 00:07:23.788

A behavior, analyst of behavior provider.

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00:07:23.788 --> 00:07:27.449

Or a support coordinate, and the support coordination.

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00:07:27.449 --> 00:07:31.048

Support coordinator identified.

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00:07:31.048 --> 00:07:38.098

So those are who is informed, or what information is provided.

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00:07:40.798 --> 00:07:46.408

So, then, the next step is that the chief behavior analyst, or the designee, um.

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00:07:46.408 --> 00:07:52.048

Notifies the provider to cease that practice that they are engaging in.

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00:07:52.048 --> 00:07:56.189

Or, um, at least.

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00:07:56.189 --> 00:07:59.369

To the degree that is possible.

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00:07:59.369 --> 00:08:04.678

While the review of that process is being done.

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00:08:04.678 --> 00:08:10.978

You know, we're not going to discontinue something if there is a safety issue.

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00:08:10.978 --> 00:08:14.579

Related to that.

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00:08:14.579 --> 00:08:18.869

Uh, you know, it would be, we would be remiss in doing that.

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00:08:18.869 --> 00:08:24.478

What we do need to have or insure happens is that the.

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00:08:26.129 --> 00:08:29.399

Provider needs to submit, um.

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00:08:29.399 --> 00:08:32.908

Empties as reportable events um.

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00:08:32.908 --> 00:08:36.899

As necessary daily as this.

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00:08:38.009 --> 00:08:42.749

Prohibited practice is executed, or when the, perhaps.

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00:08:42.749 --> 00:08:50.938

Prohibited practices implemented and everything is, uh, reported in accordance with the directive for.

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00:08:50.938 --> 00:08:56.698

Uh, reporting events, um, that's directive 4.070.

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00:08:56.698 --> 00:09:04.828

And if it's not reportable, we, of course, need data to be taken. How frequently is this occurring? When is it occurring?

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00:09:04.828 --> 00:09:09.359

So these are the, the next steps in the process.

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00:09:12.989 --> 00:09:20.639

Uh, the next step we will do, um, as part of the, the team is we have a tracker.

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00:09:20.639 --> 00:09:29.308

That identifies the prohibited procedures for the suspected prohibited procedures.

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00:09:29.308 --> 00:09:33.479

And we will make entry into that tracker.

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00:09:33.479 --> 00:09:43.528

To ensure that we are extending due diligence for the review process. So Here's an idea of what that tracker looks like.

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00:09:43.528 --> 00:09:54.479

Of course, um, the name of the individual, this is all the identifying information and then the actions that we will take.

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00:09:55.979 --> 00:10:03.058

Um, we also identify the, the potential type of prohibited practice or procedure. It is.

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00:10:04.288 --> 00:10:13.678

And the actions that will ultimately be taken to remediate it. So, this tracker is used throughout the review process.

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00:10:13.678 --> 00:10:17.759

To ensure that all of the elements of.

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00:10:18.899 --> 00:10:23.188

The guideline are followed through on and that we are taking.

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00:10:23.188 --> 00:10:27.089

The necessary actions that we need to.

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00:10:28.589 --> 00:10:39.629

In the process.

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00:10:39.629 --> 00:10:46.109

When to pursue it well, we need to once we're notified, we need to.

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00:10:46.109 --> 00:10:52.499
Take action within 1 business day. A notice to the QA team is given.

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00:10:52.499 --> 00:10:57.568
Um, to regional office directors and to the support coordinator.

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00:10:57.568 --> 00:11:01.318
A special review is scheduled.

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00:11:01.318 --> 00:11:06.958
And that review entails looking at the DSP looking at the.

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00:11:06.958 --> 00:11:11.969
pmts that are provided looking at provider documentation.

100
00:11:11.969 --> 00:11:15.119
Doing interviews and observations.

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00:11:15.119 --> 00:11:18.359
And, you know, we are confronted with a.

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00:11:18.359 --> 00:11:27.028
An interesting situation, given the state of the world that observations we have to be a little creative in the process.

103
00:11:27.028 --> 00:11:30.688
Interviews we can still do via Webex.

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00:11:30.688 --> 00:11:34.499
And phone calls, but some of the things we need to.

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00:11:34.499 --> 00:11:37.739
To shift a little bit how we do things and.

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00:11:37.739 --> 00:11:46.469
I know with some of the procedures now that we're involved in, um, we're having folks take pictures of things. We're having.

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00:11:46.469 --> 00:11:50.219
Looking at how we can incorporate.

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00:11:51.328 --> 00:11:57.568
Webex is to view things and to look at things. So.

109
00:11:57.568 --> 00:12:04.318
The world necessitates some changes in how we do things, but we are adjusting. Well, I believe.

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00:12:10.918 --> 00:12:16.438
So, if identified by E, that a more of a review is needed.

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00:12:16.438 --> 00:12:25.318
Then it's done in accordance with their guideline guidelines or guideline 154.

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00:12:25.318 --> 00:12:28.408
Which is the quality of services review.

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00:12:28.408 --> 00:12:35.158
Also guideline 56, which is quality of services a focus review.

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00:12:35.158 --> 00:12:41.278
And then in conjunction with the directive 4.080.

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00:12:41.278 --> 00:12:45.089
Which is the, um, quality management framework.

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00:12:45.089 --> 00:12:56.879
Uh, directive and they will help us to identify if there's an additional review required from their end.

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00:12:56.879 --> 00:12:59.938
As they assist us in this whole process.

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00:13:04.589 --> 00:13:11.938
So the next step then is within 10 business days, we have to report on our findings.

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00:13:11.938 --> 00:13:16.828
We have to report, of course, which is critical to the individual.

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00:13:16.828 --> 00:13:22.408
The, um, assistant department director, the chief behavior analyst.

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00:13:22.408 --> 00:13:27.149

The regional office directors to provide a relations.

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00:13:27.149 --> 00:13:36.178

The Guardian, the providers and the support coordination. So once we review the materials and the information.

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00:13:36.178 --> 00:13:41.308

We will then report out within 10 business days and of course, all along.

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00:13:41.308 --> 00:13:45.749

We're keeping track of things in the, the tracker that we've identified.

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00:13:48.389 --> 00:13:53.519

So, Here's that the secondary process of things.

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00:13:53.519 --> 00:13:56.548

And the review and the plan, so.

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00:13:56.548 --> 00:14:01.769

Um, once a determination is made.

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00:14:01.769 --> 00:14:07.139

Whether it is, or is not a prohibited procedure or practice.

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00:14:07.139 --> 00:14:11.818

Then we'll follow these chain of events.

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00:14:11.818 --> 00:14:16.469

To help develop a plan for the discontinuation.

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00:14:16.469 --> 00:14:23.818

Of that prohibited procedure, and that will vary as a function of the.

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00:14:23.818 --> 00:14:28.769

Procedure and the safest route to.

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00:14:30.389 --> 00:14:33.658

Yet to the point of discontinuing, it.

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00:14:36.808 --> 00:14:44.308

Can pause a minute, Roger Kay do we have anything in the, um, question or chats at this point?

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00:14:47.609 --> 00:14:52.558

We do read and let me, um, get the the 1st question.

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00:14:52.558 --> 00:14:57.778

He said, what would be an, an example of prohibitive practice that is not reportable.

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00:14:57.778 --> 00:15:04.619

That's a good question and there's actually an example in the guideline, but I will share it with folks right now.

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00:15:04.619 --> 00:15:15.899

So, a specific situation that would be prohibited that wouldn't meet a reportable event is when there are individualized strategies for the person that include the use.

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00:15:15.899 --> 00:15:20.999

Of law enforcement or emergency personnel for behavioral control. So 1 of the.

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00:15:20.999 --> 00:15:32.849

1 of the more recent prohibitive practices that have been added since directive 4.300 and now the new behavioral support CSR is the use of law enforcement.

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00:15:32.849 --> 00:15:38.219

As a, as needed our PR and strategy for an individualized support. So what that means is.

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00:15:38.573 --> 00:15:52.374

It's not, it's not a general policy of an organization to call the cops in an emergency, but it's an individualized strategy and an individualized plan to address problem behavior with cops or hospitals.

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00:15:52.703 --> 00:15:53.783

So if if.

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00:15:54.448 --> 00:15:58.708

A safety crisis plan or behavior, support plan or an is.

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00:15:58.708 --> 00:16:03.749

Is discovered that has these strategies in it that would be a prohibited practice, but it wouldn't yet meet.

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00:16:03.749 --> 00:16:13.198

Reportable event, because unless the team is actually called the cop, so if the person has a safety strategy that includes calling the cops, that's prohibited.

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00:16:13.198 --> 00:16:21.749

But when they call the cops that that would be a reportable event so that that's 1 situation, that might not be reportable. If they haven't actually used a strategy. Jen.

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00:16:26.548 --> 00:16:30.869

And we did have, uh, a couple more questions we had, um.

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00:16:30.869 --> 00:16:43.168

1, it says what about incoming seeking services, new incoming applicant situation? Is this only toward active funded, uh, service delivered circumstances?

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00:16:48.178 --> 00:16:51.658

So, yeah, I'm going to try to.

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00:16:51.658 --> 00:17:01.979

Translate what I think that question means. I think that question means that if you get a new person who who's just coming into funding or soon will come into funding, or is funded.

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00:17:01.979 --> 00:17:05.999

Maybe through a different mechanism so, like.

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00:17:05.999 --> 00:17:12.058

They are getting funding from children's division, but they're using 1 of our providers. What what happens to them.

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00:17:12.058 --> 00:17:15.598

And so this is actually a really good question.

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00:17:15.598 --> 00:17:25.019

Um, the way the works, we really only have authority over services that we pay for. So that's services that are funded through general revenue or through Medicaid waiver.

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00:17:25.019 --> 00:17:30.568

Um, so those are those are services that we absolutely have authority over and this.

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00:17:30.568 --> 00:17:38.669

Guideline applies to however, if anybody's in our system, even if they're funded in a different way, we still have the obligation to.

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00:17:38.669 --> 00:17:49.558

Point out and work with teams that are using things that are prohibited in our system. And so you definitely should still follow this process even.

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00:17:49.558 --> 00:17:52.709

If there's a different funding stream in place that.

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00:17:52.709 --> 00:17:56.669

Isn't damage funded so like children's division.

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00:17:56.669 --> 00:18:03.628

And definitely should follow this guideline if the person's coming into our services. Because at the moment we start paying for their services.

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00:18:04.463 --> 00:18:18.503

Then this is a problem and so we still want to address it. The overall goal here is to help reduce and eliminate the use of these highly dangerous, highly restrictive interventions that we have assured the federal government that we will not use on our system.

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00:18:18.503 --> 00:18:22.074

So, it really is just best practice to.

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00:18:22.378 --> 00:18:26.278

Be identifying these things as they come up and trying to eliminate them.

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00:18:26.278 --> 00:18:33.719

Um, so hopefully that answered the question and I see 1 more question as well and and.

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00:18:33.719 --> 00:18:39.269

Lori, thank you for asking that says, well, Q, E be notified as well of the findings.

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00:18:42.509 --> 00:18:47.848

Yes, of course. Um.

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00:18:47.848 --> 00:18:57.719

And I wanted to go back and add a little bit to, um, what Lucas had mentioned, uh, you know, we are always working with, uh, folks from.

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00:18:57.719 --> 00:19:01.709

Children's division as they, um.

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00:19:01.709 --> 00:19:04.709

Bring individuals into.

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00:19:04.709 --> 00:19:09.358

The services that we may provide, and, of course, ultimately.

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00:19:09.358 --> 00:19:13.138

Those individuals in children's division will transfer.

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00:19:13.138 --> 00:19:20.189

Um, to our services fully, so we always try to work to help.

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00:19:20.189 --> 00:19:26.939

Those teams, um, fade those practices, um.

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00:19:26.939 --> 00:19:32.219

So that it is easier.

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00:19:32.219 --> 00:19:35.459

When they come into services, we also.

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00:19:35.459 --> 00:19:43.888

Work with, um, teams and families as individuals enter services. I know I've had some situations where.

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00:19:43.888 --> 00:19:47.909

The individual was coming into services.

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00:19:47.909 --> 00:19:53.699

And had a an enclosed type situation.

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00:19:53.699 --> 00:20:00.209

We are dealing with some situations with children's division where we're trying to help teams with.

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00:20:00.209 --> 00:20:06.209

Um, transportation issues and individuals being supported.

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00:20:06.209 --> 00:20:12.989

Um, in those situations, so we always try to extend the offer.

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00:20:12.989 --> 00:20:16.679

Of support to those teams as they.

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00:20:16.679 --> 00:20:21.028

Um, navigate through the, the process.

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00:20:23.398 --> 00:20:27.209

So, thanks, Rob for bringing those questions to our attention.

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00:20:27.209 --> 00:20:31.739

You're welcome, there's, there's 1 more, so okay, great.

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00:20:31.739 --> 00:20:40.943

Let me put that out there. It says, I didn't realize that calling for emergency personnel support police had, um, had been added to prohibited practices.

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00:20:41.394 --> 00:20:52.433

Should it be more, uh, a more general statement about following agency guidelines if the agency has a hands off policy and calling 901 is our only viable response to dangerous problem behaviors.

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00:20:55.554 --> 00:21:05.604

No, it shouldn't be a more general statement. It already is general enough in my opinion, and this is 1 of the newer additions, but it's still at least 5 years old.

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00:21:05.604 --> 00:21:14.993

It's been in place since 2016, and just again an agency should and can have a policy that they call emergency personnel in an emergency. Um, but if.

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00:21:16.979 --> 00:21:20.068

You are supporting a person that needs.

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00:21:20.068 --> 00:21:24.808

Um, some sort of physical crisis management, or some sort of response.

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00:21:25.824 --> 00:21:29.243

Then that is a need that you should be addressing through strategies.

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00:21:29.243 --> 00:21:42.473

And so, what this prohibitive practice is talking about is when you failed to plan and adequately support a person and fall back on the use of restrictive, reactive strategies, like law enforcement and emergency personnel.

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00:21:42.778 --> 00:21:55.318

Um, when when, um, other strategies are more appropriate, so if it's a true emergency, and it's never happened before, and you, you call the cops as because that's your company policy, then that's.

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00:21:55.318 --> 00:21:59.519

That's an emergency situation that you're addressing, but when this is a repeated occurrence.

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00:21:59.519 --> 00:22:03.868

To the point that you have it written down that that's what you're gonna do in these situations and.

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00:22:03.868 --> 00:22:15.088

That that becomes prohibitive because it you can't have an individualized strategy for person where you're using cops as, as needed behavioral support. You should have additional strategies.

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00:22:15.088 --> 00:22:21.659

Um, and proactive interventions to minimize the chance, we would be utilizing law enforcement or hospitals.

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00:22:28.679 --> 00:22:36.479

Great thanks for those additions, Lucas and thank you rod, as always for monitoring the chat. Bot?

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00:22:36.479 --> 00:22:41.848

And the question, so let's continue on.

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00:22:44.278 --> 00:22:54.509

So, the results of the review, um, once we've done our review, um, and it's indicated that there is a prohibited practice being implemented.

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00:22:54.509 --> 00:22:59.249

Um, we refer all involved providers to provide a relations.

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00:22:59.249 --> 00:23:06.509

And at that point, we recommend to provider relations that a critical status plan. B.

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00:23:06.509 --> 00:23:16.679

Initiated we also notify the and indicate that a critical status plan has been recommended.

206

00:23:16.679 --> 00:23:20.219

We also make entry into IQ. M. S. D.

207

00:23:20.219 --> 00:23:25.199

And the tracker that we've indicated before is updated.

208

00:23:29.699 --> 00:23:42.358

And so our recommendations are to discontinue the practice immediately if possible. And again, this is a process of taking a look at the elements of which.

209

00:23:42.358 --> 00:23:49.439

The prohibitive practice is that the safety of the individual, the safety of the staff.

210

00:23:49.439 --> 00:23:53.939

And the elements that need to be developed to.

211

00:23:53.939 --> 00:24:00.148

Discontinue that practice if the practice cannot be discontinued safely.

212

00:24:00.148 --> 00:24:07.439

Then the area behavior analyst, um, associated with that situation.

213

00:24:07.439 --> 00:24:14.038

And as we move to a more statewide approach, it may not necessarily be the.

214

00:24:14.038 --> 00:24:17.219

Um, every behavior analyst, uh.

215

00:24:17.219 --> 00:24:27.388

In the what is considered your region, but we will try to make distribution so that, um, everyone is supported.

216

00:24:27.388 --> 00:24:34.469

Appropriately as a team to develop a plan. So, um.

217

00:24:34.469 --> 00:24:39.509

And I'll give an example if I have 5.

218

00:24:39.509 --> 00:24:44.128

Prohibited practice teams on my caseload.

219

00:24:44.128 --> 00:24:49.709

And the eastern region has 3 and the.

220

00:24:49.709 --> 00:25:00.778

Central region has 2 then maybe 1 of the other area behavior analysts will take the lead on helping the teams as they move forward.

221

00:25:00.778 --> 00:25:04.048

So, as we go to a more statewide approach.

222

00:25:04.048 --> 00:25:09.358

Um, don't be surprised if there might be other people involved in the process.

223

00:25:14.578 --> 00:25:24.479

So, what is our goal when we develop a plan? Well, as a team, our goal is to fade that prohibitive practice as quickly.

224

00:25:24.479 --> 00:25:29.009

And safely as possible, and I know that has been a.

225

00:25:30.568 --> 00:25:34.679

A long standing question with teams. Oh, well.

226

00:25:34.679 --> 00:25:46.648

What do you mean? We have to fade it you know do we have to do it tomorrow? There's always that concern. Oh, do we have to stop tomorrow? And, you know, the answer is no what we do.

227

00:25:46.648 --> 00:25:54.808

Working with the team is to evaluate the situation we look at added supports and services for the provider.

228

00:25:54.808 --> 00:26:02.999

And the providers, and our objective is lead to the development of positive, proactive, preventative strategies.

229

00:26:02.999 --> 00:26:06.538

And to faith, that procedure.

230

00:26:06.538 --> 00:26:10.888

As safely as possible over time.

231

00:26:10.888 --> 00:26:18.269

Um, the plan is provided monthly, um, so, monthly, we provide.

232

00:26:18.269 --> 00:26:21.689

That information to the regional office directors.

233

00:26:21.689 --> 00:26:28.588

To the chief behavior, analyst and provider relations and of course, you know, with.

234

00:26:28.588 --> 00:26:36.929

Recommended that a critical status plan be developed so, those meetings and those.

235

00:26:38.878 --> 00:26:43.528

Teams are meeting on a monthly basis and so it may be.

236

00:26:43.528 --> 00:26:49.169

Part of a the critical status plan part of the process that we're doing.

237

00:26:49.169 --> 00:26:55.558

Together with everyone else, so.

238

00:26:55.558 --> 00:27:02.578

Um, all actions that are taken are entered into the tracker that we've identified previously.

239

00:27:02.578 --> 00:27:07.798

The, um, had are provided an update.

240

00:27:07.798 --> 00:27:14.429

The other thing that happens is a referral is made to the behavior support review committee.

241

00:27:14.429 --> 00:27:18.028

And these referrals have priority.

242

00:27:18.028 --> 00:27:23.338

Over other individuals that are potentially being reviewed, so.

243

00:27:23.338 --> 00:27:32.548

If we find that there is a prohibited procedure that a team has executed in it's part of the review process.

244

00:27:32.548 --> 00:27:39.628

They will be given priority in the behavior support review committee review process.

245

00:27:39.628 --> 00:27:47.278

In addition if it hasn't already been done, or referral will be made to the due process review committee.

246

00:27:52.439 --> 00:27:58.888

So, the, our plan, of course, um, at a minimum, there should be a monthly review by the team.

247

00:27:58.888 --> 00:28:10.769

And it may be more as deemed necessary, or there may be other elements. So there might be a monthly review with a larger team. And then, in between that, there are.

248

00:28:10.769 --> 00:28:15.148

Small side meetings with the behavior analysts.

249

00:28:15.148 --> 00:28:20.818

Or with the provider, or with other elements of the team.

250

00:28:23.729 --> 00:28:28.858

Those meetings will occur, of course, until the practices discontinued.

251

00:28:28.858 --> 00:28:32.219

And the reports will be made back to.

252

00:28:32.219 --> 00:28:41.489

The regional office director, provider relations, and the temp if they aren't already involved in the process.

253

00:28:46.528 --> 00:28:50.338

Injuries will also be made into IQ and.

254

00:28:50.338 --> 00:28:57.989

And, of course, those will be closed when the practice is discontinued.

255

00:28:57.989 --> 00:29:01.499

And, of course, connections.

256

00:29:01.499 --> 00:29:06.058

Those will be, um, the connection system will.

257

00:29:06.058 --> 00:29:09.868

Integrate all of this and.

258

00:29:09.868 --> 00:29:14.818

There may be some revisions in the process and and how things are updated.

259

00:29:14.818 --> 00:29:22.048

And how the process is updated, as we move forward to, as we integrate with connection.

260

00:29:26.189 --> 00:29:32.429

So want to extend the opportunity for any additional questions.

261

00:29:32.429 --> 00:29:39.778

Um, so Rob, what do we have in the chat box there?

262

00:29:41.608 --> 00:29:49.828

The 1st question asks, how does the new incoming applicant consumer fit into this? Into the reporting changes?

263

00:29:57.989 --> 00:30:01.588

This is Lucas. I, I don't necessarily understand the question.

264

00:30:01.588 --> 00:30:07.378

Could whoever wrote that question? Could you kind of add additional contacts or maybe Rita you have.

265

00:30:07.378 --> 00:30:17.189

Some thoughts well, I was thinking, perhaps that this ties back to, um, somebody coming into services.

266

00:30:17.189 --> 00:30:23.189

And their question being, you know, if we've got somebody who is in their natural home.

267

00:30:23.189 --> 00:30:26.338

And they have a prohibited procedure.

268

00:30:26.338 --> 00:30:30.118

Um, I I know we've confronted some situations where.

269

00:30:30.118 --> 00:30:35.788

Potentially timeout was used in a home environment.

270

00:30:35.788 --> 00:30:43.409

And, of course, timeout is is no hunger, something that we use within the state. So.

271

00:30:43.409 --> 00:30:48.388

You know, we can't continue that in our system as they.

272

00:30:48.388 --> 00:30:55.199

Acquire funding and so maybe that's the, the question that they're asking.

273

00:30:55.199 --> 00:30:59.278
Okay, yeah, no, that's good clarification. And so.

274
00:30:59.278 --> 00:31:02.548
Then we would just identify it at that time and we.

275
00:31:02.548 --> 00:31:14.699
The team would work with 1 of the behavior analyst, and the necessary services that the person would have to have to safely discontinue it until it was discontinued. I, I would see it.

276
00:31:14.699 --> 00:31:21.118
Similar to any other situation so, at the moment that we start paying for it, it it is prohibited, but.

277
00:31:21.118 --> 00:31:25.199
That doesn't mean that, like Rita said that we would.

278
00:31:25.199 --> 00:31:31.078
Yank a safety strategy out without a replacement so we would work with the team to.

279
00:31:31.078 --> 00:31:36.568
Ensure that the person could be integrated into our services in a way. That's safe.

280
00:31:36.568 --> 00:31:50.638
And successful our next question, they asked, they say you mentioned potential, need to take pictures for follow up. How is this done in a HIPPA compliant way?

281
00:31:53.669 --> 00:32:02.159
Okay, well, I can use an example. Um, we've been doing some reviews of some.

282
00:32:02.159 --> 00:32:07.648
In close Cribs areas so we've actually taken pictures of.

283
00:32:07.648 --> 00:32:12.209
Um, the beds or the enclosed.

284
00:32:12.209 --> 00:32:17.128
And, um, shared that across, of course, with.

285

00:32:17.128 --> 00:32:23.338
Encrypted emails and information.

286

00:32:23.338 --> 00:32:27.179
So, that's how we've done it in that.

287

00:32:28.288 --> 00:32:36.358
Procedure again, you know, we're, we're all navigating uncharted territory so we, um.

288

00:32:38.939 --> 00:32:42.959
Are looking at, uh, different ways to do that.

289

00:32:42.959 --> 00:32:49.798
So, um, we're not taking pictures. We haven't taking pictures of the individuals. What we've done is taken, um.

290

00:32:49.798 --> 00:32:53.249
Pictures of the environment.

291

00:32:53.249 --> 00:33:03.929
So our next question says to clarify the law enforcement should not be part of the treatment plan.

292

00:33:06.239 --> 00:33:12.118
Yes, it should not that it's that should not be 1 of the person's individualized strategies.

293

00:33:17.548 --> 00:33:27.449
Okay, lots of questions and thank you all for the questions. The next 1 is, will there be additional training for and providers to write crisis safety plans and most.

294

00:33:27.449 --> 00:33:31.378
Include calling the police.

295

00:33:36.808 --> 00:33:47.009
So, we can link the list of trainings that we've previously provided on safety crisis plans. Um, after folks have had a chance to review those.

296

00:33:47.009 --> 00:33:58.288

If there are still questions, we're happy to answer them. Um, and yeah, we, we are concerned with the amount of use of law enforcement as behavioral control for folks with challenging behavior.

297

00:33:58.288 --> 00:34:01.888

Somebody I think mentioned earlier about.

298

00:34:01.888 --> 00:34:11.518

Law enforcement use being generally described as what you would do if you're a hands off agency. And so 1 of the things that I I want to challenge folks to think about is.

299

00:34:11.813 --> 00:34:23.903

If if you're an agency, that's a hands off or restraint, free agency. So that means, you don't do physical crisis management. How do you determine that somebody is an appropriate fit for your organization?

300

00:34:23.903 --> 00:34:31.914

How do you determine that you actually can support them safely? If they have a history of needing that level of response, a fiscal crisis response.

301

00:34:32.574 --> 00:34:40.463

And so what I would challenge folks to do is to think carefully about who, who they select to support and ensure that they actually can provide the level of support that's needed.

302

00:34:40.739 --> 00:34:53.998

1 of the things that we know, um, just generally is the, the involvement of law enforcement specifically if they're not trained on how to interact with the folks that we support can be tragic. Um.

303

00:34:53.998 --> 00:34:57.208

And they're not necessarily the best, uh.

304

00:34:57.684 --> 00:35:07.313

Escalators and responders in situations that are heightened, and we typically need more skilled folks that have knowledge about the person.

305

00:35:07.614 --> 00:35:12.864

The other thing that we know is, we're currently still in the middle of a pandemic and there just isn't the level of resources.

306

00:35:13.139 --> 00:35:23.938

Which were already streaming it before the pandemic to be utilizing emergency departments and law enforcement to support folks in ways that could better be utilized with.

307

00:35:23.938 --> 00:35:27.509

Appropriate services and appropriate person center planning.

308

00:35:29.699 --> 00:35:33.838

And and to add to that Lucas, I think we need to.

309

00:35:35.639 --> 00:35:39.119

To be mindful of the fact that, um.

310

00:35:39.119 --> 00:35:51.028

You know, community relationships may be strained if there is an over taxing of those emergency service personnel, which could create.

311

00:35:51.324 --> 00:36:02.454

You know, additional backlash, so to speak for our system and the individual support it. So I think that's another element, although it isn't specific to the individual.

312

00:36:02.454 --> 00:36:10.043

I think it's a very important global issue to ensure that we are not.

313

00:36:10.289 --> 00:36:13.289

Over taxing that.

314

00:36:13.289 --> 00:36:17.818

Part of the community based resources that we have.

315

00:36:20.938 --> 00:36:30.898

And I believe this is a little bit of a follow up question and I said, what about the people we work for calls police all the time? How do you look our work with this?

316

00:36:32.759 --> 00:36:42.869

Yeah, that's a good question. And so that would be a good opportunity for the team to come together and determine if there's a need for additional services. So a behavior analyst.

317

00:36:42.869 --> 00:36:47.849

So, getting authorizations for behavior services would sound like a really good approach in that situation.

318

00:36:52.349 --> 00:36:59.309

Some additional services that might be considered given that situation, but might be counseling too.

319

00:36:59.309 --> 00:37:05.759

You know, and to determine why the person is calling emergency services. So.

320

00:37:05.759 --> 00:37:09.119

Again, I'd go for the behavior analyst and.

321

00:37:09.119 --> 00:37:13.588

See, what other additional services might be, um, warranted.

322

00:37:15.958 --> 00:37:24.179

I want to make sure I don't miss anybody here in the chatbox. I see a question previous thing that states who coordinates the monthly review.

323

00:37:32.878 --> 00:37:42.389

Well, at this point, um, the associated area behavior, analysts have been coordinating the, the meeting so to speak.

324

00:37:42.389 --> 00:37:55.168

Um, uh, you know, I think it, um, really anyone in the the team can be the facilitator of that coordination once it's initially established. But of course.

325

00:37:55.168 --> 00:37:58.438

You know, the responsibility for the.

326

00:37:58.438 --> 00:38:01.588

The process is with, um.

327

00:38:03.929 --> 00:38:10.949

The error behavior analysts to ensure that that prohibited practices discontinued in the long run.

328

00:38:10.949 --> 00:38:14.159

And I think it's a team responsibility.

329

00:38:15.269 --> 00:38:19.079
Lucas mylanta please chime in.

330

00:38:20.880 --> 00:38:30.869
Nope, you answered it perfect. You know, I think it, it's a question kind of like, um.

331

00:38:30.869 --> 00:38:45.659
You know, who, who writes the safety crisis plan the team writes the safety crisis plan. The support coordinator happens to be the person who is responsible for scribing and putting it into the isb. So.

332

00:38:45.659 --> 00:38:58.500
Um, that that ranks around the, the same 1. um, I saw also that someone had put in the chat there. Um, what's the the CSR and the CSR is 9 CSR.

333

00:38:58.500 --> 00:39:02.670
45 dash 3.090.

334

00:39:02.670 --> 00:39:09.900
And if you Google, it, it will come up, um, wanted to remind people that, you know, the.

335

00:39:09.900 --> 00:39:16.590
The definition, or the list of prohibited procedures is, um.

336

00:39:16.590 --> 00:39:21.059
In section 2 under rights of the individual.

337

00:39:21.059 --> 00:39:25.980
And a restrictive intervention, so they're all listed there.

338

00:39:25.980 --> 00:39:31.260
But again, that's not the.

339

00:39:31.260 --> 00:39:34.889
The be all end all, you know, something doesn't look right.

340

00:39:34.889 --> 00:39:40.889
Anyone has an obligation to report it and to identify.

341

00:39:40.889 --> 00:39:47.070

Um, a situation, so I think that's always a, a critical factor is that, um.

342

00:39:47.070 --> 00:39:50.550

You know, well, it doesn't fit that. Well, you know.

343

00:39:51.900 --> 00:39:55.739

What a team take an approach to look at it.

344

00:40:00.030 --> 00:40:10.829

The next question, because there are very few BCBS in the state what is the division doing to attempt to get more behavioral service providers, especially in rural areas.

345

00:40:12.449 --> 00:40:15.989

So that's a good question. And I will talk.

346

00:40:15.989 --> 00:40:23.489

Broadly about what we've been working on for better part of a decade in the state to address the situation. So.

347

00:40:23.784 --> 00:40:36.985

There's a couple there's a couple pieces to unwrap this question. So the 1st 1 is Yep, you're right. There aren't enough behavior analysts in the state. And we were traveling to conferences outside the state.

348

00:40:36.985 --> 00:40:39.744

We were actively attempting to recruit and get.

349

00:40:40.019 --> 00:40:44.849

Provided is interested to come in. I've been involved in several.

350

00:40:44.849 --> 00:40:52.170

Conversations over the last couple of months with national organizations that provide behavior services to talk about.

351

00:40:52.170 --> 00:40:58.590

Um, potentially them coming into our state. Um, and so we're working really hard to increase the number of providers that we have.

352

00:40:58.590 --> 00:41:07.170

We're also working really hard on increasing the skill of the providers that we currently have through things. Like the behaviors port review committee through are growing together.

353

00:41:07.170 --> 00:41:10.829

Um, professional learning communities to try to help, um.

354

00:41:10.829 --> 00:41:20.250

Behavior analyst be more confident in leveraging their skills to support. People have challenging behaviors. The other thing that we're working really hard on is trying to help build.

355

00:41:20.250 --> 00:41:25.800

Proactive and preventative supports, um, across the state so that people don't get to the point where they.

356

00:41:25.800 --> 00:41:31.289

End up in the hospital, or, uh, end up in jail, or, um, end up with the cops being called.

357

00:41:31.289 --> 00:41:35.760

And that includes our efforts to, uh.

358

00:41:35.760 --> 00:41:39.329

Work with agencies to become tier supports agencies.

359

00:41:39.329 --> 00:41:49.644

Um, it also includes helping teams do better planning at the beginning so that we can kind of get ahead of some of this stuff that can be foreseen, which also includes when people move.

360

00:41:49.644 --> 00:41:59.605

So, 1 of the things that we have noticed, and I'm sure you all are aware of is, um, sometimes people move to places that don't have a lot of supports. And so, 1 of the things again, challenging.

361

00:41:59.940 --> 00:42:06.630

All of us on this call to think about is, is that the right move for the person just because there's a provider that has a bed.

362

00:42:06.630 --> 00:42:18.420

Um, in a remote location, is that the best place for a person to move when they don't have the subsequent services that that person definitely needs, including behavior services so, again, um, there's no, 1.

363

00:42:18.420 --> 00:42:28.440

Simple fix for this problem. There's no magic pill. There's no silver bullet, so to speak to kind of slay this monster. It's a lot of little things that we're doing.

364

00:42:28.440 --> 00:42:33.389

Um, and it's trying to partner better with teams to to do better planning up front to.

365

00:42:33.389 --> 00:42:37.710

Um, avoid some of these things that are easily foreseeable and these.

366

00:42:37.710 --> 00:42:42.420

Easier to avoid if we do planning up front. So that's really I think the, the crux of it.

367

00:42:45.000 --> 00:42:51.239

You know, Lucas, there are a couple of other things I think that we are trying to do and.

368

00:42:51.239 --> 00:42:54.480

Some of that is, we are trying to.

369

00:42:54.480 --> 00:43:03.269

Supervise up and coming in the process. We are also partnering with our.

370

00:43:03.269 --> 00:43:08.969

State operated programs also.

371

00:43:08.969 --> 00:43:12.599

Um, work together with them to.

372

00:43:12.599 --> 00:43:22.260

Develop behavior analyst, um, as you said, some of those positive, proactive, preventative strategies. Of course, we have the.

373

00:43:22.260 --> 00:43:26.250

A provider support committee, which is a rich.

374

00:43:26.250 --> 00:43:35.340

Avenue for learning and developing of providers and skills, um, and also for sharing of resources.

375

00:43:35.340 --> 00:43:46.525

That they had a really awesome presentation this last time, or 1 of the last times about remote support and and looking at resources.

376

00:43:46.525 --> 00:43:52.735

We don't often use as readily, um, and taking advantage of those.

377

00:43:52.980 --> 00:44:04.500

Tiered supports elements that we have the positive support consultants and as we develop that 2nd tier those risk prevention consultants.

378

00:44:04.500 --> 00:44:09.780

So, I think, you know, like you said, many moving parts, not only.

379

00:44:09.780 --> 00:44:20.039

To address the, the needs for, but also to address the needs of the entire system.

380

00:44:20.039 --> 00:44:24.269

That really needs that continuum of supports.

381

00:44:39.119 --> 00:44:47.969

Right. Rod are there any other questions in the chat box that we perhaps.

382

00:44:47.969 --> 00:44:52.710

Overlooked or need to address.

383

00:44:52.710 --> 00:45:03.480

I do not see any other questions. However, I did put the link to the, uh, tiered supports a website in the chat box for everyone.

384

00:45:05.340 --> 00:45:16.530

Great and, um, Jay, I believe you were going to also put in the, the chat for everyone, the links to the guidelines and the, um.

385

00:45:16.530 --> 00:45:21.989

Csr, so that everyone has that. Okay.

386

00:45:21.989 --> 00:45:27.420

Correct they're in there twice. Okay. Excellent. Thank you so much. Okay.

387

00:45:28.860 --> 00:45:34.409

I've also added several other links as we've been talking today. So I've added, um.

388

00:45:34.409 --> 00:45:39.090

Aba services link I've added.

389

00:45:39.090 --> 00:45:42.840

Behavior services, link of information, um.

390

00:45:42.840 --> 00:45:53.909

Safety safety crisis plan and question and answer session is a YouTube webinar presentation that was that was recorded that I added in there.

391

00:45:54.594 --> 00:46:09.295

So, there's a variety of links in the chat box for everyone to check and look at. I have just the regular safety crisis plan link that is from these are all from the damage website on there.

392

00:46:09.295 --> 00:46:11.574

Nothing. I just, they're nothing I created.

393

00:46:11.849 --> 00:46:15.900

They're out there for everyone to look at and everyone to, um.

394

00:46:15.900 --> 00:46:26.789

To view, and to learn from, and if anyone needs any additional support, please contact someone on this committee or someone else at the regional office level.

395

00:46:26.789 --> 00:46:33.719

I can support you. Great. Thank you so much, Kay for putting all those links in there. Um.

396

00:46:33.719 --> 00:46:39.269

Those are critical elements of of training that are actually already available.

397

00:46:39.269 --> 00:46:44.849

And his case said, if, you know, once you've gone through those, that there are still questions.

398

00:46:44.849 --> 00:46:48.119

Please reach out to us, you.

399

00:46:48.119 --> 00:46:57.929

Positive support consultants, your risk prevention consultants, or the intensive, um, system's consultants or area behave for analysts.

400

00:46:57.929 --> 00:47:04.440

I'm going to reach out to my associates to check to see.

401

00:47:04.440 --> 00:47:12.420

If you folks have anything else, you'd like to add to the, um, information that we've presented this morning.

402

00:47:12.420 --> 00:47:23.190

Anything else for me to thank for asking.

403

00:47:26.400 --> 00:47:36.300

Uh, Lucas, thank you. Uh, just to circle back to what I want, though. Hopefully the main takeaway here.

404

00:47:36.300 --> 00:47:45.599

For folks is that the division has a standard process that's in writing now on what we're gonna do in these situations. It really is the process that we've been doing.

405

00:47:45.599 --> 00:47:55.320

For 6 years or more at this point, but now it's in writing. So people can have a set sense of kind of what to expect.

406

00:47:55.320 --> 00:47:58.889

And and no situation would we.

407

00:47:58.889 --> 00:48:05.010

Yank needed supports away we would work with the team to reduce things safely.

408

00:48:05.485 --> 00:48:17.425

Understanding that there are certain practices that are prohibited and have to be discontinued eventually, but we have a long history of working closely with teams to do this safely and successfully. And so we're going to continue to do that.

409

00:48:18.025 --> 00:48:21.625

Um, so those are the major takeaways that hopefully people will get from this.

410

00:48:23.789 --> 00:48:33.780

Lucas, you bring up a, an amazing point is that we will take the time to work with teams to safely.

411

00:48:33.780 --> 00:48:44.369

Fade those procedures over time. I know in situations I haven't been involved with. We've taken anywhere up to 2 or 3 years to.

412

00:48:44.369 --> 00:48:50.909

To safely fade things and I know Melissa has worked effectively with teams to fade procedures.

413

00:48:50.909 --> 00:48:53.909

And so his Lucas, so it's not a matter of.

414

00:48:53.909 --> 00:48:59.820

Oh, you have to take that away tomorrow. That the idea is that we.

415

00:48:59.820 --> 00:49:07.949

Get things in place, we let the data lead us and we do this safely and successfully for everyone.

416

00:49:10.769 --> 00:49:18.030

Um, I'm sorry, but, um, okay, can you put those links back in the chat myself? And rod don't see them either.

417

00:49:18.030 --> 00:49:30.179

Um, they're not showing up in the chat. Sure. No problem. I put them to all attendees. Is that how I should do it?

418

00:49:32.130 --> 00:49:35.369

It shouldn't be put to yes, everyone.

419

00:49:37.289 --> 00:49:41.190

But for some reason, they're not showing up and rod looked as well.

420

00:49:41.190 --> 00:49:44.309

I think that just the.

421

00:49:44.309 --> 00:49:51.630

The team can't see them. I'm getting. I'm getting other reports that everybody sees them.

422

00:49:51.630 --> 00:49:55.530

Oh, okay, well that's what matters.

423

00:49:55.530 --> 00:50:00.239

Sure, thank you.

424

00:50:05.760 --> 00:50:11.190

All right, well, I think that's all we have for this morning. I want to thank the, um.

425

00:50:11.190 --> 00:50:21.269

My associates for, um, all the input and all the, uh, sharing that we've done this morning and thank you for all of those who attended.

426

00:50:21.269 --> 00:50:26.250

And again, this will be recorded and available.

427

00:50:26.250 --> 00:50:34.230

Um, for everyone to review, when they have, maybe a lot of information presented this morning.

428

00:50:34.230 --> 00:50:39.780

Uh, you may need some time to digest and if there are any additional questions.

429

00:50:39.780 --> 00:50:50.309

We, of course, will develop that a Q and a, um, process and we might even, uh, initiate a.

430

00:50:50.309 --> 00:50:57.929

An additional Q and a opportunity wants people have some time to really.

431

00:50:57.929 --> 00:51:03.300

Integrate this information into their repertoire so.

432

00:51:03.300 --> 00:51:10.139

I have nothing else for this morning so I want to thank everyone and have a great day.