Texas Department of State Health Services YES Waiver

LOCAL MENTAL HEALTH AUTHORITY RESPONSIBILITIES PROGRAM TRAINING REQUIREMENTS

2200.2

The local mental health authority (LMHA) must ensure that prior to providing Waiver services and/or participating on Child and Family Team, all LMHA staff members and direct service providers receive program training in accordance with the following:

YES WAIVER

LMHA staff and direct service providers must receive YES Waiver (Waiver) training from the Department of State Health Services (DSHS) that consists of:

- Waiver overview and background;
- 2. Waiver service array;
- 3. Provider qualifications;
- 4. Service authorization request development; and
- 5. Use of Clinical Management for Behavioral Health Services (CMBHS).

SYSTEMS OF CARE AND WRAPAROUND

Within the first three months of hire, each LMHA providing direct service to YES participants must complete the following online trainings on the Introduction to Systems of Care and the Wraparound Initiative service delivery method:

- What's This Thing Called Wraparound?;
- 2. Team Roles in Wraparound; and
- 3. Overview of the Youth Empowerment Services (YES) Waiver.

The online trainings and additional information are available at: http://www.txsystemofcare.org/

INVOLUNTARY RESTRAINT

LIMITED USE OF PHYSICAL RESTRAINT The limited use of physical restraints is permitted in the delivery of YES Waiver (Waiver) services only when:

- Necessary to prevent imminent death or substantial physical harm to the Waiver participant; or
- 2. Necessary to prevent imminent death or substantial physical harm to another; and
- 3. Less restrictive methods have been attempted and failed.

Use of restraints must be used in accordance with 25 TAC §415, Subchapter F, available at:

http://texreg.sos.state.tx.us/public/readtac\$ext.ViewTAC?tac_view= 5&ti=25&pt=1&ch=415&sch=F&rl=Y

When used, restraints must be used for the shortest period of time necessary and terminated upon the participant demonstrating release behaviors specified by the ordering physician.

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TRAINING

In accordance with law, the LMHA must ensure staff members and direct service providers receive annual training in the safe use of physical restraints. Training must focus on maintaining the safety, well-being, and dignity of participants who are physically restrained.

In addition, the LMHA must take into consideration information that could contraindicate or otherwise affect the use of physical restraint, including, but not limited to:

- 1. Techniques, methods, or tools that would help the client effectively cope with his or her environment;
- 2. Pre-existing medical conditions or any physical disabilities or limitations, including substance abuse disorders, that would place the participant at greater risk during restraint;
- Any history of sexual or physical abuse that would place the participant at greater psychological risk during restraint; and
- 4. Any history that would contraindicate restraint.

REPORTING

The LMHA must report the use of physical restraints on a participant to DSHS as a critical incident. [See CRITICAL INCIDENT REPORTING, policy 2200.6 of this manual.]

PROHIBITED RESTRAINTS

In accordance with 25 TAC §415.254 and §415.256, the use of chemical and mechanical restraints and seclusion are prohibited.

POLICIES AND PROCEDURES

The LMHA is responsible for training all staff members, volunteers, interns, and direct service providers on the LMHA's policies and procedures, including, but not limited to: reporting of abuse, neglect or exploitation, behavior management, crisis and safety planning, critical incident reporting, restraint, and first aid and CPR, in accordance with 25 TAC §412.304, available at:

http://texreq.sos.state.tx.us/public/readtac\$ext.TacPage?sl=R&app =9&p dir=&p rloc=&p ploc=&pg=1&p tac=&ti=25&pt=1&ch=412&rl=304;

and 25 TAC §412.316, available at:

http://texreq.sos.state.tx.us/public/readtac\$ext.TacPage?sl=R&app =2&p dir=&p rloc=140409&p tloc=&p ploc=&pg=1&p tac=14040 9&ti=25&pt=1&ch=412&rl=316&dt=&z chk=1222500&z contains=f irst%20aid%20and%20CPR