



Improving lives THROUGH  
supports and services  
THAT FOSTER self-determination.

# Division Guideline #85

## Review and Discontinuation of Prohibited Procedures

# Objectives



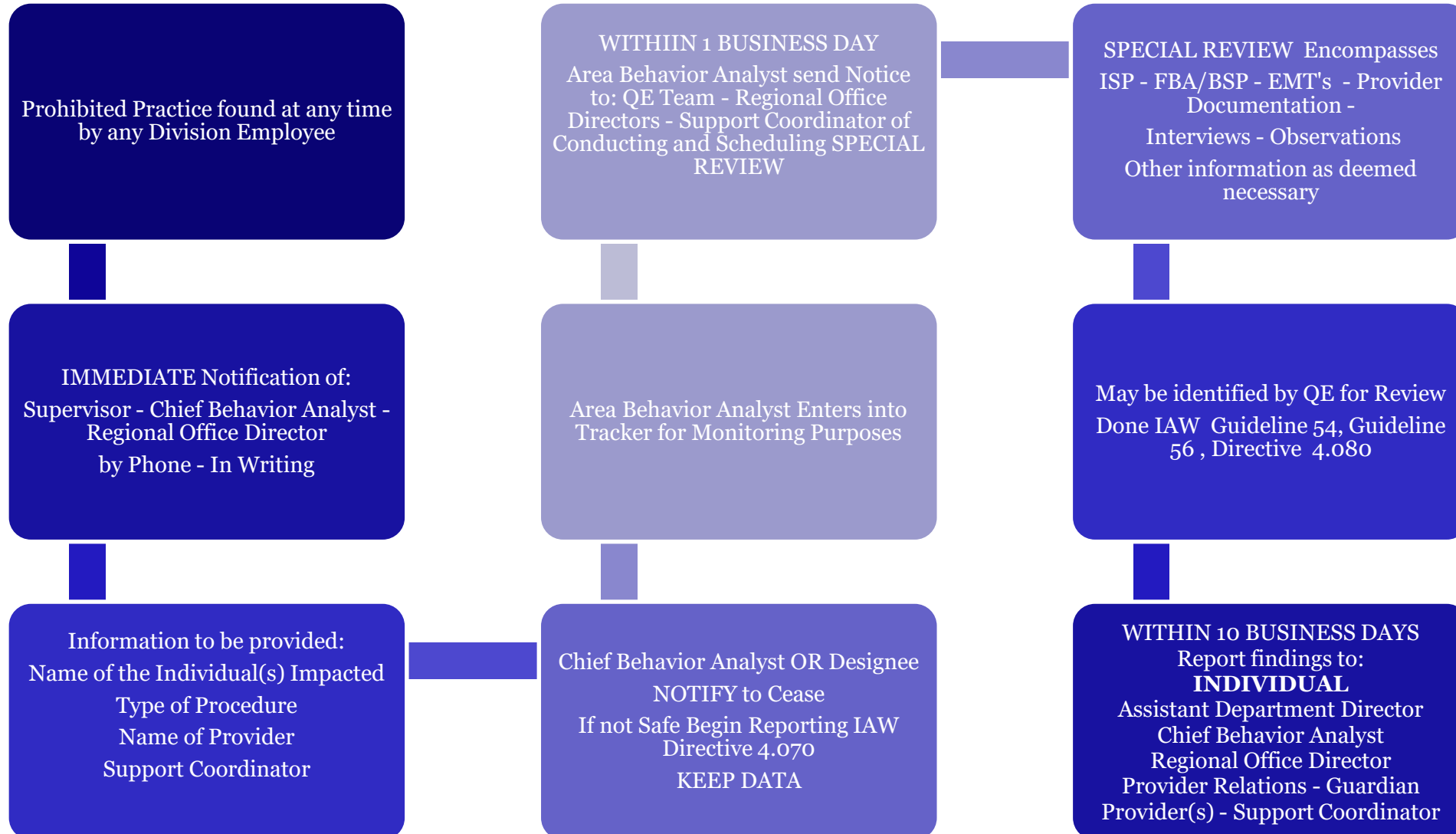
- **Goal of the Guideline**
- **Reporting and Notification Requirements**
- **Steps in the Process**
  - What happens and when
- **Follow up**
- **Connexion**

# Goal of the Guideline

- Why the Guideline Exists
  - Consistent & Systematic response when the use of prohibited procedures are suspected or discovered
  - Ensure the health, welfare and rights of the individuals served
  - Ensure a quality of life without coercion, seclusion or other practice that infringe on the rights of the individual



# The Flow of Things



# The W's for the Guideline Reporting

- Who is it addressed to
  - All staff
    - Guideline #85
    - 9 CSR 45 – 3.090
- What is the Process
  - Notification IMMEDIATELY
    - Phone
    - In Writing



# The W's for the Guideline Reporting

- Who is Notified
  - Supervisor
  - Chief Behavior Analyst
  - Regional Office Directors
- What information is provided
  - Name of the individual(s) affected
  - Type of procedure
  - Name of the provider
    - Residential
    - Day Program
    - Behavior Provider
  - Support Coordinator








# Next Steps

- Chief Behavior Analyst or Designee
  - Notify the provider to cease the practice they are engaging
    - While a review is being completed
  - If it is not safe to discontinue
    - The provider submits an EMT if a reportable event
      - Daily as executed
      - Or when the practice is implemented
    - Reported in accordance
      - Directive 4.070
      - If not reportable
        - **Keep Data**



# Next Steps

- ## Tracker Entry

Name of Individual Experiencing Event *	<input type="text"/>
DMH ID of Individual Experiencing Event *	<input type="text"/>
Regional Office *	<input type="text"/> ▼
Fiscal Year *	<input type="text"/> ▼
Date Questionable Practice Discovered	<input type="text"/> 
Date ROD notified	<input type="text"/> 
Date ABA Assigned to Complete Focus Review	<input type="text"/> 
ABA Conducting Focus Review *	<input type="text"/> ▼
Date Focus Review Concluded	<input type="text"/> 
Date Entered into IQMFD	<input type="text"/> 
Is Prohibited Practice?	<input type="checkbox"/>





# Next Steps

- Tracker Entry

Type of Prohibited Practice (check all that apply)

- Seclusion TO
- Mechanical Restraint (not including door locks or enclosed cribs)
- Door Locks
- Enclosed Crib
- Inappropriate Application of Manual Restraint
- Use of restrictive strategies that endanger physical health or exacerbate known medical condition
- Corporal Punishment / Aversive Conditioning / Overcorrection
- Use of law enforcement as part of standard response to predictable challenging situations
- Use of restrictive interventions for staff convenience
- Other - explain

Type of Prohibited Practice notes for other

Actions Identified to Remediate Situation

- Provider Placed on Corrective Action Plan by PR
- SCP revised to eliminate use of prohibited practice
- Agency implements training plan to prevent re-occurrence of prohibited practice
- Team gets ABA services in place
- BSP addresses reason for use of prohibited practice
- Development of fade plan for gradual discontinuation of prohibited practice
- Other - describe




# Next Steps

- Tracker Entry

Remediation Actions Notes

Frequency (per month) of Problem Solving Meetings

BSRC Scheduled?

Prohibited Practices Fully Discontinued  



# Next Steps

- **WITHIN 1 BUSINESS DAY**
  - Notice to
    - QE Team
    - Regional Office Director
    - Support Coordinator
  - Schedule Special Review
    - ISP
    - EMT's
    - Provider Documentation
    - Interviews
    - Observations



# Next Steps

- If identified by QE
  - > Review
    - Done IAW
      - Guideline 54
        - Quality of Services Review
      - Guideline 56
        - Quality of Services Focus Review
      - Directive 4.080
        - DMH Division of Developmental Disabilities Quality Management Framework



# Next Steps

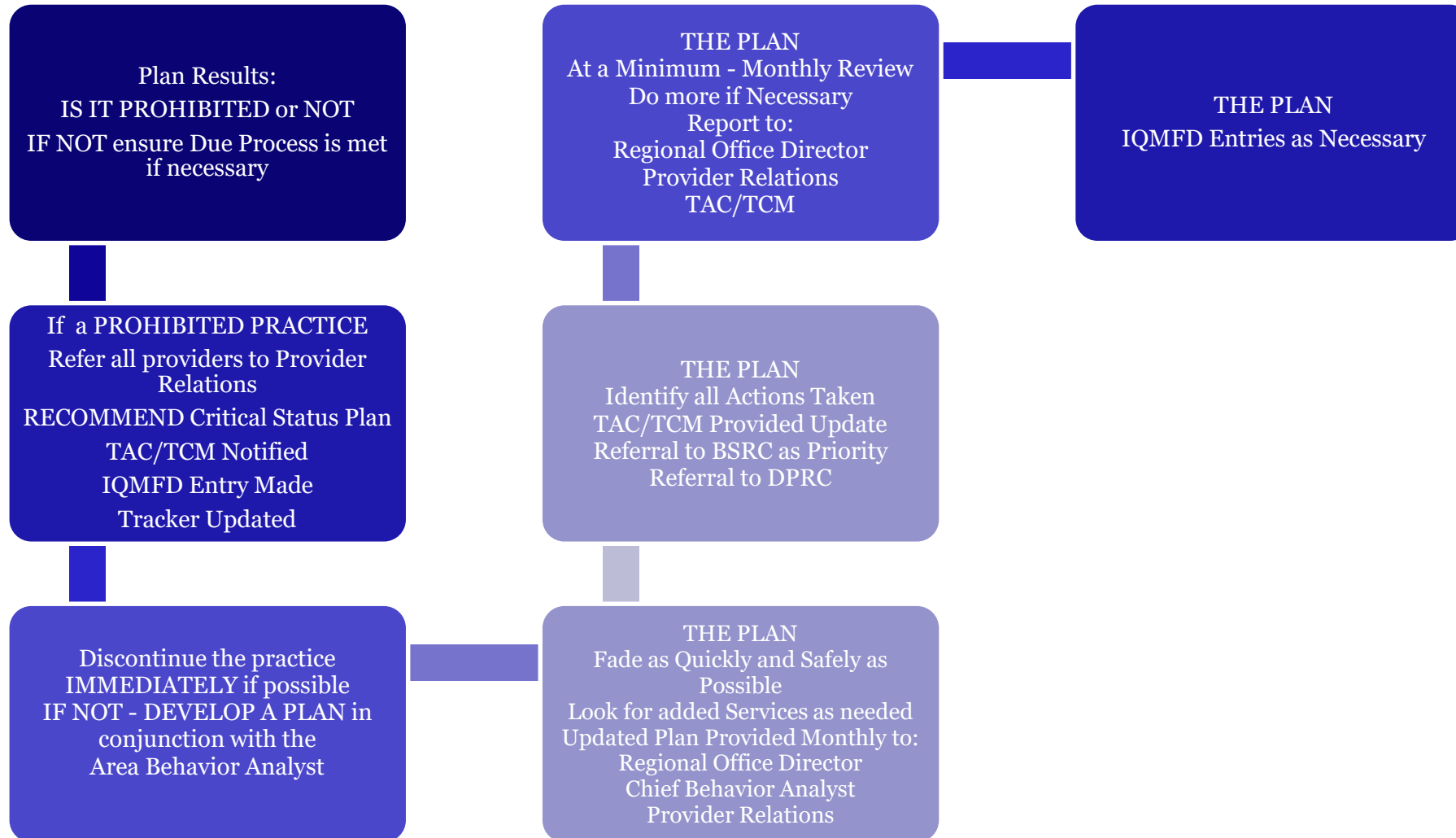
- **WITHIN 10 BUSINESS DAYS**
  - Report on Findings of the Review



- INDIVIDUAL
- Assistant Department Director
- Chief Behavior Analyst
- Regional Office Director
- Provider Relations
- Guardian
- Provider(s)
- Support Coordinator



# The Review and the Plan



# Results of the Review

- Review Results indicates that there is a Prohibited Practice being implemented
  - Refer all involved Providers to Provider Relations
    - Recommend Critical Status Plan
  - Notify TCM/TCM
    - If indicate TCM put on a Critical Status Plan
  - IQMFD Entry(ies) Made
  - Tracker Updated



# Results of the Review

- Discontinue practice IMMEDIATELY if possible
- If the practice cannot be safely discontinued then
  - Area Behavior Analyst meets with the team to develop a plan





# The Plan

- Goal is to fade quickly and safely
  - Evaluate for added services for the provider(s)
    - With the objective to lead to the development of positive proactive preventative strategies
- Plan provided Monthly
  - Regional Office Director
  - Chief Behavior Analyst
  - Provider Relations



# The Plan

- All actions taken entered into the tracker
- TCM/TAC provided an update
- Referral made to the BSRC
  - This Referral has Priority
- Referral made to DPRC



# The Plan

- At a minimum a Monthly Review
  - May be more if deemed necessary
- Meet until the practice is discontinued
- Report back to...
  - Regional Office Director
  - Provider Relations
  - TCM/TAC



# The Plan

- Entries into IQMFD
  - Closed when practice discontinued
- Connexions
  - May revise or update process



# What questions do you have?

