Promoting Wellness and Recovery

Class 2 Residential Care Facilities Policies, Procedures & Plans

Locked Storage Policy
Medical and Psychiatric Emergency Plans
Roommate Policy

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Licensure and Certification
Policy: a set of guidelines or rules that determine a course of action.

Procedure: series of actions conducted in a certain order or manner.
TJ Maxx Return Policy

If you're not satisfied with your purchase, return the merchandise accompanied by a register receipt within 30 days of purchase, for an exchange or refund. A 10 day period is required for a cash refund on check purchases. Returns with receipts over 30 days or without a receipt will receive store credit only.
Return Procedure:

Take merchandise with the receipt to the store within 30 days of purchase
Check receipt to verify date of purchase to determine refund status
No Receipt or over 30 days will be given store credit
Items paid by check will require a 10 day waiting period to receive cash refund
“Policy”
- Guiding principle
- “What” and/or “Why”

“Procedure” or “Plan”
- Step-by-step instructions
- How we accomplish
Don’t I have to be a professional policy writer to write policies, procedures, or plans?
Policies & Procedures

• Guide day-to-day or emergency operations

• Set clear expectations

• Resident Policies

• Staff Policies and Procedures
Slides throughout this presentation will include tips, suggestions, ideas regarding content in policies, procedures and plans.

There may be other elements YOU should include in YOUR facility’s policies, procedures and plans.

Some may not be appropriate for YOUR facility.
You do not want this work to be only about meeting regulations.

The goal is to create a safer environment, provide clear direction to staff, and reduce risk to residents, staff and owners.

Do not develop these documents, then forget about them. Keep them relevant. Update as needed. Share updates with staff, and residents as applicable.
5122-30-14 Sleeping and Living Space (Locked Storage Policy)
(H) Adequate drawer and closet space shall be provided for each resident to store his/her own clothes and personal belongings.

Storage space shall be in the bedroom of each facility serving adults and each adult shall have upon request an individual locked storage space provided by the facility freely available within the facility, with the exception of crisis stabilization units.

Each facility shall develop a policy regarding the facility’s access to the resident's locked storage space and inform the resident of this policy upon admission to the facility.
A statement that, except for provider agency managed payeeship programs when the provider agency is the operator of the class one facility, at no time shall the staff or operator of a facility assume payeeship for a resident's income, require income checks to be signed over to or be cashed by facility staff, nor in any manner establish controls over the handling of any resident's funds. This does not prevent a facility from providing a central locked storage for resident’s funds or other valuables. If a facility offers such storage, the residential agreement must specify whether the resident may access their property at any time, upon request, or a schedule of hours each day of the week during which a resident may access their property.
Where in the facility is the locked storage space located?

How do residents access the storage space? Do they have a key, combination lock, staff have to provide access?

When can they access the storage space?

What is the policy/procedure for the facility staff to access the storage space? Suspected drugs, weapon?
The policy/procedures must be reasonable and cannot violate the client’s rights:

Client Rights must be protected:

(E)(5) The right to be treated at all times with courtesy and respect, and with consideration for personal dignity, autonomy and privacy.

(E)(28) The right to personal property and possessions:
(a) The right of an adult resident to retain personal property and possessions.
5122-30-21 Staffing Requirements

(Medical and Psychiatric Emergency Procedures)
(H) In addition to meeting the qualification requirements of this rule, each facility which accepts residents diagnosed with mental illness or substance use disorder shall ensure that the following training and continuing education requirements are met:

(1) Prior to the admission of the first resident diagnosed with mental illness or a substance use disorder, the manager and each staff member providing direct care services in a class one facility, and the manager and each staff of a class two or class three facility, shall complete a general orientation in caring for persons diagnosed with mental illness or substance use disorder, and instruction on how to access local mental health crisis or emergency services. Thereafter, a new manager or a new staff shall receive such training prior to working alone with residents or within thirty days of hire, whichever comes first.
Define: A medical emergency is an acute injury or illness that poses an immediate risk to a person's life or long-term health, sometimes referred to as a situation risking "life or limb".

Procedures should include specific instructions for staff to follow during a medical emergency.

- Who do they call?
  

- When do you call?

- Do I need to submit an incident report?
**Psychiatric emergencies** encompass situations in which an individual cannot refrain from acting in a manner that is dangerous to himself or herself or to others.

The resident may be aware of the danger his behavior poses (as with an overdose with the intent to die) or he may lack insight into the effects of his actions (as in the case of a manic patient who engages in reckless sexual behavior).

Even if the resident perceives that his actions are dangerous, he may be bent on engaging in these behaviors despite the risks.
Procedures should include specific instructions for staff to follow during a psychiatric emergency.

- Who do they call? Where do I get information?

- When do you call?

- Do I need to submit an incident report?
5122-30-16 Incident Notification and Risk Management
(B)(2) "Incident" means an event that poses a danger to the health and safety of residents and/or staff and visitors of the facility, and is not consistent with routine care of persons served or routine operation of the facility.

(B)(3) "Reportable Incident" means an incident that must be submitted to the department in accordance with this rule, As referenced in division (E) of section 5119.36 of the Revised Code, "Major Unusual Incident" has the same meaning as "Reportable Incident."
(C) The operator shall develop an incident reporting system to include a mechanism for the review and analysis of all reportable incidents such that clinical and administrative activities are undertaken to identify, evaluate, and reduce risk to residents, staff, and visitors. The operator shall identify in policy other incidents to be reviewed.

(1) An incident report shall be submitted in written form to the operator or designee within twenty-four hours of discovery of the incident.
"Emergency/Unplanned Medical Intervention" means treatment required to be performed by a licensed medical doctor, osteopath, podiatrist, dentist, physician's assistant, or certified nurse practitioner, but the treatment required is not serious enough to warrant or require hospitalization. It includes sutures, staples, immobilization devices and other treatments not listed under "First Aid", regardless of whether the treatment is provided in the facility, or at a doctor's office/clinic/hospital ER, etc. This does not include routine medical care or shots/immunizations, as well as diagnostic tests, such as laboratory work, x-rays, scans, etc., if no medical treatment is provided.

"Hospitalization" means inpatient treatment provided at a medical acute care hospital, regardless of the length of stay. Hospitalization does not include treatment when the individual is treated in and triaged through the emergency room with a discharge disposition to return to the community, or admission to psychiatric unit.

"Injury" means an event requiring medical treatment that is not caused by a physical illness or medical emergency. It does not include scrapes, cuts or bruises which do not require medical treatment.

Note: The definitions, in and of themselves, are NOT reportable incidents.
5122-30-21 Staffing Requirements
(A)(4) In a class two or three facility at least one staff person shall be available on or off the premises to residents twenty-four hours per day. In the event that no staff person is on the premises, residents shall be informed of how to locate staff, who shall be promptly available to provide appropriate and needed assistance to residents.

- Residents need to know procedure to locate staff immediately
- Staff need to be available promptly to come to the facility
(A)(6) In the event that no staff person is on the premises, the operator shall be responsible for ascertaining and ensuring that each resident is capable of self-preservation, and is knowledgeable about obtaining emergency assistance.

- Emergency Numbers are posted by all phones
- Residents can call for assistance in an emergency when needed
(A)(7) Ensure that no resident shall be required or designated to supervise other residents, provide for the personal care or mental health service needs of other residents, or supervise any aspect of the operation or management of the facility

- Residents cannot be assigned to be responsible to execute the psychiatric or medical - this is staff responsibility
5122-30-24 Resident Agreement
(Roommate Policy)
Roommate Policy

(C) The following shall be specified in a resident agreement:

(11) In a class two or three facility, the specifications of the roommate policy.
Things to consider for the Policy:

- Are residents required to share bedrooms in the facility?
- Procedures for residents to select or change roommates?
- What is the procedure to determine which resident can move to a single room that becomes available?
- How are rooms assigned or selected for the residents?
- Any other relevant information for your facility
(A) The residential facility shall assure appropriate policies and procedures regarding the administration and management of the facility including compliance with the requirements for licensure. This responsibility shall also include, but may not be limited to:

(1) Arranging for necessary permits and inspections, and paying all fees and costs associated with inspections;
(2) Daily monitoring and supervising staff to assure acceptable performance of assigned job duties and compliance with the requirements for licensure;
(3) Participating in an appropriate and cooperative working relationship with the board or the department;
The residential facility shall assure appropriate polices and procedures regarding the administration and management of the facility including compliance with the requirements for licensure. This responsibility shall also include, but may not be limited to:

(4) Reporting to the department any change regarding facility operation or use that relates to the requirements for licensure;

(5) For a class two or three facility, reporting to the department a current emergency contact telephone number for the operator and manager.

(6) Securing appropriate, alternative responsibility for the operation and staffing of the facility for planned or unplanned staff/operator absence;

(7) Consistently maintaining the finances necessary for the stable and safe operation of the facility;
(A) The residential facility shall assure appropriate polices and procedures regarding the administration and management of the facility including compliance with the requirements for licensure. This responsibility shall also include, but may not be limited to:

(8) Maintaining a stable and supportive environment for residents of the facility, through respect for the rights of residents, as well as sensitivity and responsiveness to resident's needs, preferences and culturally competent services and care; and

(9) Knowledge of and compliance with federal, state, and local laws concerning the ownership and operation of the facility, including, but not limited to zoning requirements or equal opportunity employment practices.
Not asked for on application

Does NOT require a specific written policy, procedure or plan to address the elements in (A)(1) – (A)(9)

Addresses need to have policies and procedures for your facility, i.e. how you run your business, staff expectations, who is responsible to assure certain tasks are completed.

If MHAS finds non-compliance in a certain related areas, do not be surprised if you there is discussion or findings in this area. Example: No staff in facility when facility is required to have staff. Explanation provided to MHAS is that the 2nd shift staff had a flat tire on the way to work, and the 1st shift staff left at the end of his/her shift. Q: What is the facility’s policy on staff absences, staff leaving when replacement staff do not show up, etc.?
(A) The operator shall be responsible for assuring the compliance by the facility with all resident rights. Facility violations of resident rights shall be regarded as sufficient cause to institute proceedings to deny or revoke the facility's license.
The rules that apply to residential care facilities are in rules 5122-30 and were most recently updated 1/1/18. The rules are located online at https://mha.ohio.gov/About-us/Regulation/Rules#2308586-licensure-of-residential-facilities-5122-30
Where Can I Find Sample Forms?

Sample forms are located online at https://mha.ohio.gov/Health-Professionals/Licensure-and-Certification/Residential-Programs-non-SUD#153797-sample-forms
Webinar Information

Webinars on the rule requirements are available free of charge online and can be accessed here:

https://mha.ohio.gov/Health-Professionals/Licensure-and-Certification/LC-Webinars-and-Trainings#152678-residential-facilities-non-substance-use-disorder
Applications are available only online and can be accessed here:

https://mha.ohio.gov/Health-Professionals/Licensure-and-Certification/Residential-Programs-non-SUD
If you are currently licensed or in the process of being licensed, contact your assigned Behavioral Health Surveyor.

If you are not yet licensed, email Licensure and Certification staff at LicCert@mha.ohio.gov.

How can I find out who my Behavioral Health Surveyor is and how to contact him or her? Email Licensure and Certification staff at LicCert@mha.ohio.gov.