

Clinic Restructuring

1

LICENSING & STAFFING TRANSITION

Why are we here?

2

To clarify:

1. Staffing requirements for new clinic services
2. Issues related to staffing transition to fully licensed staff
3. To provide guidance regarding supervision during the transition of unlicensed staff
4. Provide information on clinic license conversion

What Has Not Changed

3

Shared commitment by OMH and Providers

- Quality services
- Qualified and trained staff
- Ongoing supervision and staff support

What has changed? Staffing Requirements

4

- **Part 599 Regulations limits only licensed staff to provide clinical services**
 - Exemption in place until 7/1/2013
- **Peer and family advisors will be eligible to provide outreach and assist crisis services**

Scope of Practice Laws for Direct Service Staff in OMH clinics

5

Medicine – Article 131

Psychiatrist (MD) - §6524

Physician (MD) –

Physician Assistant – Art. 131-B§6540

Residents

Nursing – Article 139

Psychiatric Nurse Pract. (NPP) - §6910

Registered Nurse (RN) - §6905

Licensed Practical Nurse (LPN) - §6906

Limited Permits - §6907

Psychology – Article 153

Licensed Psychologist (PhD) -

§7603

Exempt Psychologist –

governmental setting - §7605

Permit holders - §7604

Mental Health Practitioners – Article 163

Mental Health Counselor (LMHC)

§8402

Psychoanalyst (LP) - §8405

Marriage & Family Therapist (LMHT)

§8403

Creative Arts Therapist (LCAT) -

§8404

Permit holders - §8409

Social Work - Article 154

Clinical Social Worker (LCSW) - §7702

Masters Social Worker (LMSW) -

§7701

Permit Holders - §7705

Students in Clinics

6

- **Students – Article 130 - §6503**
 - Rules don't change before or after exemption
 - “An institution of higher education authorized to provide a program leading to licensure in a profession...to the extent that the scope of such services is limited to the services authorized to be provided within such registered program” (Title VII articles 131,139,153,154,163)
 - Clinics must include students in staffing plan and have the **agreement** with the University on file

Peer Advisors

7

- 599.4 (ak) defines a ***Peer Advisor*** as “an individual with personal experience as a mental health recipient, who has training, credentials or experience recognized by the Office”
- Individuals hired as Peer Advisors should demonstrate evidence of completion of a peer training program or certification such as:
 - Peer coach, Peer counselor, Bridger, other

Peer Advisors

8

Peer Advisors – personal skills

- Should reflect the capacity to develop a supportive and trusting relationship with the consumer
 - This relationship should be a personal, positive supportive relationship
- Should reflect the ability to participate in an array meetings regarding connecting a peer to treatment and self help support
- Should demonstrate ability to support community adjustment and wellness self-management skills
- Office of Consumer Affairs (518)473-6579

Family Advisor

9

- *Family advisor* means an individual who has experience, credentials, or training recognized by the Office and is or has been the parent or primary caregiver of a child with emotional, behavioral or mental health issues.

Family Advisor

10

Helpful knowledge base

•Child Development

•Family Relationships

•Parenting Skills

•Community Resources

Competencies

•Engagement & Empowerment

•Cultural Competence

•Documentation

•Confidentiality and Ethics

•Systems: Mental Health, Education, Child Welfare, Juvenile Justice

Family Advisor

11

- **Credentials**

- Family Peer Advocate Credential (FPA)
 - (anticipated in 2011)
- Family Development Credential (FDC)

- **Training**

- Parent Empowerment Program (PEP)

Peer and Family Advisors

12

- Staffing plans and peer qualifications will be reviewed by OMH as part of the licensing survey visit.
- Credentials do not need to be mailed to OMH

Staff not Permitted in 599

13

Part 599 - Not Permitted

- **Unlicensed psychologist (except in government setting)**
- **School psychologist**
- **Rehabilitation counselor (CRC)**
- **Pastoral Counselors**
- **Occupational Therapist**
- **CASAC**
- **Master's Degree other**
- **Foreign Degrees**
- **Bachelor's degree with experience**

Services by eligible staff

14

Services	Staff
Outreach	No professional license required Peer/Family Advisors that are qualified.
Initial Mental Health Assessment, Diagnostic Interview, and Treatment Plan Development	Psychiatrist/NPP, LMSW, LCSW, Licensed Psychologist, RN, Licensed Mental Health Counselor (LMHC), Licensed Marriage and Family Therapist (LMFT), and Licensed Creative Arts Therapist (LCAT), Licensed Psychoanalysts
Psychiatric Assessment (established patient)	Psychiatrist/NPP
Psychiatric Consultation	Psychiatrist/NPP
Crisis Intervention	Psychiatrist/NPP, Physician's Assistant with a mental health specialty, Licensed Psychologist, LMSW, LCSW, RN, LMFT, LMHC, LCAT, Licensed Psychoanalysts
Psychotropic Medication Admin.	Psychiatrist/NPP/RN/LPN/PA
Psychotropic Medication Treatment	Psychiatrist/NPP/PA with mental health specialty
Psychotherapy	Psychiatrist/MD/NPP, Licensed Psychologist, LMSW, LCSW, RN, LMFT, LMHC, LCAT, Licensed Psychoanalyst
Developmental Testing	Includes all 599 eligible licensed clinic staff
Psychological Testing - various	Psychiatrist/Licensed Psychologist
Complex Care Management	Licensed Psychologist, LMSW LCSW, RN, LMFT, LMHC, LCAT, Licensed Psychoanalysts
Health Physicals	MD/NP/PA
Health Monitoring	MD/NPP/RN/LPN/PA

Scope of Practice

15

- In addition to Psychiatrists, NPP, RN, Psychologist and licensed Social Work
- Under the new “scope of practice laws”, in 2002:
 - Established four new types of mental health practitioners
- Exemption for OMH licensed or funded providers expires on July 1, 2013

Treatment Planning (599.10)

16

- **Plans and updates** should include, as appropriate, the input and signatures of relevant staff, the recipient, family members and collaterals
- They ***must*** include the signature of one of the following:
 - **Medicaid fee-for-service**
 - ✦ Only signed by a psychiatrist or other physician.
 - **3rd party insurance**
 - ✦ If prescribing psychotropic medication
 - a psychiatrist, physician or nurse practitioner in psychiatry.
 - ✦ For those who do not receive psychotropic medication
 - a psychiatrist, other physician, licensed psychologist, nurse practitioner in psychiatry, or licensed clinical social worker.

Part 599 Staffing

17

- Professional staff ratios under 587-588 – gone
- Moving toward licensed staffing – July 1, 2013
- OMH Staffing waiver authority
- SED workgroup to review scopes of practice

Medicaid Reimbursement During Exemption

18

- Students, peers, family advisors & non-licensed staff will continue to be reimbursed by Medicaid.
- For all agencies that participate in the **uncompensated care pool**, after year 1 of implementation, visits must be provided by licensed staff to be reimbursed.
- After July 1, 2013, all services must be delivered by licensed staff with the exception of outreach.

Staffing Patterns

19

- As noted in Part 599.9, providers must have:
 - **staffing patterns which allow for the appropriate provision of all services and**
 - **are likely to meet the objectives of the clinic treatment program.**

- Staff should only provide services which are within their:
 - **scope of practice**
 - **level of competence**

Staffing Patterns

20

Provider Responsibilities:

- To maintain an appropriate and effective complement of licensed staff (by numbers, expertise, etc.)
- To assess and respond to staff supervision and training needs

Assessed by Standards of Care Anchor Elements and the findings of Licensing and Monitoring Visits

Staffing Patterns

21

- To verify the credentials and qualifications of staff
 - <http://www.op.nysed.gov/opsearches.htm>
 - <http://officeofprofessions.custhelp.com>
- Foreign degrees
 - Equivalency assessment:
 - <http://www.cs.state.ny.us/jobseeker/degrees.cfm>
 - International credentials for licensure:
 - <http://www.op.nysed.gov/prof/translations.htm>

Staffing Policies

22

- **Clinic policies shall ensure compliance:**
 - **with the requirement for criminal history record checks**
 - ✦ **Exception for Article 28 DOH licensed hospitals**
 - **for screening by the New York State Central Register of Child Abuse and Maltreatment for persons who have the potential for regular and unsupervised or unrestricted contact with children, and for appropriate consideration and confidentiality of such information**

Staffing - Policies

23

- Clinics need policies regarding the employment, supervision of peer and family advisors
- Policies for selection, supervision, and conduct of students (and volunteers)
- Policies regarding nurse practitioners and physician assistants
 - Such policies shall ensure that physician assistants have responsibilities related to physical health only.

599 Staff Approval/Waiver Requests

24

Submit to Field Office with documentation of:

- **describe need for approval/waiver**
- **job description, including supervision arrangements**
- **qualifications of candidate**
- **evidence of license/certification**

Need for continued waivers will be reviewed as part of the license renewal process

501 Waiver Requests

25

- **Purpose:** Allows for relief from specific regulations and allows innovative program design
- **Process**
 - Instructions and Form on OMH Website
 - ✦ Regulation to be waived
 - ✦ Circumstances, need
 - ✦ How benefit individual(s) served
 - ✦ Arrangement and qualifications
 - ✦ Requires review by County LGU & Field Office
 - ✦ Submit to OMH

http://www.omh.state.ny.us/omhweb/policy_and_regulations/waiver_request/

Staffing Supervision

26

- The Clinic Standards of Care identify the importance of regular guidance and oversight for all staff in order to assist them in responding to both the ongoing and emergent needs of individuals served.

Professional Supervision

- In all instances a clinic is expected to employ and designate an adequate number of licensed staff who, by their training and experience, are qualified to provide clinical supervision and programmatic direction

Staffing Supervision

27

- **Supervisors:** Such individuals should be identified in the staffing plan and documentation of the lines of supervisory responsibility should be maintained by the clinic
- When staff provide services under the NY SED exemption, it is especially critical that regular and appropriate supervision is provided and documented
- Arrangements which will assist these staff to meet licensure eligibility requirements must be considered.

Transition to 599 Staffing

28

- Clinics are required to develop a transition plan that addresses non-licensed staff and the plan to meet 599 Regulations (incl. foreign degree staff)
- Clinics that continue to employ non-licensed staff to provide clinical services under the NYSED exemption will need to demonstrate full compliance with Part 599 staffing standards by July 1, 2013
- **Clinics are not expected to add additional non-licensed staff to provide psychotherapy services under the SED exemption**

Transition to 599 Staffing

29

Transitional Staffing Plan needs to include:

- **Appropriate roles for non-licensed staff**
- **Supervision plan for non-licensed staff**
- **Efforts to transition non-licensed staff to licensed staff, or permit holders**
- **Address staff vacancies with staff that meet licensing requirements**
- **Plan to transition supervisory responsibility to licensed staff**

Clinic Licensing Transition

30

- Seamless and simplified process
- Part 599 regulations effective October 1, 2010 and replaces previous regulations
- Current Operating Certificate remains valid except for Part 587 Additional and Optional services
- Child and Family Clinic Plus designation continues
- Not required to submit new application for license or additional documentation, EXCEPT:

Licensing Transition: Action Required

31

- **Closing or Modifying Clinic or Satellite
Administrative Action or EZ PAR**
- **Providing Part 599 Optional Services
MHPD Survey Process
Available September 1, 2010**

www.omh.state.ny.us/omhweb/mhpd/

Clinic License Renewal

32

- Continue licensing survey visits utilizing Standards of Care Anchors and Tracer Methodology
- Progress on implementation of 24/7 crisis system reviewed- in place by April 1, 2011
- Staffing transition plan reviewed
- New Operating Certificates issued pursuant to Part 599

License Revision

33

Revised Operating Certificate to be issued when:

- **Optional Services added**
- **Administrative Actions or PARs processed**
- **Revised OCs for currently licensed programs will be issued over time, beginning with those clinics with renewal dates most distant from October 1, 2010**