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<b>Approved By: Mohamad Khraizat</b>	<b>Title: Health Operations Manager</b>
<b>Signature:</b> 	<b>Date:</b> 10-15-19

### I. POLICY:

In order to facilitate the mission of ACCESS, it is the policy of ACCESS Community Health and Research Center (ACCESS CHRC) that individuals in its workforce must be properly screened, oriented as new hires and trained in accordance with Federal and State law, rules, and regulations; the employment contract; contracts with funding sources; and external accreditation bodies.

### II. PURPOSE

To improve, enhance and sustain ACCESS CHRC staff's job knowledge, skills, and attitudes and for the mutual benefit of the ACCESS Mental Health, its Consumers and the individual employee.

To ensure that the ACCESS Mental Health and Family Counseling Division workforce are:

- A. Properly screened
- B. Oriented to the ACCESS Mental Health Policies and Procedures
- C. Trained on the required Staff Development topics within their first 30 days of employment and
- D. Trained on the required annual and bi-annual Staff Development topics as well as other topics

### III. APPLICATION:

These Policies and Procedures apply to all ACCESS CHRC employees, contractors, interns and volunteers.

### IV. DEFINITIONS:

- A. **Central Registry Clearance:** Michigan's central registry is mandated by the Child Protection Law and serves as a list of perpetrators of child abuse and neglect. Central registry information is confidential; therefore, by law, the Department of Human Services cannot provide this information to anyone other than those listed in the Child Protection Law (MCL 722.627). The individual seeking employment must request the information and the results must be sent to the requesting individual only. The application may be obtained from the Department of Human Services website, [www.michigan.gov/dhs](http://www.michigan.gov/dhs) click on the following: Individuals and Family Services, Protective Services and Central registry.
- B. **Evidence-Based Practice (EBP):** EBP is a body of scientific knowledge about treatment practices and their impact on children with emotional or behavioral disorders. The phrase refers to treatment approaches, intervention and services which have been researched and shown to make a positive difference for children. In other words, EBPs are the integration of best research evidence with clinical expertise and client values (Sackett, Strauss, Richardson, Rosenberg & Haynes, 2000)
- C. **Person(s):** An individual who is receiving, or in the past has received, treatment/ services/supports from the Agency's Managers of Comprehensive Provider Networks, their affiliates, or other entities contracted with the Agency. May also be referred to as **Consumers**.

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- D. **Protected Health Information (PHI):** Individually identifiable health information that is transmitted by electronic media, maintained in any electronic media, or transmitted or maintained in any other form or medium.
- E. **Vulnerable Adult:** One or more of the following:
- An individual age 18 years or over who, because of age, developmental disability, mental illness, or physical disability requires supervision or personal care or lacks the personal and social skills required to live independently.
  - A child placed in an adult foster care family home or an adult foster care
  - Small group home pursuant to section 5(6) or(S) of 1973 P.A. 116, MCL 722.115.
  - An adult who is unable to protect himself or herself from abuse, neglect, or exploitation because of a mental or physical impairment or because of advanced age.
- F. **Workforce:** Individuals who are employed, contracted, intern or volunteer with ACCESS CHRC
- G. **Workforce development activities** include:
- Identification of competencies to support the organization in the accomplishment of its mission and goals and to meet the needs of the persons served.
  - Assessment of competencies
  - Identification of timeframes/frequencies related to the competency assessment process
  - Competency development, including the provision of resources
  - Performance appraisal
  - Education and training

## V. PROCEDURES:

### A. New Hire Screening

- The CEO who is ultimately responsible for the management and operation of ACCESS Mental Health services made available to Consumers will be responsible for staff members who are selected and oriented according to the program's personnel policies. Clinical staff composition includes psychiatrists (M.D., D.O.), Psychiatric physician assistants (P.A.), psychologists, counselors, social workers, and other mental health professionals.
- Medical Direction is provided by the Medical Director designated by the Executive Director. In the absence of the Medical Director, or at his request, medical coverage may be assigned to members of the department's medical staff.
- The size of the composition of the staff will be determined by the demand for services and the needs of the patient population. Staffing is designated through the budgeting process, program planning, and estimated volume and type of service.
- Clerical and other non-clinical needs will be provided for by department support staff. When appropriate qualified staff members are not available or needed on a full-time basis, arrangements shall be made to obtain sufficient services on an attending, continuing, consultative, or part-time basis.

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5. All staff members shall be qualified by training, experience, demonstrates competence, and shall have appropriate clinical privileges: or they shall be supervised by professional staff members who are qualified by experience to supervise such treatment. Staff members defer to the Medical Director, or other physicians in all aspects relating to medical and/or physical services.

**B. General Requirements**

1. Individuals providing specialty services and supports must be:
2. At least 18 years of age.
3. Able to document education, training, certifications and license required to the job competently.
4. Able to communicate effectively in order to follow individual plan requirements and beneficiary-specific emergency procedures, and report on activities performed.
5. Able to prevent transmission of any communicable disease from self to others in the environment in which they are providing supports.
6. Everyone in the workforce who has access to protected health information must be properly screened, trained and monitored.
7. Everyone in the workforce who provides professional and direct care services to Persons must be in good standing with the law (i.e., not a fugitive from justice, a convicted felon, or an illegal alien). The organization implements written procedures that address:
  - a. Verification of:
    - i. Backgrounds of the workforce in the following areas, if required:
      - a. Criminal checks.
      - b. Immunizations.
      - c. Fingerprinting.
      - d. Drug testing.
      - e. Vulnerable population checks.
      - f. Driving records.
    - ii. The credentials of all applicable workforce (including licensure, certification, registration, and education):
      - a. With primary sources.
      - b. When applicable, in all states/provinces or other jurisdictions where the workforce will deliver services.
    - iii. Fitness for duty, if required.
  - b. Actions to be taken in response to the information received concerning:
    - i. Background checks.
    - ii. Credentials verification.
    - iii. Fitness for duty.
  - c. Timeframes for verification of backgrounds, credentials, and fitness for duty, including:
    - i. Prior to the delivery of services to the persons served or to the organization.
    - ii. Throughout employment.

**C. Criminal Background Checks**

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1. ACCESS Human Resources shall perform criminal background checks on potential workforce members who provide professional or direct care services to Persons receiving mental health services prior to hiring.
2. ACCESS Human Resources shall perform criminal background checks on professional and direct care services workforce *annually*.
3. ACCESS Human Resources shall determine the method to perform criminal background checks on potential professional and direct care services workforce members, and annually thereafter, in order to avoid employment or contract with those who do not pass such a check, in accordance with federal, State of Michigan or contractual requirements.
4. Information on criminal background checks can be obtained by contacting the Michigan State Police, Criminal Justice Information Center, 7150 Han-Is Drive, Lansing, MI 48913; Tel: 517-322-1956; Fax: 517-322-0635; if the applicant has resided in Michigan for less than 3 years, then the applicant must be fingerprinted at their local law enforcement agency. Two sets of the applicant's fingerprints must be sent to the Michigan State Police, along with a request for a national criminal history check. The State Police will forward the request to the Federal Bureau of Investigation to check the applicant's criminal history.
5. Services Provided to Children/Minors In addition to the criminal background check requirements noted above, child care providers and any providers servicing minors (17 years old or younger), have the following additional requirement for all individuals seeking employment or contract: Providers must check the State of Michigan Sex Offender Registry ([www.mipsor.slate.mi.us/miposor](http://www.mipsor.slate.mi.us/miposor)) or obtain Clearance through the Department of Human Services (see attached form) prior to hiring any employee and at least annually for current employees.
6. ACCESS may not employ or contract with any individual or entity that is included on the exclusion lists. The U.S. General Services Administration (GSA) maintains a list of parties excluded from Federal programs. The "excluded parties list" (EPLS) and any rules and/or restrictions pertaining to the use of EPLS data can be found on GSA's web page at the following internet address: [www.arnet.ov/epls](http://www.arnet.ov/epls) . In addition, all health care providers must check the Health and Human Services Office of Inspector General's (HHS-OIG) List of Excluded individuals Entities prior to hiring or contracting with individuals or entities and periodically for the participation/exclusion status of current employees and contractors. The HHS-OIG exclusion list can be found on the HHS-OIG web page at the following internet address: <http://oig.hhs.gov/>
7. The following criminal history will result in the exclusion of an individual from being hired, or from continuing to be employed or contracted, as a mental health professional or in a mental health direct care services position:
8. A felony or attempt or conspiracy to commit a felony within the 15 years immediately preceding the date of application for employment or clinical privileges or the date of the execution of the independent contract.
9. A misdemeanor involving abuse, neglect, assault, battery, or criminal sexual conduct or involving fraud or theft against a "vulnerable adult" as that term is defined in section 145m of the Michigan penal code [1931 PA 328, MCL 750.145m1, or a state or federal crime that is substantially similar to a misdemeanor described in this subdivision of the Michigan penal code, within the 10 years immediately preceding the date of application

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for employment or clinical privileges or - the date of the execution of the independent contract.

10. A fugitive from justice.
11. There is a permanent bar for any potential or current employee convicted of criminal sexual conduct with a minor.
12. Federal regulations and State law preclude reimbursement for any services ordered, prescribed, or rendered by a provider (individual or entity) who is currently suspended, terminated, or otherwise excluded, from direct and indirect participation in the Michigan Medicaid program and all Federal health care programs.
13. No Medicaid funds may be used to purchase services provided, ordered or prescribed by a suspended or terminated provider. This exclusion applies regardless of who submits the claim and applies to all administrative and management services furnished by the excluded individual or entity.
14. ACCESS may not have a director, partner, officer, or individual with beneficial ownership of more than 5% of the entity's equity who is currently debarred or suspended by any Federal agency.
15. It is prohibited to have an employment, consulting, or any other agreement with a debarred or suspended individual or entity for the provision of items or services that are significant and material to the ACCESS' contractual obligation with the County and the State of Michigan. The individual or entity must certify to the best of its knowledge that it, its workforce and sub-contractors:
16. Have not within a three-year period preceding their agreement with this Agency been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; or
17. Violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
18. Are not presently indicted or otherwise criminally or civilly charged by a governmental entity with commission of any of the offenses enumerated above, and;
19. Have not within a three-year period preceding their agreement with the ACCESS, had one or more public transactions (Federal, State or local) terminated for cause of default It.
20. ACCESS may not employ or contract with any individual or entity that is included on these excluded lists. It is also prohibited for debarred or suspended individuals to have an employment, consulting, or other agreement. Violations of the noted program exclusion requirements may result in monetary civil penalties.

**D. Permission to Work in the United States**

1. Federal and State law bar the hiring of illegal immigrants. All employers are responsible for the completion of an Employment Eligibility Verification form (Form 1-9") [Exhibit AJ for all members of their workforce to verify an individual's eligibility to be employed in the United States.
2. The employer must retain completed I-9s for three years after the date of hire or one year after the date employment ends, whichever is later, and must be available for inspection by government authorities and monitors upon request (e.g., the Agency, the Bureau of

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Immigration and Customs Enforcement (ICE), the Department of Justice, or the State of Michigan).

#### **E. New Hire Orientation**

1. Orientation to ACCESS is scheduled within the first 30 days of Employment and reflect the organization's:
  - a. Mission
  - b. Culture
  - c. Person-centered philosophy
  - d. Performance measurement and management system
  - e. Risk management plan
  - f. Strategic plan
  - g. ACCESS workforce policies and procedures
  - h. Orientation to the ACCESS Mental Health Policies and Procedures
  - i. Position roles and responsibilities.
  - j. Position performance expectations.
  - k. Communication systems and expectations
2. New employees, contractors, interns and volunteers will read the ACCESS Mental Health Policies and Procedures Manual and be provided an opportunity to receive clarification on how these policies affect their professional practice at ACCESS Mental Health.
3. The Supervisor, HR or a designated staff member will be responsible for the orientation. The employee will sign-off upon completion of orientation.
4. New employees, contractors, interns and volunteers will be trained on the required Staff Development topics within their first 30 days of employment. Topics include: Person Centered Planning, Recipient Rights, Corporate Compliance, Cultural Competency, HIPPA Basics, Limited English Proficiency, Medicaid Fair Hearing, Infection Control, etc. See the attached Required Training Grid.
5. New employees, contractors, interns and volunteers that provide professional services to children and adolescents need to complete the Core Competency training.

#### **F. Ongoing Training**

1. **Required Training.** Employees, contractors, interns and volunteers will be trained annually or bi-annually on the required Staff Development topics. Topics include: Person Centered Planning, Recipient Rights, Corporate Compliance, Cultural Competency, HIPPA Basics, Limited English Proficiency, Medicaid Fair Hearing, Infection Control, etc. See the attached Required Training Grid.
2. **Requesting approval for attending Face to Face External Trainings**
  - a. Staff Completes a training Request Form and Turns in form to Manager/Supervisor for approval

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- b. Manager/Supervisor reviews form and approves or denies based on type of training, appropriateness for staff job description, Licensure and Credentialing. Copy is returned to staff and original is kept in employee record
3. Upon completion of the training, the employee submits the completed, signed Training Request form to the Quality Assurance Manager. If a non VCE training, the form must be accompanied by:
  - a. Copy of Certificate of Completion
  - b. Copy of the Agenda of the training
  - c. Copy of the presentation given (if Certificate not available)
  - d. The information for the trainings is recorded in the employee's credentialing file
4. Continuing Education. Employees, contractors, interns and volunteers will continue to fulfill the requirements for their continuation of their certifications, registrations and licenses that required for continuation of their employment or position. Staff are encouraged to attend seminars, conferences and workshops related to specific job, and may be required to obtain privileging/credentialing. Employees, contractors, interns and volunteers will be responsible personally for scheduling, paying and completing any required trainings.
5. **Training for Child Therapists.** Employees, contractors, interns and volunteers who provide professional services to children and adolescents must complete an additional 24-hours of training annually directly related to treatment issues of children and adolescents.

**G. In-services**

1. Employees, contractors, interns and volunteers had the opportunity to participate as presenters and/or participants in the Annual International Conference on Arab Health Issues or other seminars sponsored by ACCESS Mental Health and Family Counseling Division.
2. Employees, contractors, interns and volunteers may participate in Case Conference and Departmental Meetings where there are discussions about policies, procedures, best practices and evidence-based practices.
3. Presenting In-services
  - a. ACCESS Mental Health Staff is encouraged to present in-services to the outpatient staff.
  - b. Staff is encouraged to attend any relevant in-service education programs presented by other departments.
  - c. An attendance sheet should be distributed for all attending to sign.
  - d. Those who attend may be presented with a program evaluation sheet for their comments.
  - e. Employees, contractors, interns and volunteers are responsible for turning in documentation as proof of in-service attendance.

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**H. Requesting approval for Presenting Face to Face External In-Services**

1. Staff Completes a training Request Form and Turns in form to Manager/Supervisor for approval
2. Manager/Supervisor reviews form and approves or denies based on type of training, appropriateness for staff job description, Licensure and Credentialing. Copy is returned to staff and original is kept in employee record
3. Upon completion of the In-Service, the employee submits the completed, signed Training Request form to the Quality Assurance Manager. The form must be accompanied by:
  4. Copy of Sign in Sheet of attending staff
  5. Copy of the Agenda of the training
  6. Copy of the presentation given
  7. The information for the trainings is recorded in the employee's credentialing File

**I. Supervision**

1. Clinical staff must attend supervision as required to maintain their license/registration. Documentation of this must be turned in annually.
  - a. Documentation of a variety of supervisions:
  - b. At least one monthly individual face to face
  - c. Monthly group Case Conference
    - i. Monthly Supervisor or Quarterly meetings
    - ii. Ongoing consultations on individual cases

**J. Performance Appraisals**

1. Completed on the following criteria
  - a. Competency
  - b. Job Knowledge
  - c. Management Effectiveness
  - d. Quality
  - e. Decision-Making/Judgment
  - f. Policy Compliance
  - g. Customer Service
  - h. Initiative
2. Supervisors are responsible for regular appraisals
  - a. 60 days from day of employment
  - b. Annual
3. Staff has an opportunity to
  - a. Complete self-appraisal
  - b. Develop goals that include measurable goals and opportunities for development

**K. Staff Committees.** Special staff committees will be organized as needed for specific tasks in areas of interest or concern

1. ACCESS promotes engagement through respect for all individuals in the workforce, including open communication and value-driven focus



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2. Initiatives that address recognition, compensation and benefits
3. Policies and written procedures that address, mechanism(s) to provide favorable and constructive feedback, address concerns,
  - (1) Job postings.
  - (2) Promotion.
  - (3) Disciplinary action.
  - (4) Separation.
  - (5) Labor relations, if applicable.
  - (6) Prevention of harassment.
  - (7) Are accessible to the workforce.

**L. Professional Organization.** Staff members are encouraged to actively participate in related professional organization.

**M. Documentation.** Employees, contractors, interns and volunteers are responsible for providing proof (certificates of completion, receipt, CEU, CAC, certificate of attendance or canceled check) of their completed trainings. These proofs will be maintained in the employee, contractors, intern or volunteer's personnel record. The name and date of the training will be documented on the Personnel File Required Documentation & Credentialing Application by the Supervisor or a designee.

## **VI. QUALITY ASSURANCE/IMPROVEMENT:**

- A. ACCESS' ongoing workforce planning includes:
  - a. Workforce analysis
  - b. Written job descriptions
  - c. Review and update of written job descriptions in accordance with organizational needs and/or the requirements of external entities
  - d. Recruitment
  - e. Selection
  - f. Retention
  - g. Succession planning
- B. ACCESS Human Resource Department shall review and monitor adherence to these policies and procedures as one element in its management responsibilities. ACCESS Human Resource Department shall revise the Policies & Procedures Manual with changes in the benefits, the work rules and/or laws change.
- C. ACCESS Staff Development and Training Group will aid in the review and maintain the Staff Development and Training Records. See the Credentialing/Re-Credentialing Policy.

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**V. COMPLIANCE WITH ALL APPLICABLE LAWS:**

ACCESS, its employees, contractors, interns and volunteers are bound by all applicable federal, state and local laws, rules and regulations.

**VI. ATTACHMENTS:**

ACCESS Policies & Procedures Manual  
ACCESS Emergency Procedures Handbook  
DHS-Request for Central Registry Clearance  
Required Training Grid  
Personnel File Required Documentation & Credentialing Application  
Training Request Form