

OK To Use

This Template has been used and cannot be changed.

 AUDIT NAME  
 2022 Standard XIX Behavior Treatment Plan Review Committee

 PASSING %  
 100

 Consumer linked to this audit

 Staff Audit

**SECTIONS**

Section

NUMBER TITLE

1 XIX. Behavior Treatment Plan Review Committee

**SECTION QUESTIONS**

Questions

Questions			
1	19.1 The CMHSP has a Behavior Treatment Plan Review Committee (BTPRC) to review and approve or disapprove any plans that propose to use restrictive or intrusive interventions.	Met/Partially Met/Not Met	N/A
2	19.2 The Behavior Plan Review Committee is comprised of at least 3 individuals:	Met/Partially Met/Not Met	N/A
3	19.2a One of whom should be a board-certified behavior analyst or licensed behavior analyst, and/or licensed psychologist, physician/psychiatrist.	Met/Partially Met/Not Met	N/A
4	19.2b Another who is a licensed physician/psychiatrist	Met/Partially Met/Not Met	N/A
6	19.2c A representative of the Office of Recipients Rights shall be a non-voting, ex-officio member.	Met/Partially Met/Not Met	N/A
7	19.2d The Committee and Committee Chair are appointed by the agency for a term of no more than two years. Members may be reappointed for consecutive terms.	Met/Partially Met/Not Met	N/A
8	19.3 Person Centered Plans with restrictive and intrusive, techniques are accompanied by and include the approved behavior plan and special consent form from consumer or the parent/guardian prior to implementation of plan. Annual signed special consent.	Met/Partially Met/Not Met	N/A
9	19.4 All plans with restrictive and intrusive interventions must be reviewed at a minimum of quarterly.	Met/Partially Met/Not Met	N/A
10	19.5 Each committee must establish a mechanism for expedited review of a proposed behavior treatment plan in	Met/Partially Met/Not Met	N/A

	emergent situations. (Approved by chair and notification to the RRO).		
11	19.6 The Committee shall keep all its meeting minutes and clearly delineate the actions of the Committee.	Met/Partially Met/Not Met	N/A
12	19.7 A Committee member who has prepared a behavior treatment plan to be reviewed by the Committee shall recuse themselves from the final decision-making.	Met/Partially Met/Not Met	N/A
13	19.8 Evaluate the committee's effectiveness by stakeholders, including individuals with plans, family, and advocates.	Met/Partially Met/Not Met	N/A
14	19.9 The CMHSP quarterly tracks and analyzes the use of all physical management, involvement of law enforcement, and the use of intrusive and restrictive interventions.	Met/Partially Met/Not Met	N/A
15	19.10a Dates and numbers of interventions, behaviors that initiated the technique;	Met/Partially Met/Not Met	N/A
16	19.10b The settings (e.g., individual's home or work) where behaviors or interventions occurred;	Met/Partially Met/Not Met	N/A
17	19.10c Observations about any events, settings or factors that may have triggered the behavior;	Met/Partially Met/Not Met	N/A
18	19.10d Behaviors that initiated the techniques;	Met/Partially Met/Not Met	N/A
19	19.10e Documentation of analysis performed to determine the cause of the behaviors that precipitated the intervention;	Met/Partially Met/Not Met	N/A
20	19.10f Description of positive behavioral supports used;	Met/Partially Met/Not Met	N/A
21	19.10g Behaviors that resulted in termination of the interventions;	Met/Partially Met/Not Met	N/A
22	19.10h Length of time for each intervention;	Met/Partially Met/Not Met	N/A
23	19.10i Staff development and training and supervisory guidance to reduce the use of these interventions;	Met/Partially Met/Not Met	N/A
24	19.10j Review and modification or development, if needed, of the individual's behavior plan.	Met/Partially Met/Not Met	N/A
25	19.11 Should physical management or use of law enforcement be used more than 3 times in a 30 day period the plan is revisited and modified accordingly if needed?	Met/Partially Met/Not Met	N/A

26	19.12a Plans that are forwarded to the committee must be accompanied by: Results of assessment to rule out physical medical and environment causes of the challenging behavior;	Met/Partially Met/Not Met	N/A
27	19.12b A functional behavioral assessment;	Met/Partially Met/Not Met	N/A
28	19.12c Results of inquiries about any medical	Met/Partially Met/Not Met	N/A
30	19.12d Psychological or other factor that might put the individual subjected to intrusive or restrictive techniques at high risk of death injury or trauma.	Met/Partially Met/Not Met	N/A
31	19.12e Evidence of the kinds of positive supports or interventions, including amount scope and duration.	Met/Partially Met/Not Met	N/A
32	19.12f Evidence of continued efforts to find other options;	Met/Partially Met/Not Met	N/A
33	19.12g Peer reviewed literature or practice guidelines that support the proposed restrictive or intrusive intervention.	Met/Partially Met/Not Met	N/A
34	19.12h Reference to the literature should be included on new procedures, and where the intervention has limited or not support in the literature why the plan is the best option available.	Met/Partially Met/Not Met	N/A
35	19.12i The plan for monitoring and staff training to assure consistent implementation and documentation of the interventions.	Met/Partially Met/Not Met	N/A
36	19.13a Each Behavior Treatment Plan has: a. Goal-expected outcome of the Behavior Treatment Plan;	Met/Partially Met/Not Met	N/A
37	19.13b Objectives –baseline and steps to achieving the behavior goal;	Met/Partially Met/Not Met	N/A
38	19.13c Methodology-interventions implemented to decrease target behaviors, a schedule and /or timing and things to be done to increase additional adaptive behaviors;	Met/Partially Met/Not Met	N/A
39	19.13d Measurement-how the baseline will be established, what is being measured, and assessment of the impact of behavior treatment interventions on the individual;	Met/Partially Met/Not Met	N/A
40	19.13e Plan Review- frequency of reviewing collected data.	Met/Partially Met/Not Met	N/A

41	19.13f Staff In-Service –who is responsible for training staff and when the plan will be implemented?	Met/Partially Met/Not Met	N/A
42	19.13f.1 Were staff trained on the Behavior Treatment Plan?	Met/Partially Met/Not Met	N/A
43	19.13g Staff Responsible- the CM who will implement and manage the plan.	Met/Partially Met/Not Met	N/A

SECTION QUESTIONS	
Questions	

SECTIONS	
Section	