ACTION: Original

TO BE RESCINDED

5122-2-19 Hospital services (HS) behavior therapy rule.

The purpose of this rule shall be to facilitate the development of appropriate behavior therapy interventions in the inpatient services of the Ohio department of mental health (ODMH) hospitals, and to protect the rights of patients involved in behavior therapy.

"Behavior therapy" means the utilization of interventions in which positive reinforcers or regulated interventions (see page eight of "Behavior Therapy Manual") are applied in a systematic and contingent manner in the context of individual or group programs to change or manage behavior or facilitate improved self-control. The goal of behavior management is not to curtail or circumvent an individual's rights or human dignity, but rather to assist the individual in increasing his/her ability to exercise those rights. Prohibited actions may not be implemented under any circumstances (see page nine of "Behavior Therapy Manual").

"Behavior therapy plan/behavior plan" means an agreement negotiated with the person served, and as appropriate, parent or guardian, in which mutually agreeably behavior goals and interventions are specified.

ODMH is committed to ensuring that patients who are recovering from severe mental illnesses have meaningful choices and options. These include behavioral and cognitive behavioral interventions that have demonstrated efficacy. It is the goal of ODMH and each regional psychiatric hospital (RPH) to ensure that these intervention options are available to the patients they serve.

The hospital services behavior therapy committee (HSBTC) and committees at each RPH support the development and implementation of these interventions. These committees are also responsible for promoting proactive positive interventions and for overseeing behavioral and cognitive behavioral interventions to prevent practices that are harmful or abusive to patients, and to protect the rights of patients in these areas of practice.

(A) Hospital services behavior therapy committee (HSBTC)

The HSBTC is responsible for promoting proactive positive intervention and beneficial behavioral and cognitive behavioral interventions and preventing harmful or abusive practices. The committee reports to the medical director of ODMH.

(1) The membership of the committee consists primarily of mental health professionals. The medical director of ODMH shall appoint all members, and all members shall serve at the pleasure of the medical director. There will be at least one member from each RPH. This member shall also be a member of his/her respective RPH behavior therapy committee. One member of the committee will be from the Ohio legal rights service. A consumer who has previously

- received inpatient services in one of ODMH's RPH's may also be appointed to the committee. The medical director is an ex-officio member of the committee.
- (2) The HSBTC will determine its meeting schedule, but will meet at least once each quarter. The medical director will designate an HSBTC manager who will be responsible for coordinating the work of the committee with the medical director, e.g., notifying members of meetings, recording minutes of meetings, posting approved minutes on the ODMH intranet, and coordinating within the ODMH.
- (3) The medical director shall appoint a chairperson and a vice-chairperson for the committee. The chairperson and vice-chairperson shall serve a two-year term. The chairperson is responsible for conducting meetings and working with the HSBTC manager to ensure the effective functioning of the committee, and that the decisions of the committee are implemented. The vice-chairperson shall assume all of the duties and responsibilities of the chairperson in the chairperson's absence.

(B) RPH behavior therapy committee (RPHBTC)

- (1) Each RPH medical staff organization will have a behavior therapy committee or other committee designated to carry out the functions of the behavior therapy committee. Each RPHBTC will be responsible for promoting behavioral interventions at the RPH that will assist patients in their recovery. The RPHBTC will develop procedures for reviewing and approving all behavior plans. All behavior plans will be reviewed by the RPHBTC. Regulated interventions will not be implemented unless approved by the HSBTC. The HSBTC will monitor, at least monthly, the implementation of any behavior plan involving regulated interventions and will require revision or discontinuation if the plan is not effective.
- (2) The RPH chief executive officer shall appoint members and leadership of the RPHBTC upon recommendation of the RPH medical executive committee. One or more members of the RPHBTC will be recommended to the ODMH medical director to serve on the HSBTC. A consumer from outside of the RPH may be appointed to the RPHBTC.
- (3) The RPHBTC shall meet at least once each quarter. Minutes shall be kept of all meetings and shall be sent to the RPHBTC manager.

(C) Behavior therapy manual

- (1) The HSBTC shall maintain a behavior therapy manual that contains definitions of recommended, regulated, and prohibited behavior therapy interventions and forms for behavior therapy plans. The HSBTC is responsible for maintaining the list of recommended, regulated, and prohibited actions. Interventions and actions may not be added to, deleted from, or changed on the list by the HSBTC unless approved by the medical director. The HSBTC shall submit proposed changes to the medical director.
- (2) The behavior therapy manual shall be reviewed and updated at least annually by the HSBTC.

(D) Behavior therapy expertise

Each of the ODMH RPHs shall designate a qualified person as a behavior therapy specialist. The behavior therapy specialist shall be qualified by training and/or experience in behavior therapy, standards of practice, behavioral intervention and evaluation of specific behavioral techniques. The behavior therapy specialist qualifications will be further described in the behavior therapy manual. This person shall be available for case consultation and review, and management of special behavioral interventions, and have interactions with the HSBTC.

Five Year Review (FYR) Dates: Exempt

Certification

Date

Promulgated Under: 111.15 Statutory Authority: 5119.10 Rule Amplifies: 5119.10

Prior Effective Dates: 07/01/1980, 01/24/1991, 04/16/2001, 06/01/2003,

05/26/2008, 03/16/2010