



Category: A. Care Management Agency Staffing

Title: 1. Staff Training, Qualifications and Supervision

Applies to:

- St. Peter's Health Partners (SPHP)
- All SPHP Component Corporations **OR** Only the following Component Corporations: [\(Click here for a list\)](#)

- All SPHP Affiliates **OR** only the following Affiliates: [\(Click here for a list\)](#)
 All Capital Region Health Connections Care Management Agencies
- St. Peter's Health Partners Medical Associates (SHPMA)

Contents

PURPOSE 1

POLICY STATEMENTS 1

SCOPE OF AUTHORITY / COMPETENCY..... 2

DEFINITIONS..... 2

PROCEDURE 2

 A. Required Background Checks 2

 B. Staff Training..... 3

 C. Staff Qualifications..... 4

 D. Staff Supervision 6

REFERENCES..... 7

ATTACHMENT A: Background Check Instructions 9

PURPOSE

To define the expectations and guidelines specific to Care Management Agency staff.

POLICY STATEMENTS

The purpose of this policy is to provide a suggested set of trainings and core competencies for Care Coordinators provided through Grand Rounds, individual Care Management Agencies or at other locations within the community. Care Management Agencies may have additional

training and education requirements. Staff should ensure compliance with Care Management Agency policies as well as those of Capital Region Health Connections.

SCOPE OF AUTHORITY / COMPETENCY

All Care Management Agencies that comprise the Capital Region Health Connections Health Home program.

DEFINITIONS

Grand Rounds: training opportunities for Care Management Agency staff, arranged for by the Lead Health Home and the Staff Development Sub-committee of Capital Region Health Connections

Criminal History Records Check (CHRC): fingerprint-based, national FBI criminal history record check. These checks are submitted and processed using the Criminal History Record Check (CHR) application, which is housed within the Health Commerce System (HCS).

Staff Exclusion List (SEL): Statewide Register maintained by the NYS Justice Center. The SEL contains the names of people found responsible for serious or repeated acts of abuse and neglect. The SEL check is required for all newly hired staff that will have regular and substantial contact with individuals under the age of 21. The SEL should be completed prior to all other required background checks for practical purposes.

Statewide Central Registry (SCR): database of records of child abuse and maltreatment reports. The purpose of the Database Check is to find out if a prospective employee of a Health Home or Health Home Care Management Agency is a confirmed subject of an indicated report of child abuse or maltreatment. The SCR Database Check is required for those employees that will have regular and substantial contact with members, which includes but is not limited to Health Home Care Managers.

PROCEDURE

A. Required Background Checks

1. Pursuant to the New York State Fiscal Year 2019 Enacted Budget, any staff hired April 1, 2018 or later providing Care Coordination services or interacting directly with Health Home Candidates or Members are required to clear three background checks: Criminal History Records Check (CHRC), Statewide Central Registry (SCR) Database Check and the Justice Center Staff Exclusion List (SEL) check. Staff may not work with any Members under age 21 until these background checks are cleared.

2. Each Care Management Agency must have procedures in place to ensure these checks are completed for applicable staff. The Lead Health Home can assist Care Management Agencies, upon request, in getting set up to conduct all three required checks. Attachment A provides more details on each check and instructions for conducting the checks.

B. Staff Training

1. All staff working directly with Members must report suspected child abuse or maltreatment. Reports of suspected child abuse or maltreatment are to be made immediately by telephone, to the mandated reporter line at 1-800-635-1522. The mandated reporter line is available 24 hours a day, 7 days a week. This line is for professionals only and will not be provided to non-professionals / distributed publicly. The number for public distribution is 1-800-342-3720.
2. To ensure all staff working directly with Members are aware of the requirements as mandated reporters, training is required. The Office of Child and Family Services offers free training online for mandated reporters that can be completed at any time of day, any day of the week. Upon completion of the online training, participants will electronically receive a certificate of attendance. There are no costs associated with this requirement.
 - a. Free training for mandated reporters on the OCFS website:
https://ocfs.ny.gov/main/cps/Mandated_Reporter_Training.asp
 - b. Register for Mandated Reporter Training at the following link:
<https://www.nysmandatedreporter.org/RegistrationInstructions.aspx>
3. Trainings will be offered by Capital Region Health Connections' Staff Development Sub-committee. Care Management Agency staff should feel empowered to suggest topics for the Grand Round Training to the sub-committee. Such topics may include population-specific topics such as HARP and HCBS-specific trainings or trainings for high needs or high-risk populations.
4. When warranted, Capital Region Health Connections administrative staff will plan and host education sessions on certain topics. Education sessions are longer (half day or full day) training events to cover larger topics in which a large amount of training is required. Depending on the topic, education sessions may be mandated for certain staff.
5. The Lead Health Home will provide information as it becomes available on any relevant trainings offered by any community agencies or providers. At a minimum, any information received about the following types of training will be provided to all Care Management Agencies for promulgation to all staff.

- Marketing Health Home care coordination services
 - Typical care management needs of populations with multiple co-morbidities
 - Evidence-based methods for increasing engagement including
 - Motivational interviewing
 - Recovery-oriented practices
 - Person-centered planning
 - Role and benefit of Certified Peer Specialists / Peer Advocates
 - Wellness Recovery Action Plans (WRAP)
 - Outreach and engagement strategies for member who are disengaged from care or have difficulty adhering to treatment recommendations
 - The availability and range of services that would be beneficial to health Home Members
 - Training on any state required assessment tools
6. At a minimum, Care Coordinators must be trained on HIPAA / Information Sharing and Cultural Competences by their employer.
7. It is recommended that Care Management Agency staff also be trained in:
- | | | |
|---------------------|----------------------|----------------------------------|
| • CPR and First Aid | • Ergonomics | • Narcan/Naloxone Administration |
| • Personal Safety | • Mandated Reporting | • Ethics and Boundaries |
| • Defensive Driving | • Safe Act | • Universal Precautions |
8. Care Coordinators completing the NYS Eligibility Assessment as part of the HARP program, are required to complete additional trainings. See Policy F1. Special Programs: HARP and HCBS policies and procedures for specific requirements.

C. Staff Qualifications

1. Capital Region Health Connections will allow Care Management Agencies to set their own standards for the qualifications of Care Coordinators. At a minimum, Care Coordinators must have an Associate’s Degree and experience working in the human services field, or a Bachelor’s Degree.
2. Care Coordinators serving the **AOT or SMI Health Home Plus** populations and those completing the Eligibility Assessment and Full HCBS Plan of Care for **HARP Enrolled Members** must meet the following criteria to be in compliance with State regulations.

Supervisors

Those supervising Care Coordinators serving the SMI HH+ population must be:

- a. a licensed level healthcare professional¹ with prior experience in a behavioral health setting
OR
- b. a Master’s level professional with two years prior supervisory experience in a behavioral health setting.

Care Coordinators

- a. Care Coordinators serving the SMI HH+ population must meet the education and experience requirements listed below.

Education Requirements and Years of Experience

Degree	Number of Years of Experience
Bachelors in an approved field	Two (2) years of experience
Masters in an approved field	One (1) year of experience
Credentialed Alcohol and Substance Abuse Counselor (CASAC)	Two (2) years of experience
Bachelor's or higher in any field	Three (3) years of experience OR Two (2) years of experience as a Health Home Care Coordinator serving the SMI SED population

- b. Approved field for degrees, as referenced above, include the following.
 - Child and Family Studies
 - Counseling
 - Nursing
 - Physical Therapy
 - Recreation
 - Rehabilitation
 - Sociology
 - Community Mental Health
 - Education
 - Occupational Therapy
 - Psychology
 - Recreational Therapy
 - Social Work
 - Speech and Hearing

Experience Requirements

- c. The experience referenced in section C1 above must include the following:
 - i. Providing direct services to people with Serious Mental Illness, developmental disabilities, alcoholism or substance abuse, and/or children with SED;
 - OR**
 - ii. Linking individuals with Serious Mental Illness, children with SED, developmental disabilities, and/or alcoholism or substance abuse to a broad range of services essential to successful living in a community setting (e.g. medical, psychiatric, social, educational, legal, housing and financial services).

¹ Licensed level healthcare professional includes: Physicians, Psychiatrists, Physician’s Assistants, Nurse Practitioners, Psychiatric Nurse Practitioners, Registered Professional Nurses, Licensed Practical Nurses, Licensed Psychologists, Licensed Clinical Social Workers, Licensed Master Social Workers, Licensed Mental Health Counselors, Licensed Marriage and Family Therapists, Licensed Psychoanalysts, Licensed Creative Arts Therapists, and Licensed Occupational Therapists.

For more on Special Programs Staff Qualifications see:

Policy F1. Special Programs: HARP and HCBS

Policy F2. Special Programs: Assisted Outpatient Treatment (AOT)

Policy F4. Special Programs: Serious Mental Illness Health Home Plus (SMI HH+)

3. Care Coordinators serving the **Health Home Plus HIV** population must meet the following criteria to be in compliance with State regulations.

Education and Experience

- a. Care Coordinators must have a Master or Bachelors degree in Health, Human Services, Education, Social Work or Mental Health AND one year qualifying experience.²

OR

- b. Associates degree in Health, Human Services, Social Work, Mental Health or certification as an R.N. or L.P.N. and two years qualifying experience.
- c. Navigators, community Health Workers or Peers must have a High School Diploma or GED; or CASAC; or Certification as a Peer or Community Health Worker and have the ability to read, write and carry out directions.

Supervision

Staff serving the HIV HH+ HIV population must receive supervision from a Supervisor with:

- a. Masters degree in Health, Human Services, Mental Health, Social Work and one year of supervisory experience and one year qualifying experience

OR

- b. Bachelors degree in Health, Human Services, Mental Health, Social Work and two years of supervisory experience and three years qualifying experience.

For more on HIV HH+ Staff Qualifications see Policy F5. Special Programs: HIV Health Home Plus (HIV HH+)

D. Staff Supervision

1. Care Coordinators must be provided sufficient supervision to assure that:
 - a. they acquire and maintain up-to-date knowledge,
 - b. the quality of work conforms to health home and agency standards and
 - c. they obtain the support needed to maintain confidence and succeed in the workplace.

² Qualifying experience means verifiable work with the target population, defined as individuals with HIV, history of mental illness, homelessness or substance abuse.

2. While each Care Management Agency is permitted to set their own schedules and formats for supervision, formal, regularly scheduled supervision at a consistent frequency is required.

REFERENCES

New York State Department of Health (February 1, 2021). [Background Check Requirements for Health Homes and Care Managers.](https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/policy/docs/hh0010_background_checks_policy.pdf)

(https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/policy/docs/hh0010_background_checks_policy.pdf)

New York State Department of Health, Office of Children and Family Services, Justice Center for Protection of People with Special Needs (April 2019). [New Background Checks and Other Requirements for Health Home Care Managers and Children's 1115 Waiver HCBS Providers.](https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/docs/background_check_requirements.pdf)

(https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/docs/background_check_requirements.pdf)

New York State Department of Health and Office of Mental Health (October 11, 2016). [Health Home Plus \(HH+\) Program Guidance: NYS OMH State Psychiatric Center \(State PC\) and Central New York Psychiatric Center and its Corrections-Based Mental Health Units \(CNYPC\) Adult Discharges.](https://www.omh.ny.gov/omhweb/adults/health_homes/state-pc-cnyhc-hh-guidance.pdf)

(https://www.omh.ny.gov/omhweb/adults/health_homes/state-pc-cnyhc-hh-guidance.pdf)

New York State Department of Health (October 5, 2015). [Health Home Standards and Requirements for Health Homes, Care Management Providers and Managed Care Organizations.](https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/docs/hh_mco_cm_standards.pdf)

(https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/docs/hh_mco_cm_standards.pdf)

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Replaces: Education and Training

- Care Management Agency Staffing: Staff Training and Qualifications (May 1, 2017)**
- Care Management Agency Staffing: Staff Training and Qualifications (November 15, 2017)**
- Care Management Agency Staffing: Staff Training and Qualifications (December 17, 2018)**
- Care Management Agency Staffing: Staff Training and Qualifications (April 1, 2019)**
- Care Management Agency Staffing: Staff Training and Qualifications (December 1, 2019)**
- Care Management Agency Staffing: Staff Training and Qualifications (April 1, 2021)**

ATTACHMENT A: Background Check Instructions

Staff Exclusion List (SEL) through NYS Justice Center

The SEL check is free and is required for all prospective Health Home Care Managers and other applicable Health Home employees and other applicable agency employees who require a SCR Database Check. Because the results of the SEL check are not transferrable from agency to agency, the check will need to be conducted for new hires even if they have previously cleared the check.

The SEL Check Process:

- Health Home Care Managers and other applicable Health Home employees are responsible for registering an Authorized Person with the NYS Justice Center and meeting any additional requirements to ensure completion of the SEL checks.
- Authorized person(s) are the staff at each agency that can request SEL checks online and receive results via email.
- Employers are required to retain documentation of the result for each SEL check.

Criminal History Records Check (CHRC) through NYS Department of Health

The Criminal History Record Check (CHRC) is a fingerprint-based, national FBI criminal history record check. These checks are submitted and processed using the Criminal History Record Check (CHR) application, which is housed within the Health Commerce System (HCS).

Effective April 1, 2018, Article 28-E of the Public Health Law requires a CHRC be conducted for all prospective employees that provide direct care to members under the age of 21, including Health Home Care Managers and other applicable Health Home employees. The CHRC must be completed for staff who will provide direct care or supervision. Health Home Care Managers and other applicable Health Home employees who previously had Criminal Background Checks (CBC) completed through the NYS Justice Center are required to have the CHRC because the previously conducted checks do not transfer, and the CBC does not meet the requirements of the CHRC.

The following titles are only exempt from the CHRC requirements if they are operating within their title:

- Professionals licensed under Title 8 of the NYS Education Law
- Licensed nursing home administrators, security guards, volunteers and students enrolled in a program leading to a professional license under Title 8 are not subject to the CHRC

An employee is operating within their title if their license was specifically required for their position. If a Title 8 licensee is not operating within their title, they are still subject to the CHRC.

Authorized Persons:

- Individual(s) within the “Administrator” role are responsible for maintaining CHRC “Authorized Person” (AP) access. When entering the CHRC application, select “Manage AP” in the toolbar or the “Manage Authorized Persons” quick link to add and/or remove a CHRC “Authorized Person”. Routine monitoring of CHRC AP access should be completed by the individual(s) within the “Administrator” role for continued compliance.
- Any designated AP may be contacted by the Department regarding the status of an employee. While providers are highly encouraged to assign more than one AP for backup purposes, providers are discouraged from having more than five assigned APs.
- Only individuals designated as a CHRC “Authorized Person” may contact CHRC for status updates, inquiries, results, etc.
- Authorized Persons should monitor the Document Viewer in the CHRC application on a daily basis to ensure timely receipt and review of time sensitive documents, including but not limited to Live Scan Requests, notification letters, and arrest notifications after hire.

The CHRC Process:

Employers of covered persons are responsible for requesting and processing the checks.

- Employers must ensure appropriate direct observation and evaluation of the *temporary employees*, effective July 1, 2019.
- Temporary employees are those whose CHRCs are pending.
- Per Chapter 57 of the Laws of 2019, effective July 1, 2019, temporary employees will not be able to provide direct care without supervision by an employee whose check has been successfully completed or by exempt staff.
- If an employee is later employed by another agency that requires a CHRC, the CHRC process will be expedited once the direct employer (the Health Home or Care Management Agency) submits their request for a CHRC. If the applicant has already been evaluated by DOH/CHRC, the direct employer will not receive a Live-Scan Request Letter. However, they will receive a letter of determination concerning employment eligibility. There is no additional fee in this situation and the expedited checks are typically processed in one (1) to two (2) weeks.
- There is a cost for the CHRC (2020 total cost of CHRC is \$102.00. Please note this is subject to change). The employer of record is responsible for the cost. These costs are statutorily prohibited from being passed on to the employee.
- There are some crimes which may statutorily disqualify a person from obtaining employment pursuant to Executive Law 845-b (5)(a). If the prospective employee has one of the listed convictions, he/she may only be approved for employment if the DOH determines, in its discretion, that approval of the application ... “will not in any way jeopardize the health, safety or welfare of the beneficiaries of such services.” This is a very high standard of review and the applicant will need to provide significant information to overcome a denial of employment eligibility. If the prospective employee’s convictions are for crimes other than those mentioned above, the DOH

“may approve or disapprove the prospective employee’s eligibility for employment by the provider, consistent with article twenty-three-A of the correction law.” See, Executive Law Sec. § 845-b (5) (b). The agency will receive CHRC Legal Determination Letters which are based on legal review of NYS and FBI criminal histories.

Sample notification letters that are favorable to the applicant and which are sent only to the health care provider include the following.

1. **No Hits No Violations** letter issued when both the Department of Criminal Justice Services (DCJS) and FBI report the applicant has no criminal history at all.

Letters that leave the hiring decision to the provider/employer

2. **Legal no conviction/no hit** letter issued following receipt of a criminal history record indicating charges or convictions by the DCJS or the FBI which upon investigation and legal determination are not reportable convictions for any felony or misdemeanor (for example violations, infractions, sealed records, family court, military non-judicial punishment).
3. **DOH non-denial (a)** letter issued when an applicant has submitted, in advance of an initial attorney review, sufficient rehabilitation materials to attenuate a statutorily disqualifying conviction.
4. **DOH non-denial (b)** letter issued following application of Article 23-A of the NYS Correction Law and initial attorney review of an applicant’s record and legal determination made finding no direct relationship or unreasonable risk to the granting of employment eligibility regarding that criminal history (for example, a 1999 Class U misdemeanor DWI).
5. **Open charges/not held in abeyance** letter issued when the applicant has a pending minor misdemeanor matter which does not relate to the proposed employment in a health care setting or creates an unreasonable risk to patients or where the applicant has received an adjournment in contemplation of dismissal with respect to an open charge.

Letters communicate favorable final decisions rendered after the applicant submits rehabilitation information. These are issued following an attorney review of the applicant’s complete rehabilitation submission and a thorough DOH investigation concerning the circumstances of a crime.

6. **Final non-denial (a)** letter issued following the issuance of a pending denial letter where the applicant has submitted sufficient rehabilitation materials to attenuate a statutorily disqualifying conviction.
7. **Final non-denial (b)** letter issued following the issuance of a pending denial letter where the applicant has submitted sufficient rehabilitation materials to attenuate a discretionarily disqualifying conviction.

Letters that are unfavorable to the applicant and which are sent to both the health care provider and the applicant.

8. **Pending denial to provider/pending denial to employee** letters issued following attorney review of a perfected rap sheet where the applicant has misdemeanor and/or felony convictions which, upon legal review, contain either a statutorily or discretionarily disqualifying conviction and requesting the submission of rehabilitation documentation from the applicant.
9. **Final denial (a)** letter to provider/employee issued following the issuance of a pending denial letter where the applicant has not submitted sufficient rehabilitation materials to attenuate a statutorily disqualifying conviction.
10. **Final denial (b)** letter to provider/employee issued following the issuance of a pending denial letter where the applicant has not submitted sufficient rehabilitation materials to attenuate a discretionarily disqualifying conviction.
11. **Hold in abeyance** letter to provider/employee issued when the applicant has a pending felony, or a pending misdemeanor which relates to the proposed employment in a health care setting or creates an unreasonable risk to individuals enrolled in Health Homes.
12. **Charge notification-after hire** letter, concerning a subsequent arrest, is sent only to the health care employer. When subsequent arrests involve particularly egregious circumstances, DOH attorneys may also telephone the employer to read the charges to that employer, thereby allowing the employer to make a timely risk management decision concerning ongoing employment.

Statewide Central Register Database Check (SCR) through NYS OCFS

SCR Database Checks will be required for prospective employees hired on or after April 1, 2019 that will have the potential for regular and substantial contact with individuals under the age of 21. SCR Database Checks are not transferable and are prohibited from being re-disclosed. There is a cost for the SCR Database Check (2018-2019 SCR Database Check is \$25.00) that may be paid by either the employer or the employee. The payment must be submitted when the SCR Database Check request is submitted. Please note that if an SCR check was conducted within the last 6 months, and the results are still accessible in the Online Clearance System, the request for a new SCR check may not be submitted until the results are no longer in the system.

The SCR Database Process/Results:

If the prospective employee is not found to be a confirmed subject of an indicated report, the employer will receive notification that the SCR has no record of the applicant being an indicated subject of a report of child abuse or maltreatment.

If the prospective employee is found to be the subject of an indicated report, the SCR is required to send a letter informing the applicant of their due process rights. The applicant is given ninety (90) days to respond back to the SCR in writing that they want to exercise their due process rights through an administrative review and fair hearing process. If the SCR does not

hear back from the applicant within that timeframe, the SCR will then notify the Health Home or CMA that the SCR has a record of the applicant being an indicated subject of a report.

- If a Health Home or CMA is notified that the SCR has a record of an applicant being an indicated subject of a report, the notification will not contain any details related to the report of abuse or maltreatment.
- An indicated SCR report is not an automatic exclusion from employment.
- The Health Home or CMA can request that the prospective employee sign an authorization for release of information allowing the prospective employer to request and obtain a copy of the indicated SCR report. After reviewing the records, it is the prospective employer's discretion as to whether they hire or do not hire the prospective employee.