Behavioral Support Consultation
Changes to Clinical Criteria
Behavioral Support Consultation Agenda

• Briefly review the BSC service

• Introduce new Proposed Core BSC Amounts & discuss process that BSCs will use to arrive at these amounts for each individual

• Introduce new BSCPAR document

• Case studies
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BSC supports the person’s successful achievement of Vision-driven desired outcomes by designing strategies for the person and the team to implement. A quality foundation for BSC has several components.

These are:

• Assessment of the person and his/her environment, including barriers to independent functioning

• Design and testing of strategies to address concerns and build on strengths and skills for independence

• Writing and training plans in a way that the person and Direct Support Personnel (DSP) can easily understand and implement

• Evaluating progress to determine if plan strategies are successful
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All DDW recipients may receive an assessment to determine need for BSC services. IDT is responsible to recognize the need.

Clinical necessity criteria for ongoing BSC:

• Must meet one or more clinical necessity criteria
• Must NOT meet any exclusion criteria

If needed, additional units may be gotten through:

• New Allocation factor
• Complex Service Needs
• Preliminary Risk Screening and Consultation (PRSC) Add-On
  • Initial or Ongoing
• Crisis Supports Add-On
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• Based on utilization information from the field, the majority of these components can typically be completed within Core BSC amounts

• Fewer BSC supports are needed (fading status) when the person and team are confident and successful in implementing strategies

• Critical factors or situations (inappropriate or offending sexual behaviors, need for crisis supports, diagnoses that make support less predictable or more complex) may require more BSC time

• Additional units are able to be allocated for the task
Proposed Core BSC Amounts

• Proposed core BSC amounts are based on the specific skill, behavioral & training needs of the individual & their team

• Hour/unit amounts and BSC rates (standard or incentive) are the same

• OR approves services based on clinical justification for Core BSC amounts & any additional BSC units; approvals can be over or under the proposed amounts
Changes to Clinical Criteria for Behavioral Support Consultation

• Until now, Core Budget Amounts for Behavior Support Consultation have been tied to NM DDW Groups
  • DDW Groups A, B, D, E & F received Core Budget Amounts of 30 hours/120 units
  • DDW Group C received Core Budget Amounts of 48 hours/192 units
  • DDW Group G received Core Budget Amounts of 72 hours/288 units

• Since we have discontinued the SIS, Proposed Core BSC amounts will now be determined by the Behavioral Support Consultant (during the PBSA process) using the clinical descriptions.
Process: Proposed Core BSC Amounts and Developing an ISP & a BSC Budget

• In preparation of the annual IDT to develop the ISP, BSC completes an annual Positive Behavior Supports Assessment (PBSA). During this:
  • BSC makes determination of which Proposed Core BSC Amounts adequately address the individual’s needs based on their assessment (which includes history & current behavioral support needs) using the Proposed Core BSC Amounts descriptions in Appendix B of the Clinical Criteria as a guideline
  • BSC submits PBSA to CM two weeks prior to the meeting
  • Case Manager guides team in Person Centered Thinking
Changes to Clinical Criteria for Behavioral Support Consultation

Proposed Core BSC Amount 1-Basic (30 hours/120 units)

• Intellectual disabilities range from mild disabilities and minimal intermittent support needs to those requiring maximum assistance with Activities of Daily Living (ADLs) due to cognitive or physical support needs.

• Mild to average behavioral support needs--they may receive BSC to learn positive skills (e.g., better social skills; better compliance with medical or psychiatric recommendations & care; successful employment; greater independence in a variety of settings)

• Address behavior that is undesirable, may disrupt relationships and result in harm to self or others.
Changes to Clinical Criteria for Behavioral Support Consultation

Proposed Core BSC Amount 2–Moderate (48 hours/192 units)

• Mild to above average support needs and moderate to above average behavioral challenges and/or skills deficits

• Receive support in development of positive skills that contribute to outcomes such as successful employment and greater independence (e.g., through improved social skills or better individual and team management/maintenance of emotional well-being)

• Address behavior that is undesirable, may disrupt relationships and potentially result in harm to self or others.
Changes to Clinical Criteria for Behavioral Support Consultation

Proposed Core BSC Amount 3–Extensive (72 hours/288 units)

• Mild to above average support needs and extraordinary behavioral support needs

• Receive BSC support in development of positive skills that contribute to successful employment, greater independence, and/or reduced behavioral challenges (e.g., such as improved capacity to control physical aggression toward self or others, or sexually inappropriate or offensive behavior toward others)

• Receive support to reduce behaviors that result in physical injury and/or great emotional harm and that jeopardize the health and safety of the individual, his or her peers, staff, family, and community members.
BSCPAR

- Few differences between old BSCPAR and new one

- Names of Core BSC Amounts—Basic 1, Moderate 2, & Extensive 3

- Form itself is different—Now a Word document where you can write text and numbers in certain fields, but cannot edit other areas

- Form does NOT calculate!
Case Studies

General Questions to consider:

• What proposed core units do you expect the BSC would recommend?

• What documents could help demonstrate this decision?

• Where would you look in the ISP for this information?