External Program Review Committee Requests for approval
subcommittee minutes [DRAFT]

Date of meeting: Oct. 15, 2018
DSD liaison: Stacie Enders
Location: Minnesota Department of Human Services, Room 5335, 540 Cedar St., St. Paul 55101. Most members of the committee, however, participated through an online video conference line.
In attendance: Melanie Eidsmoe, Barbara White, Stacy Danov, Dan Baker
Absent: Danielle Bishop

Discussion

The subcommittee will use the following determination letters: Subpart 3A and Subpart 3B.
Subpart 3A: Recommendation for approval or denial [DRAFT]

Minn. R. 9544.0130, subp. 3A
Request for emergency use of procedures

Background information

Provider name ("Provider"): 
Person's name ("Person"): 
Person’s date of birth: 
Requested emergency procedure ("Procedure"): 
Requested duration of approval (if submitted): 
Date of committee review: 
Providers’ request to use [ ] with [ ] “person” is before the External Program Review Committee (EPRC) for the EPRC’s approval, and is made pursuant to Minn. R. 9544.0130, subp. 3A.

Findings and determination

Based upon provider’s request, the documentation submitted and information obtained during an onsite visit (if applicable), the EPRC makes the following findings and determination:

- The most recent positive support transition plan is dated [ ] and was reviewed [ ].
- The positive support transition plans document the emergency use of [ ].
- The provider has/has not made a good-faith effort to reduce the need for the procedure, specifically demonstrated by:
  - [Insert details]
- The provider has/has not shown that the emergency use of procedure(s) is necessary to protect a person from imminent risk of serious injury as defined in Minn. Stat. § 245.91, subd. 6, because of self-injurious behavior (examples of behavior provided in Minn. Stat. § 245D.02, subd. 15b). Specifically:
  - [Insert details]
- As the record does/does not support a determination that the emergency use of the procedures are necessary to protect the person from imminent risk of serious injury, the EPRC recommends the request be approved/denied. [Pick one of the following]
  - The denial determination is based upon the entirety of the record as submitted. Sufficient documentation was not provided in the following areas:
    - [Insert details]
  - The approval determination is based upon the entirety of the record as submitted, including the following documentation received by the EPRC:
    - A copy of the person's current positive support transition plans and copies of each positive support transition plan review containing data on the progress of the plan from the previous year
    - Documentation of effort(s) to eliminate the use of the procedures that had been part of approved positive support transition plans
- Justification for the continued use of the procedures that identifies the imminent risk of serious injury due to the person's self-injurious behavior if the procedures were eliminated
- Documentation of the clinicians consulted in creating and maintaining the positive support transition plans
- Documentation of the expanded support team’s approval.

- If approved, insert the following details:
  - The EPRC recommends the request be approved for ___. The length of time for approval is supported by ___.
  - The provider must meet the following additional terms or conditions specific to this limited approval:
    - [Insert details]

**Committee recommendation**

The EPRC completed its review on ___ and makes the following recommendation to the commissioner:

The EPRC recommends ___ of the provider’s requests to use ___ with the person.
Subpart 3B: Recommendation for approval or denial [DRAFT]

Minn. R. 9544.0130, Subp. 3B
Request for use of prohibited procedures

Background information

Provider name ("Provider"):  
Person's name ("Person"):  
Person’s date of birth:  
Requested procedure ("Procedure"):  
Requested duration of approval (if submitted):  
Date of committee review:  

Provider’s request to use [ ] with [ ] “person” is before the External Program Review Committee (EPRC) for the EPRC’s approval, and is made pursuant to Minn. R. 9544.0130, subp. 3B.

Findings and determination

Based upon provider’s request, the documentation submitted and information obtained during an onsite visit (if applicable), the EPRC makes the following findings and determination:

- The procedure(s) is not specifically prohibited by Minn. R. 9544.0060 or permitted by Minn. R. 9544.0050.
- The provider has/has not made a good-faith effort to reduce the need for the procedure, specifically demonstrated by:
  - [Insert details]
- The provider has/has not shown that the procedure is necessary to protect the person’s health and safety for a limited time while positive-support strategies are developed and implemented. Specifically:
  - [Insert details]
- As the record does/does not support a determination that the emergency use of the procedures are necessary to protect the person’s health and safety for a limited time, the EPRC recommends the request be approved/denied. [Pick one of the following]
  - The denial determination is based upon the entirety of the record as submitted. Sufficient documentation was not provided in the following areas:
    - [Insert details]
  - The approval determination is based upon the entirety of the record as submitted, including the following documentation received by the EPRC:
    - A copy of the person’s current positive support transition plan, copies of each positive support transition plan review, if any, and data on the interfering behavior
    - Documentation of methods the provider has tried to reduce and eliminate the incidence of interfering behavior that have not been successful
    - Documentation of the assessments performed to determine the function of the behavior for which the interventions have been developed

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- Documentation of a good-faith effort to eliminate the use of restrictive interventions currently in use
- Documentation that the interfering behavior is unlikely to be prevented in the immediate future by a reasonable increase in staffing or the provision of other positive supports
- Justification for the use of the procedure that identifies the imminent risk of serious injury due to the person's interfering behavior if the procedure were not used
- Documentation of the people consulted in creating and maintaining the current positive support transition plan
- Documentation of approval by the person's expanded support team of the submission to the committee of the request for use of a prohibited procedure
- Additional documentation as requested by the committee (if applicable). Specifically:
  - [Insert details]
  - If approved, insert the following details:
    - The EPRC recommends the request be approved for ___. The length of time for approval is supported by ___.
    - The provider must meet the following additional terms or conditions specific to this limited approval:
      - [Insert details]

**Committee recommendation**

The EPRC completed its review on ___ and makes the following **recommendation to the commissioner:**

The EPRC recommends **approval/denial** of the provider’s requests to use ___ with the person.