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Owner: Crystal Palmer: Director,
 Children's Initiatives
Policy Area: Children Services
References:

PARENT MANAGEMENT TRAINING OREGON MODEL (PMTO)

POLICY

It is the policy of Detroit Wayne Mental Health Authority (DWMHA) to provide Parent Management Training Oregon Model (PMTO) to promote and support minors to live in their home community with their families and achieve improved functioning in their homes, schools and communities.

PURPOSE

The purpose of this policy is to ensure the DWMHA, contractors and subcontractors provide evidence-based practices within its continuum of services in order to promote the best interest of the minor receiving services

APPLICATION

1. The following groups are required to implement and adhere to this policy: DWMHA Board, DWMHA Staff, Contractual Staff, Access Center, MCPN Staff, Network Providers, Crisis services vendor, Credentialing Verification Organization (CVO)
2. This policy serves the following populations: Children, SED, SUD, Autism
3. This policy impacts the following **contracts/service lines**: Medicaid, SUD, Autism, Grants, General Fund

KEYWORDS

1. Affiliate
2. Case Record:
3. Contracted County Department:
4. Contractor
5. Ecosystem:
6. Family Member
7. Fidelity of Implementation Rating System (FIMP)
8. Fidelity of Implementation Rating System specialist (FIMPer)
9. Individual Plan of Service/Person-Centered Planning:
10. Managers of Comprehensive Provider Networks (MCPN):
11. Minor:
12. Parent Management Training Oregon (PMTO):
13. Service Provider
14. Serious Emotional Disturbances (SED):

15. System of Care (SOC):

STANDARDS

1. Roles and Responsibilities

Roles and Responsibilities	
Provider Agency	Provides clinical and administrative support to clinicians to ensure success in the training and practice of PMTO
PMTO Clinician	Provides PMTO treatment to families and ensures timely assessment with Child & Adolescent Functioning Assessment Scale (CAFAS), treatment documentation, and fidelity
PMTO FIMPer	Scores treatment sessions with FIMP for purposes of sustaining fidelity of the PMTO method in Michigan, including certification and re-certification of PMTO Clinicians
PMTO Coach	Provides PMTO coaching to certified clinicians, clinicians-in-training, and peers in individual and group format
PMTO Trainer	Organizes, conducts, and sustains training for new PMTO clinicians through workshops and coaching
PMTO Consultant	Provides training and support for PMTO Trainers, Coaches and FIMPers
PMTO Regional Coordinator	Coordinates regional activities and sustains PMTO infrastructure within the region and an integrated process across the state
PMTO State Coordinator	Coordinates the state implementation and infrastructure of PMTO
Michigan Department of Health and Human Services	Provides policy, direction and support for implementation and sustained adherence to the PMTO model
Implementation Sciences International, Inc. (ISII)	Monitors fidelity, provides consultation and training as requested

2. Responsibility of the DWMHA:

- a. Develop and maintain an infrastructure that supports the fidelity, quality and growth of PMTO in Wayne County.
- b. To coordinate regional activities that sustains the local PMTO infrastructure and ensures integration in the state PMTO structure.
- c. To participate in all statewide PMTO activities related to model fidelity, development and implementation to ensure consistency of Wayne County PMTO with Michigan PMTO.
- d. To ensure the model is developed and maintained within Wayne County's SOC for children with SED in order to promote the values, practices and principles of SOC within the Authority's continuum of services for children.
- e. To ensure availability and access to PMTO when clinically and developmentally appropriate.
- f. Support development of the PMTO workforce as defined in the MDHHS PMTO requirement to ensure sustainable quality and fidelity (October 2009)

3. Responsibility of the Contractor:

- a. Contractors shall ensure that adherence to this policy, including development, implementation and monitoring of any policies and procedures relevant to this policy, is carried out with regard to the cultural, ethnic, gender and community values of the minors and families.
- b. Contractors shall collaborate with systems that are likely to affect the lives of minors and their families with an effort toward influencing an outcome that supports minors living with their families, including ensuring that the coordination of services and programs occurs within the community to better support improved functioning in the home, school and community of the minors.
- c. Contractors shall demonstrate and document activities that engage families in collaborative partnerships and community support systems so services are sufficiently comprehensive to support minors living with their families and

supports improved functioning in their home, school and community.

- d. Contractors shall develop, administer, provide and coordinate services which are family focused within the context of the person and family centered planning model.

QUALITY ASSURANCE/IMPROVEMENT

DWMHA shall review and monitor contractor adherence to this policy as one element in its network management program, and as one element of the QAPIP Goals and Objectives.

The quality improvement programs of MCPNs, their subcontractors, and direct contractors must include measures for both the monitoring of and the continuous improvement of the programs or processes described in this policy.

COMPLIANCE WITH ALL APPLICABLE LAWS

DWMHA staff, MCPNs, contractors, and subcontractors are bound by all applicable local, state and federal laws, rules, regulations and policies, all federal waiver requirements, state and county contractual requirements, policies, and administrative directives, as amended.

LEGAL AUTHORITY

1. Michigan Mental Health Code, P.A. 258 of 1974, as amended.
2. Michigan Department of Health and Human Services, PMTO requirement to ensure sustainable quality and fidelity, October 2009

RELATED POLICIES

1. Individual Plan of Service/Person Centered Planning
2. Children Diagnostic Treatment Services Program

RELATED DEPARTMENTS

1. Administration
2. Claims Management
3. Clinical Practice Improvement
4. Compliance
5. Customer Service
6. Information Technology
7. Integrated Health Care
8. Managed Care Operations
9. Quality Improvement
10. Recipient Rights
11. Substance Use Disorders
12. Utilization Management

CLINICAL POLICY

YES

INTERNAL/EXTERNAL POLICY

EXTERNAL

Attachments:

[PMTO Requirements to Ensure Sustainable Fidelity and Quality](#)

Approval Signatures

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Dana Lasenby: Deputy Chief Operating Officer	06/2017
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crystal Palmer: Director, Children's Initiatives	03/2017



PMTO
Requirements to
Ensure Sustainable
Fidelity and Quality
Michigan Department of
Community Health

October 2009

Luann J. Gray Laura A. Rains Marion S. Forgatch



Michigan Department of Community Health PMTO Certification Requirements

October 2009

Explanation of PMTO

Parent Management Training – Oregon model (PTMO™) is an evidence-based structured intervention to help parents and caregivers manage the behavior of their children. The PMTO method is designed to promote prosocial skills and cooperation and to prevent, reduce and reverse the development and maintenance of mild to moderate to severe conduct problems in children age 4 – 12. PMTO empowers parents as primary treatment agents to promote and sustain positive change in families.

History of PMTO, OSLC and ISII

Over the past 35 years, colleagues at the Oregon Social Learning Center (OSLC) have developed and tested theory-based interventions to treat and prevent conduct and associated problems in children and youth. This research, which has been supported by the National Institutes of Health (NIH), has generated a set of intervention programs that are now recognized as evidence-based practices. The basic model underlying these methods is PMTO. In order to extend these programs to the families who need help, a network of OSLC affiliated organizations was established. Implementation Sciences International, Inc. (ISII) is a research-based, non-profit organization providing training for mental health professionals in PMTO. Since 2001, ISII has become the driving force behind PMTO training for mental health professionals. A primary ISII mission is to ensure that PMTO is implemented with fidelity in community agencies that serve children and families.

History of Michigan's Implementation of PMTO

Parent Management Training Oregon (PMTO) was invited to Michigan in 2004. Visionaries Jim Wotring, former Director of Programs and Services for Children with Serious Emotional Disturbance (SED) at the Michigan Department of Community Health (MDCH), and Kay Hodges, Ph.D from Eastern Michigan University, were searching for an evidence-based model that would assist children with SED and their families. They contacted Marion Forgatch, Ph.D of Implementation Sciences International, Inc. (ISII) about the PMTO model and the possibility of implementing in Michigan.

2004

A pilot training of community mental health candidates from Oakland, Kalamazoo and Marquette counties produced 6 PMTO specialists.

2006

ISII continued training with community mental health candidates from throughout the state of Michigan and produced 18 PMTO specialists. This group is referred to as Generation I.

MDCH developed a State Coordinator position to assist with implementation of PMTO.

2007

Generation I began training an additional 93 community mental health candidates (Generation II).

MDCH divided the State into regions and coordinators were identified to support the regional implementation of PMTO.



Michigan Department of Community Health PMTO Certification Requirements

October 2009

2008

ISII began FIMP training with 7 PMTO specialists who would eventually become the State certification team.

2009

The State along with ISII began training new coaches to maintain the fidelity of both candidates and certified PMTO therapists. The State, along with ISII, is certifying generation II candidates.

MDCH is very committed to implementing PMTO in all Community Mental Health organizations throughout the state of Michigan.

Results thus far have demonstrated excellent outcomes (e.g., CAFAS, Caregiver Wishlist) for Michigan's youth with SED and their families. Under the guidance of Connie Conklin, Director of Programs and Services for Children, statewide PMTO implementation is continuing to move forward in training new candidates and identifying future coaches, certification evaluators (FIMPers) and trainers.

This document has been developed to assist with maintaining the sustainability, fidelity, and overall quality of PMTO.



Michigan Department of Community Health PMTO Certification Requirements

October 2009

Collaborations:

Funding for this documentation was provided by the Michigan Department of Community Health. Overall guidance and direction of this document was provided by Luann Gray, PMTO State Coordinator, Kalamazoo Community Mental Health and Substance Abuse Services. Significant guidance and direction was also provided by Laura Rains, Director of Training and Implementation, ISII; Marion Forgatch, Executive Director, ISII; and Constance Conklin, Director of Programs and Services for Children with Serious Emotional Disturbance Mental Health Services for Children and Families, Michigan Department of Community Health. Invaluable input and feedback on individual chapters was provided by regional coordinators from around the state, including: Mike Bach, Copper County Community Mental Health; Catherine Beagle, Community Mental Health for Central Michigan; Gail Blackwell, Livingston County Community Mental Health; Ann Heerde, Ottawa County Community Mental Health; Laura Lefever, The Children's Center; and Gwenda Summers, Ingham Counseling Center. A grateful acknowledgment goes out to regional coordinator Rosa Thomas, Bay Arenac Behavioral Health who assisted in the initial stages of developing the statewide implementation plan from which this document grew.

A special thanks to the hundreds of children and families who have helped strengthen our understanding of the PMTO model and helped influence the many agencies that now offer PMTO treatment. Additional thanks to therapists, trainers, coaches, supervisors and CEOs at agencies implementing PMTO for their insight and contributions to the many revisions of this document. Countless hours of collaboration brought this document to fruition, and skillful artists helped make it pleasing to the eye. We gratefully acknowledge Peter Dams, Pam Backus, Kelly Bryson, Laura Rains, and Heidi Hall for the layout, cleanup and copy editing done to this document.



Michigan Department of Community Health PMTO Certification Requirements

October 2009

Table of Contents

Roles and Responsibilities.....	6
Trainee Agency Resource Requirements.....	7
Training Site Resource Requirements.....	7
Agency Benefits.....	7
Supervisory Requirements.....	7
PMTO Clinician	8
Time Requirements.....	11
Materials Requirements.....	11
PMTO FIMPer	12
PMTO Coach	14
Coach Duties and Responsibilities.....	17
Material Requirements	17
PMTO Trainer.....	18
PMTO Regional Coordinator	20
PMTO State Coordinator.....	21
PMTO Consultant.....	223



**Michigan Department of Community Health
PMTO Certification Requirements**

October 2009

Roles and Responsibilities

Agency	Provides clinical and administrative support to clinician to ensure success in training and practice of PMTO
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PMTO State Coordinator	Coordinates state implementation and infrastructure of PMTO
Department of Community Health	Provides policy, direction and support for implementation and sustained adherence to the PMTO model
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Michigan Department of Community Health PMTO Certification Requirements

October 2009

Note: The numbering of requirements is for reference purposes only and does not denote priority.

Agency and Site Requirements - PMTO Clinician

Trainee Agency Resource Requirements

1. Provide sufficient time resources (e.g., travel time, workshop time, reduced case load during critical learning periods)
2. Ensure access to appropriate clientele to train and sustain PMTO training and practice
3. Manage financial considerations (e.g., mechanisms to support reimbursement for clinicians in fee-for-service arrangements; effect on productivity standards)
4. Provide necessary materials, equipment, and facilities (e.g., DVD camera, tripod, DVDs, white boards, incentives for families, video-recording space)
5. Provide necessary training and certification families within given time frames (access and authorization)
6. Provide encouragement and supportive environment for training activities
7. Provide appropriate consent procedures in cooperation with state
8. Provide appropriate level of computer and broadband internet access
9. Adhere to agency and clinician readiness checklist
10. Provide and encourage continuing outside coaching activities
 - a. Allow time for trainees to participate in individual and group coaching by PMTO coaches and trainers
 - b. PMTO coaches cannot assume legal supervisory responsibilities; therefore, the agency must still provide regular supervision
11. Provide secured storage of confidential materials (DVDs, session info forms, etc.)

Training Site Resource Requirements

1. Maintain a certified trainer on site
2. Register with the State as a PMTO training site
3. Sponsor or co-sponsor one complete PMTO training a minimum of every other year (e.g., time, funds, facilities for training, coaching, and FIMPing)
4. Cooperate with, support, and participate in Michigan's statewide efforts to sustain PMTO fidelity. This includes implementing appropriate procedures in agency (have or be affiliated with a FIMP coder, maintain fidelity in training, etc.)
5. Participate in region and/or statewide PMTO committee meetings.
6. Participate in the PMTO database and video streaming process.
7. Follow the Michigan Department of Community Health's IRB procedures and best practice guidelines
8. Participate in the following to support data collections: Administration of the Caregiver Wish List, the LOF/CAFAS project, and FIT (Family Interaction Task).

Agency Benefits

Agencies that have a coach on site are able to provide more intensive coaching to trainees within that agency. This more intensive coaching can be beneficial in the advancing of trainees through the certification process.

Supervisory Requirements

Supervisors are encouraged to attend supervisory seminars in order to promote agency support/assistance for clinicians to reach certification. Supervisory seminar discussion topics include: PMTO overview, coaching requirements, state progress updates, certification and recertification, how to support candidates, billing codes, etc. A goal is to create a networking climate for supervisors.



Michigan Department of Community Health PMTO Certification Requirements

October 2009

PMTO Clinician

Responsibilities	Provides PMTO treatment to families with CAFAS scores and documented fidelity
Agency Considerations	<ol style="list-style-type: none"> 1. The Prepaid Inpatient Health Plan (PIHP) and Comprehensive Specialty Support Network (CSSN)/Community Mental Health Service Provider (CMHSP) are advised to select training candidates who will maintain fidelity to this evidence-based practice. 2. Candidates will be available to participate fully in the PMTO training program (e.g., Course in Basic PMTO Model workshops, regular coaching, preparing for and achieving certification) for approximately 18 months. The training program includes practice with a minimum of 5 training families and feedback based on video-recorded intervention sessions. 3. When selecting PMTO trainees, agencies may give preferential selection to individuals demonstrating potential for future PMTO leadership roles (e.g., FIMPing, coaching, and training). 4. Refer to Readiness Checklists for PMTO Clinician (e.g., to be completed by clinician candidate, agency representative nominating candidate, and CMH or agency serving families of SED children).
Professional Qualifications	<ol style="list-style-type: none"> 1. Master's level clinician OR bachelor's level clinician with five years experience. 2. Provides mental health services to children and families 3. Meets Medicaid credentials and requirements for skill training or intervention
Selection Criteria	<p>To ensure successful PMTO training and certification, clinicians seeking PMTO Certification should be:</p> <ol style="list-style-type: none"> 1. CAFAS reliable 2. Available and eager to invest in a demanding learning process 3. Expected to remain with the agency long enough to offset the investment in the extensive training program (e.g., 2 years post-certification) 4. Experience working with adults and comfortable working with parents 5. Must video record all sessions 6. Comfortable participating in group learning experiences 7. Flexible, creative, and committed to working with families 8. Able to adopt new intervention strategies 9. Strength-based in their approach 10. Comfortable with behavioral approaches 11. Effective communicators
Selection Process	<ol style="list-style-type: none"> 1. To prepare for selection process, prospective candidates complete "Readiness Checklist for PMTO Clinician", resume and application, and turn in to candidate's agency.
Resource Requirements	<ol style="list-style-type: none"> 1. Trainee and trainee's employer must meet resource requirements. See Agency and Site Requirements – PMTO Clinician (page 3).



Michigan Department of Community Health PMTO Certification Requirements

October 2009

PMTO Clinician - continued

<p>Training Program</p>	<ol style="list-style-type: none"> 1. Training must be provided by an ISII or Michigan-certified Trainer 2. Complete 18 workshop days by certified PMTO Trainer 3. After 9 days of workshop training, begin working with training families 4. Strive to complete at least two families before or by final workshop 5. Video-record intervention sessions 6. Regularly attend coaching (group and individual) 7. Complete PMTO data requirements and paperwork in timely manner (e.g., within 1 week) 8. Upload session DVDs, in timely manner (e.g., within 1 week) 9. Make self available to receive feedback from Trainer via phone call, email, workshop, or database 10. Secure consent and release for all training families (e.g., any person appearing in videotaped session must sign a release)
<p>Certification:</p>	<ol style="list-style-type: none"> 1. After invitation by Trainer, begin two certification families 2. Secure consent and release for certification families 3. Submit four certification DVDs covering the following topics: <ul style="list-style-type: none"> • Intro Encouragement (IE) • Troubleshooting Encouragement (TE) • Intro Discipline (ID) • Troubleshooting Discipline (TD) 4. DVDs must demonstrate fidelity in each key area: by achieving mean score of 6.0 on the 5 FIMP dimensions (Knowledge, Structure, Teaching, Process Skills and Overall Quality), with no individual score at 3.0 or lower. Submit completed case and session forms for all certification sessions. 5. Candidate obtains consultation with Trainer, Coach and/or Regional Coordinator before submitting DVDs 6. Upload all cert family DVDs to PMTO Portal in timely manner and specify which are cert sessions 7. State Coordinator will assign DVDs to FIMP team (members external to candidate's region) 8. After all 4 sessions have been scored, State Coordinator will forward certification results to Regional Coordinator and Trainer 9. Trainer notifies trainee of pass/no pass and distributes feedback to trainees 10. Note: FIMP scores are not provided to trainees 11. If certification sessions do not achieve passing FIMP score, trainees will be invited to submit additional certification sessions
<p>Demonstrated Competency After Certification</p>	<ol style="list-style-type: none"> 1. Continue to build knowledge of PMTO core and supporting components 2. Active PMTO teaching and clinical skills 3. Knowledge of social interaction learning theory 4. Commitment to involving parents as treatment agents in use of positive parenting practices to help children make healthy adjustments 5. Cooperate with statewide PMTO policies, procedures and structure 6. Promote collaboration at all levels (agency, community, regional, statewide, purveyor)



Michigan Department of Community Health PMTO Certification Requirements

October 2009

PMTO Clinician - continued

<p>Expectations of Practice</p>	<ol style="list-style-type: none"> 1. Maintain PMTO caseload depending on the allotment within PMTO and clinical responsibility 2. Adhere to all state requirements in assessment tools and practices for PMTO model (e.g., CAFAS, Caregiver Wishlist and FIT) 3. Maintain enrollment in statewide PMTO provider database 4. Receive regular and consistent coaching (e.g. minimum of 9 coaching sessions that are observation based: via group, individual, portal; spaced evenly throughout the year). Emphasis is on coaching groups. 5. Maintain certification. See Recertification Requirements (below).
<p>Recertification:</p>	<ol style="list-style-type: none"> 1. Fidelity will be mentored throughout the year via regular participation in coaching. Additionally, certified clinicians submit one videotaped session from current PMTO work. 2. Content of recertification DVDs may be Troubleshooting Encouragement or Troubleshooting Discipline. (Alternate recertification requirements each year.) 3. Achieve minimum mean FIMP score of 6.0, with no individual score at 3.0 or lower 4. Secure consent and release 5. If recertification tapes do not pass fidelity, additional coaching required. Action plan to be developed with State Coordinator



Michigan Department of Community Health PMTO Certification Requirements

October 2009

PMTO Clinician – Agency and Site Requirements

Becoming a certified PMTO Clinician requires many resources from both the trainee and the trainee’s agency. The following outline is a yardstick for staff time and resources typically required for a PMTO Clinician in training. Please note that estimates will vary due to work style and skills.

Time Requirements		
Workshops and practice with families takes approximately 18 months. Time must be allowed for following up with state required consent procedures and CAFAS support. The required hours and total length of training may vary with Clinician skills and family participation.		
Activity or Event	Monthly Time Estimates	Annual Time Estimates <small>excludes travel and direct service time</small>
18 full days of PMTO training		144 hours
PMTO coaching	3 to 6 hours / month	36 to 72 hours
Preparation and follow-up per family (review and prepare materials, set up DVD, tailor homework to family, complete case and session forms, review DVD, make mid-week phone call with family, conduct assessments, etc.)	10 hours / month / family Average of 18 sessions per family = 45 hours Five families minimum required for certification	225 hours <i>total hours depend on number of families</i>
Total Training Cycle: 405 to 441 hours minimum		
Materials Requirements		
<ol style="list-style-type: none"> 1. White board or big Post-it paper 2. Markers 3. Available meeting space for family sessions 4. Rewards/ incentives 5. Ability to make copies of parent materials 6. Blank DVDs 7. DVD burner 8. TV and DVD player 9. Digital DVD camera 10. Computer (for connection to PMTO portal, to play DVD’s, etc.) 11. Broad band internet access (software, hardware) 12. Child care highly desirable since parent is the primary recipient of direct intervention 		



Michigan Department of Community Health PMTO Certification Requirements

October 2009

PMTO FIMPer

Responsibilities	Certifies and recertifies PMTO Clinicians
Professional Qualifications	<ol style="list-style-type: none"> 1. Master's level clinician 2. Certified PMTO Clinician registered in the State of Michigan 3. Required minimum of two years of child and family experience 4. Experience as PMTO clinician for a minimum of one year 5. Maintains minimum caseload of 1 PMTO family
Selection Criteria	<ol style="list-style-type: none"> 1. Demonstrated interest in sustaining PMTO fidelity within Michigan 2. Ability to specify behaviors for FIMP categories 3. Availability in terms of time and agency resources/ interests 4. References and demonstration of following: <ol style="list-style-type: none"> a. collaborative team player b. flexibility c. rigorous attention to detail d. positive attitude e. ability to meet deadlines f. diplomatic in delivery of feedback
Selection Process	<ol style="list-style-type: none"> 1. Regional Coordinators recommend Clinician to FIMP coordinator for position on FIMP team 2. FIMP coordinator consults with State Coordinator on recommendation 3. State Coordinator invites candidates based on Selection Criteria
Resource Requirements	<ol style="list-style-type: none"> 1. Trainee must meet resource requirements 2. Trainee's employer must meet resource requirements
FIMP Training Program	<ol style="list-style-type: none"> 1. Attend minimum of 90% training as provided by an ISII or Michigan-certified FIMP Trainer 2. Active participation in FIMP training <ol style="list-style-type: none"> a. Attends 90% monthly training meetings b. Carries out all FIMP assignments c. Completes paperwork as assigned d. Meets deadlines
FIMP Reliability Requirements	<ol style="list-style-type: none"> 1. Completes reliability test with 3 to 5 FIMP segments 2. Achieves reliable FIMP scores as specified by ISII
Maintaining Reliability	<ol style="list-style-type: none"> 1. Score monthly reliability DVD 2. Participate in monthly re-calibration meetings 3. Carry out all FIMP assignments 4. Meet deadlines



Michigan Department of Community Health PMTO Certification Requirements

October 2009

PMTO FIMPer - continued

<p>Demonstrated Competency After Achieving Reliability</p>	<ol style="list-style-type: none"> 1. Maintains reliability in FIMP rating system 2. Rates DVDs in cooperative arrangement with other state-wide PMTO members 3. Completes assignments within given timelines 4. Provides written justification for ratings (short, bulleted, FIMP qualities observed) 5. Demonstrated collaboration with other FIMP raters 6. Attends 90% retraining sessions 7. Participates in cooperative discussions regarding reliability issues
<p>Expectations of Practice</p>	<ol style="list-style-type: none"> 1. Continue utilizing PMTO model 2. Maintain enrollment in statewide PMTO provider database 3. Minimum two year commitment to team 4. Participate in reliability checks with ISII 5. Participate monthly in Michigan FIMP calibration 6. Review certification and recertification DVDs (e.g., from trainees, clinicians, and coaches) 7. If agreement cannot be reached about pass/no pass, DVDs will be sent to ISII for review as needed.



Michigan Department of Community Health PMTO Certification Requirements

October 2009

PMTO Coach

Coaching Roles	<table border="0"> <tr> <td data-bbox="418 401 678 453">Lead Coach</td> <td data-bbox="686 401 1383 453"> <ul style="list-style-type: none"> Organizes, oversees, and facilitates statewide coaching system, activities, and documents </td> </tr> <tr> <td data-bbox="418 464 678 516">Regional Coach</td> <td data-bbox="686 464 1383 516"> <ul style="list-style-type: none"> Builds, sustains, oversees, and facilitates coaching within region; documents participation, progress and feedback; communicates with Lead Coach </td> </tr> <tr> <td data-bbox="418 527 678 579">Coach</td> <td data-bbox="686 527 1383 579"> <ul style="list-style-type: none"> Coach certified clinicians, candidates and peers; participate in coaching activities; and communicate with Regional Coach </td> </tr> <tr> <td data-bbox="418 611 678 642">Coach Candidate</td> <td data-bbox="686 611 1383 642"> <ul style="list-style-type: none"> Participates in Coach Candidate Training Program </td> </tr> <tr> <td data-bbox="418 653 678 705">Invited Candidate</td> <td data-bbox="686 653 1383 705"> <ul style="list-style-type: none"> Participates in Coaching Seminars until invitation to Coach Candidate Training Program </td> </tr> </table>	Lead Coach	<ul style="list-style-type: none"> Organizes, oversees, and facilitates statewide coaching system, activities, and documents 	Regional Coach	<ul style="list-style-type: none"> Builds, sustains, oversees, and facilitates coaching within region; documents participation, progress and feedback; communicates with Lead Coach 	Coach	<ul style="list-style-type: none"> Coach certified clinicians, candidates and peers; participate in coaching activities; and communicate with Regional Coach 	Coach Candidate	<ul style="list-style-type: none"> Participates in Coach Candidate Training Program 	Invited Candidate	<ul style="list-style-type: none"> Participates in Coaching Seminars until invitation to Coach Candidate Training Program
Lead Coach	<ul style="list-style-type: none"> Organizes, oversees, and facilitates statewide coaching system, activities, and documents 										
Regional Coach	<ul style="list-style-type: none"> Builds, sustains, oversees, and facilitates coaching within region; documents participation, progress and feedback; communicates with Lead Coach 										
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Coach Candidate	<ul style="list-style-type: none"> Participates in Coach Candidate Training Program 										
Invited Candidate	<ul style="list-style-type: none"> Participates in Coaching Seminars until invitation to Coach Candidate Training Program 										
Responsibilities	Provides coaching to certified clinicians, clinicians-in-training, and peers in individual and group format										
Professional Qualifications	<ol style="list-style-type: none"> 1. Master's level clinician 2. Certified PMTO Clinician registered in the State of Michigan 3. Required minimum of two years of child and family experience 4. Experience as PMTO clinician for a minimum of one year 5. Maintains minimum caseload of 1 PMTO family 										
Selection Criteria	<ol style="list-style-type: none"> 1. Cooperative and collaborative 2. Strong commitment to sustain PMTO fidelity 3. Strong understanding of and commitment to working with PMTO populations 4. Extensive practice with PMTO application (varying family types, circumstances) 5. Skillful at providing strengths-based feedback 6. Committed to coaching 7. Seeks coaching for self 8. Effective at coaching peers 9. Outstanding teaching and process skills 10. Demonstrates exemplary clinical wisdom (FIMP scores in "Good Work" range) 11. Eager to continue learning and growing in own work 12. Effective leadership skills in small groups 13. Effective communication skills 14. Skillful at promoting team spirit. 										
Selection Process	<ol style="list-style-type: none"> 1. Regional Coordinator/ Regional Coach recommend Clinician to participate in State Coaching Seminar or Regional coaching training. 2. Regional Coordinator consults with State Coach and State Coordinator to generate roster of potential candidates per Selection Considerations 3. In accordance with state guidance, coaching pool will be adjusted by regional considerations with appropriate distribution of candidates selected by Regional Coordinator, State Coach and State Coordinator. 4. Has received mentoring by a seasoned coach by watching coaching in region and working with seasonal coach to fill our forms or debrief after a coaching with the coach. 										
Resource Requirements	<ol style="list-style-type: none"> 1. Coach's agency/PIHP must meet resource requirements. See Agency Readiness Checklist – Coach. 										



Michigan Department of Community Health PMTO Certification Requirements

October 2009

PMTO Coach - continued

<p>Coach Candidate Training Program</p>	<ol style="list-style-type: none"> 1. Invited Coach Candidates are selected by Trainers, Regional Coordinators and State Coordinator 2. Attend MDCH coaching seminars as follows: <ul style="list-style-type: none"> • Attend 2 coaching seminars as "invited candidate" and submit Coaching Seminar Observation form to Regional Coach and Lead Coach • Regional Coach and Lead Coach evaluate an advanced candidate to coach candidates. (State Coordinator assists if there is a discrepancy) 3. Lead/Regional Coach will create opportunities for Coach Candidate to conduct video-recorded coaching sessions with individual clinician candidates based on video-recorded family sessions 4. Receive mentoring from specified coach mentor (e.g., Regional Coach) minimum of twice/month 5. Receive peer coaching on own cases minimum of once/month 6. Seeks and responds to feedback from Regional Coach, Lead Coach, State Coordinator, and/or ISII mentor 7. Monitored by regional and state coordinators through consultations, evaluations, site visits, review of videos, and written coaching 8. Attend an additional minimum of 5 coaching seminar/ training days to be considered eligible to submit samples (DVDs) of his/her best work providing coaching 9. After completing the attendance requirement (see above) and being invited by the Lead Coach, Coaching Candidate submits 2 coaching DVDs for review. See Certification requirements (below). 10. Additional training may be provided by an ISII mentor. Michigan State PMTO Coordinator, and/or State Lead Coach if necessary
<p>Certification : Coach</p>	<ol style="list-style-type: none"> 1. Complete one full cycle of coaching seminars as outlined in PMTO Coach Section. 2. After completing the attendance requirement, Coach Candidate uploads 2 coaching DVDs for review by ISII and the State. 3. Content of the coaching session should reflect principles of a Reflective Team approach, as outlined in the PMTO Coaching notebook, which includes PMTO Coaching (2007) and Development of Coaches (2009). 4. Format of the DVDs can be 1 individual coaching and 1 group coaching or 2 group coaching sessions, however it is not acceptable to submit 2 individual coaching sessions. 5. Complete session forms for each DVD on MI Portal. 6. Candidate must have a mean FIMP score of 6.0 attained on each session, with no scores of 3 or lower on each session
<p>Demonstrated Competency After Certification</p>	<ol style="list-style-type: none"> 1. Ability to provide strength-based FIMP feedback 2. Ability to communicate supportively to enhance understanding of PMTO core competencies 3. Proficient in use of role play as a teaching tool 4. Ability to problem solve and brainstorm PMTO challenges 5. Highly and consistently organized 6. Maintains excellent communication across PMTO network (Trainer, Regional Coordinator, Lead Coach, etc) 7. Demonstrate consistent growth 8. Continue utilizing PMTO model; maintain enrollment in statewide PMTO database 9. Participate in trainings and help during workshops as necessary



Michigan Department of Community Health PMTO Certification Requirements

October 2009

PMTO Coach - continued

<p>Expectations of Practice</p>	<ol style="list-style-type: none"> 1. Consult twice-monthly with PMTO trainer to review candidates' progress, trainer's objectives, etc. 2. Submit 6-month schedule of coaching groups to Regional Coordinator 3. Conduct regularly scheduled videotaped coaching sessions <ul style="list-style-type: none"> • Individual and/or group (no fewer than 2 coaching sessions/month) • Maintain agreements with Regional Coordinators, State Coach and state PMTO structure (e.g., PMTO Requirements to Ensure Sustainability, Fidelity and Quality; PMTO Plan to Increase Coaches and FIMPers in the state of Michigan) • Provide coaching sessions for certified clinicians (e.g. group, individual, phone, portal; must be observation based and spaced evenly throughout the year). • Provide coaching sessions for candidate clinicians (minimum 2 coaching sessions/month) • Videotape all coaching activities • Obtain and turn in evaluations from coachees after each coaching session • Upload coaching sessions on PMTO portal with appropriate documentation within 1 week • Meet with Regional Coordinator monthly to review coaching DVDs, troubleshoot issues, receive support/coaching, turn in documentation of coaching • Maintain certification as Coach annually. See Recertification requirements (below).
<p>Recertification: Coach</p>	<ol style="list-style-type: none"> 1. Ongoing participation in annual coaching booster workshop/seminars 2. Upload 1 coaching DVD for review by the State and/or ISII. 3. Content of the coaching session should reflect principles of a Reflective Team approach, as outlined in the PMTO Coaching notebook, which includes PMTO Coaching (2007) and Development of Coaches (2009). 4. Format of the DVD is a group coaching session. 5. Complete session form for DVD on MI Portal. 6. Candidate must have a mean FIMP score of 6.0 attained on each session, with no scores of 3 or lower on each session 7. Submit monthly report to Regional Coordinator indicating coaching attendance, activities and evaluations.



Michigan Department of Community Health PMTO Certification Requirements

October 2009

PMTO Coach - Resource Requirements

Coach Duties and Responsibilities

1. Preparation for coaching groups
 - a. Oversee facility's logistics (booking location, materials, DVD, TV, internet access)
 - b. Support and encouragement of candidates, peers, etc. (incentives)
2. Consistent hosting and mentoring of coaching groups
3. Regular communication with Trainer(s) about candidate progress
4. Watch DVDs and provide individualized feedback (written, phone, face to face) with clinician candidates, certified clinicians, and peers
5. Participation in coaching activities with other coaches
6. Participation in training activities, as coordinated by Trainer
7. Monitoring of coachee progress
8. Travel time (e.g., coaching groups, trainings, individual meetings with trainees)
9. Provide evaluations for coaching groups and submit to Regional Coordinator
10. Complete attendance and coaching session forms and submit to Regional Coordinator and State Coordinator
11. Review trainees' evaluations of coach

Material Requirements

1. TV & DVD player
2. Camcorder and related accessories
3. Blank DVDs
4. Broad band Internet access
5. Computer with sufficient capacity and appropriate software to quickly upload and download video
6. Space for viewing DVDs, hosting coaching groups and providing individual coaching
7. Incentives for coaching group
8. White board/big paper/markers



**Michigan Department of Community Health
PMTO Certification Requirements**

October 2009

PMTO Trainer

Responsibilities	Facilitates PMTO workshops
Core competencies after certification	<ol style="list-style-type: none"> 1. Same as Clinician and Coach, plus: 2. Demonstrated facility in application of adult training processes with DVD examples of trainings 3. Demonstrated ability to apply theory of change 4. Demonstrated ability to work cooperatively with state coordinator, other trainers, regional coordinators, coaches 5. Adherence to state curriculum for PMTO training 6. Proficient and creative use of training material 7. Capacity to adapt materials to the needs of the trainees 8. Demonstrated ability to provide feedback to Clinicians and Coaches and trainees within seven calendar days 9. Demonstrated ability to enhance communication among PMTO teams to promote teamwork 10. Demonstrated proficiency in use of FIMP for clinical purposes 11. Demonstrated excellence in coaching and training skills
Professional Qualifications	<ol style="list-style-type: none"> 1. Master’s level clinician 2. Provides PMTO mental health services to children and families 3. Certified PMTO Clinician and Coach registered in the State of Michigan 4. Preferred two to three years of child/family experience 5. Preferred to have provided PMTO treatment for two years
Selection Considerations	<ol style="list-style-type: none"> 1. Cooperative and collaborative 2. Strong commitment to sustain PMTO fidelity 3. Strong understanding of and commitment to working with PMTO populations 4. Extensive practice with PMTO application (varying family types, circumstances) 5. Skillful at providing strength-based feedback 6. Commitment to coaching 7. Seeks coaching for self 8. Outstanding active teaching and process skills 9. Demonstrates exemplary clinical wisdom (FIMP scores 8s and 9s) 10. Eager to continue learning and growing in own work 11. Leadership skills in small groups 12. Effective communication skills 13. Strong desire to be Trainer 14. Ability to receive and integrate feedback 15. Never-give-up attitude 16. Charismatic presentation style
Selection Process	<ol style="list-style-type: none"> 1. State and Regional Coordinators will invite candidates per Selection Considerations
Resource Requirements	<ol style="list-style-type: none"> 1. Trainee must meet resource requirements 2. Trainee’s employer must meet resource requirements



Michigan Department of Community Health PMTO Certification Requirements

October 2009

PMTO Trainer - continued

Certification Training	<ol style="list-style-type: none"> 1. Training must be provided by an ISII or Michigan-certified Consultant 2. Complete a trainer workshop 3. Co-train with a Michigan certified Trainer or an ISII trainer (18 days minimum) 4. Conduct 18 workshop days providing theoretical and practical training as Trainer trainee. Recommended first class size: one Trainer per every four Clinician trainees. 5. Monitored by Trainer and/or regional and state coordinators through consultations, evaluations, site visits, review of videos 6. Consistent success in trainee's certification completion (e.g., passing FIMP scores)
Certification Requirements	<ol style="list-style-type: none"> 1. Regional Coordinator invites State Coordinator or Consultants to view tapes and make site visits for certification 2. Demonstrate fidelity in each key area: Knowledge, structure, teaching, process skills and overall development
Certification Process	<ol style="list-style-type: none"> 1. Trainer or consultant recommends Clinician to State Coordinator for certification 2. Consultant and/or State Coordinator review workshop teaching DVDs 3. May require Trainer trainee to complete another workshop tape 4. If DVDs meet requirements, Consultant and/or State Coordinator will issue certification
Recertification Expectations of Practice	<ol style="list-style-type: none"> 1. Ongoing participation in annual training booster workshop/meetings 1. Continue utilizing PMTO model 2. Provide 18 days of workshops approximately every other year 3. Maintain enrollment in statewide PMTO provider database 4. May participate in the selection of PMTO Clinician, Coach, and Trainer trainees 5. May monitor coaching assignments for Coach trainees 6. Ongoing consultation with Regional Coordinator and Consultant



**Michigan Department of Community Health
PMTO Certification Requirements**

October 2009

PMTO Regional Coordinator

Responsibilities	Coordinates regional rollout of PMTO
Professional Qualifications	<ol style="list-style-type: none"> 1. Master’s level clinician 2. Certified PMTO Clinician and Coach registered in the State of Michigan 3. Recommended PMTO FIMPer or Trainer 4. Required minimum of two years of child and family experience 5. Experience as certified PMTO clinician for a minimum of one year 6. Maintains minimum caseload of 1 PMTO family
Selection Considerations	<ol style="list-style-type: none"> 1. Strong leadership skills 2. Cooperative and collaborative within and across teams 3. Excellent public speaking ability 4. Ability to promote and sustain excellence at all levels of leadership within region 5. Excellent organizational skills 6. Strong commitment to PMTO method and fidelity 7. Strengths-based support to peers 8. Excellent interpersonal skills
Selection Process	<ol style="list-style-type: none"> 1. State Coordinator will invite candidates per Qualifications and Considerations
Resource Requirements	<ol style="list-style-type: none"> 1. Supported from their agency to participate and follow the “Duties and Responsibilities” listed below or in the FY Block Grant
Duties and Responsibilities	<ol style="list-style-type: none"> 1. Participate/oversee PMTO training of 18 days and coaching in region 2. Participate in statewide monthly meetings 3. Track staff participating in training and coaching 4. Consult with State Coordinator 1-2 times/month 5. Oversee and support fidelity monitoring in all areas 6. Involve families at various levels of PMTO 7. Build therapists, coaches and FIMPers in region/state according to state requirements 8. Ensure necessary assessment data are collected and reported to state and LOF 9. Conduct regional meetings to keep them updated with information on trainers, agencies, participating programs, etc 10. Participate in statewide sustainability of PMTO 11. Work on continually building infrastructure of region 12. Employ good problem solving skills 13. Submit a quarterly report to the State Coordinator 14. Provide constructive and positive support to State Coordinator and other team leaders statewide
Annual Review	<ol style="list-style-type: none"> 1. Meet with State Coordinator and Director of Programs and Services for Children with a Serious Emotional Disturbance to review duties and responsibilities



**Michigan Department of Community Health
PMTO Certification Requirements**

October 2009

PMTO State Coordinator

Responsibilities	Coordinates state rollout of PMTO
Professional Qualifications	<ol style="list-style-type: none"> 1. Master’s level clinician providing PMTO mental health services to children and families 2. Certified PMTO Clinician and certified Coach 3. Strong in FIMPing 4. Preferred three to four years of child/family experience 5. Has provided PMTO treatment for four years 6. Same as Trainer
Selection Considerations	<ol style="list-style-type: none"> 1. Strong and charismatic presentation skills 2. Outstanding leadership skills 3. Strong implementer 4. Outstanding interpersonal skills 5. High standards of excellence 6. Ability to negotiate within and across levels of leadership 7. Strong commitment to PMTO method and fidelity 8. Strength-based support to peers 9. Capacity to sustain balance in variety of situations 10. Out-of-the-box thinker 11. Commitment to service to families and children in need
Selection Process	<ol style="list-style-type: none"> 1. Is coordinated and selected by MDCH
Duties and Responsibilities	<ol style="list-style-type: none"> 1. Serve as the state liaison with Michigan PMTO participants at all levels, Implementation Sciences International Inc. (ISII), Prepaid Inpatient Health Plans (PIHP’s) and Community Mental Health Service Programs (CMHSP’s) across the state, including present and potential participants 2. Provide leadership for PMTO training, coaching, FIMPing, logistics, and other necessary activities 3. Organize training and coaching support systems for all PMTO staff participants 4. Coordinate training workshops with ISII and participating PIHP’s/CMHSP’s Monitor all training and coaching and CMHSP trainee activities to assure positive outcomes and smooth operation of trainings and their outcomes 5. Monitor/coordinate/update all areas of implementing the Michigan PMTO database and portal system in the state with ISII and PIHP’s/CMHSP’s 6. Monitor/coordinate all coaching activities with MDCH, ISII and participating PIHP’s/CMHSP’s



**Michigan Department of Community Health
PMTO Certification Requirements**

October 2009

PMTO State Coordinator - continued

<p>Duties and Responsibilities continued...</p>	<ol style="list-style-type: none"> 7. Monitor/coordinate all FIMP activities with ISII, MDCH, EMU and participating PIHP's/CMHSP's 8. Promote and support parent participation on committees, workgroups and in training activities 9. Monitor progress toward overall outcomes outlined in the PMTO logic Model 10. Coordinate with Eastern Michigan University on all PMTO evaluation activities 11. Support the expansion of evidence-based practices statewide 12. Work with MDCH staff internally, in the field, and with other agencies to provide PMTO training and coaching 13. Participate in grant writing activities to maximize funding for PMTO dissemination and evaluation 14. Participate in various conferences and trainings to promote PMTO 15. Participate on the PMTO state evidence based committee 16. Complete NASW application for CEU credits for PMTO training sponsored by MDCH 17. Coordinate state and regional coordinator meetings and phone calls
<p>Recertification</p>	<ol style="list-style-type: none"> 1. Meet with Director of Programs and Services for Children with a Serious Emotional Disturbance to review duties and responsibilities



**Michigan Department of Community Health
PMTO Certification Requirements**

October 2009

PMTO Consultant

The State and ISII will work on this section at a later date.

Responsibilities	Trains trainers
Professional Qualifications	<ol style="list-style-type: none"> 1. Master’s level clinician providing PMTO mental health services to children and families 2. Certified PMTO Clinician and certified coach 3. Strong in FIMPing 4. Preferred two to three five years of child / family experience 5. Has provided PMTO treatment for minimum of 5 years 6. Has conducted minimum of four training cycles
Selection Considerations	<ol style="list-style-type: none"> 1. Comfortable in front of an audience 2. Good public speaking ability 3. Ability to transfer skills as regional trainer to regional coordinator 4. Organizational skills 5. Consultant must meet resource requirements 6. Consultant’s employer must meet resource requirements
Selection Process	<ol style="list-style-type: none"> 1. State Coordinator will invite candidates per Selection Considerations
Resource Requirements	<ol style="list-style-type: none"> 1. Same as Trainer
Certification Training	<ol style="list-style-type: none"> 1. State Coordinator will work with ISII to set up consultant training 2. Complete training days to become consultant
Certification Requirements	<ol style="list-style-type: none"> 1. t.b.d.
Certification Process	<ol style="list-style-type: none"> 1. t.b.d.
Recertification	<ol style="list-style-type: none"> 1. Continue to train
Expectations of Practice	<ol style="list-style-type: none"> 1. Enrolled in a certified PMTO provider organization or training site